

Implementing New Medicines Service in Danish Community Pharmacies

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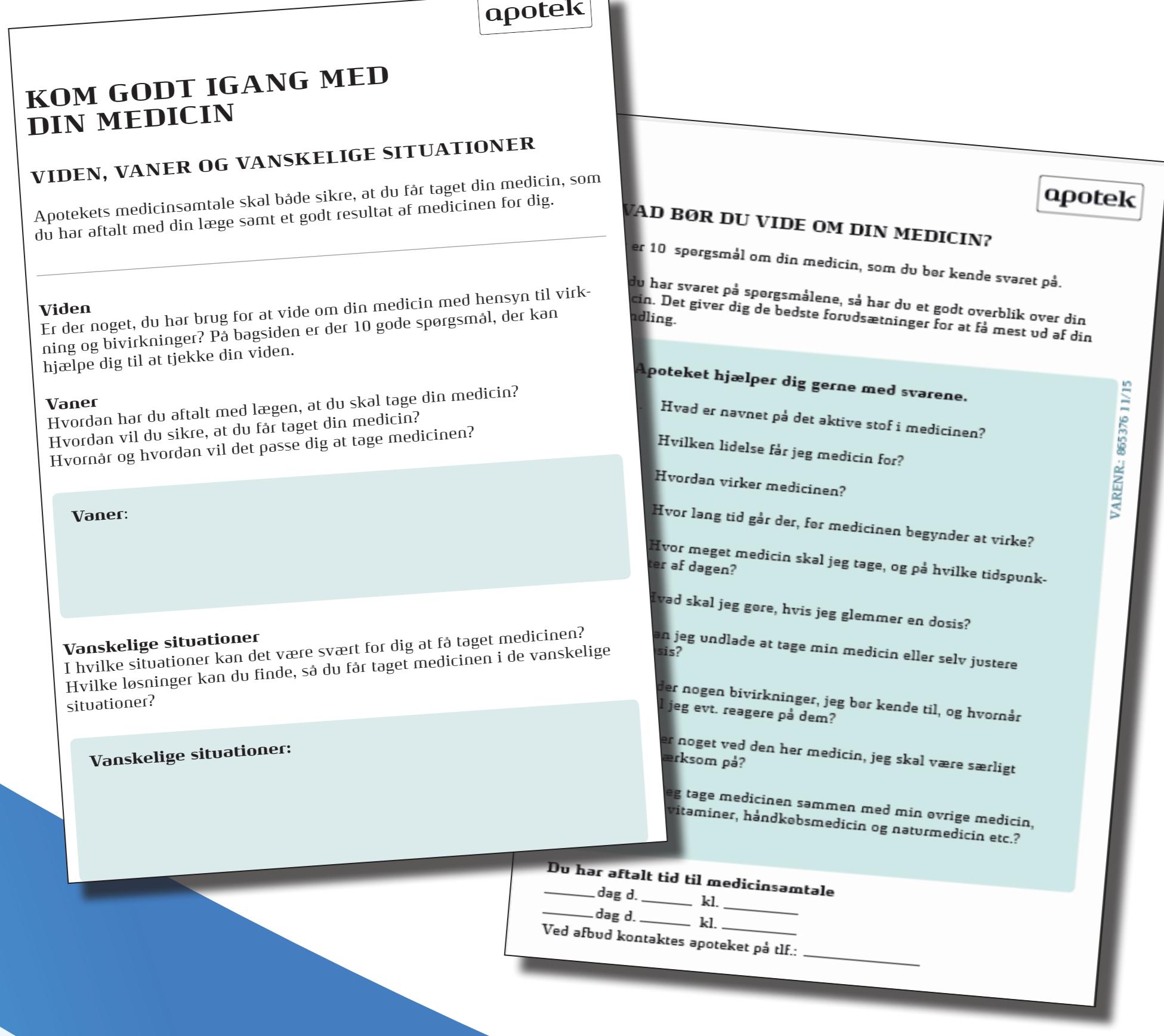
Introduction

January 1st 2016 it became mandatory for all Danish community pharmacies to offer New Medicines Service(NMS) to newly diagnosed chronically ill patients, within 6 months of diagnosis.¹ The service is divided into two conversations of approx. 10 minutes each with 2-4 weeks apart. The focus of the service is compliance and concordance. The content of the new healthcare service is based on several studies, highlighting the effect and necessity of a conversation with patients in connection with drug startup. In comparison with experiences from England, there is an increased effect of a medical treatment if patients are well informed from the beginning.^{2,3} The NMS is, at the same time, a unique opportunity for pharmacists to show their professional competency, thus marking themselves and the pharmacy as part of the local healthcare service.



Aims

In five Danish community pharmacies four different approaches to implementation of the New Medicines Service were studied in order to identify which methods might yield the greatest growth in the number of services provided. The chosen method was applied for three months, then number of services provided was compared to the number provided during the previous three months.

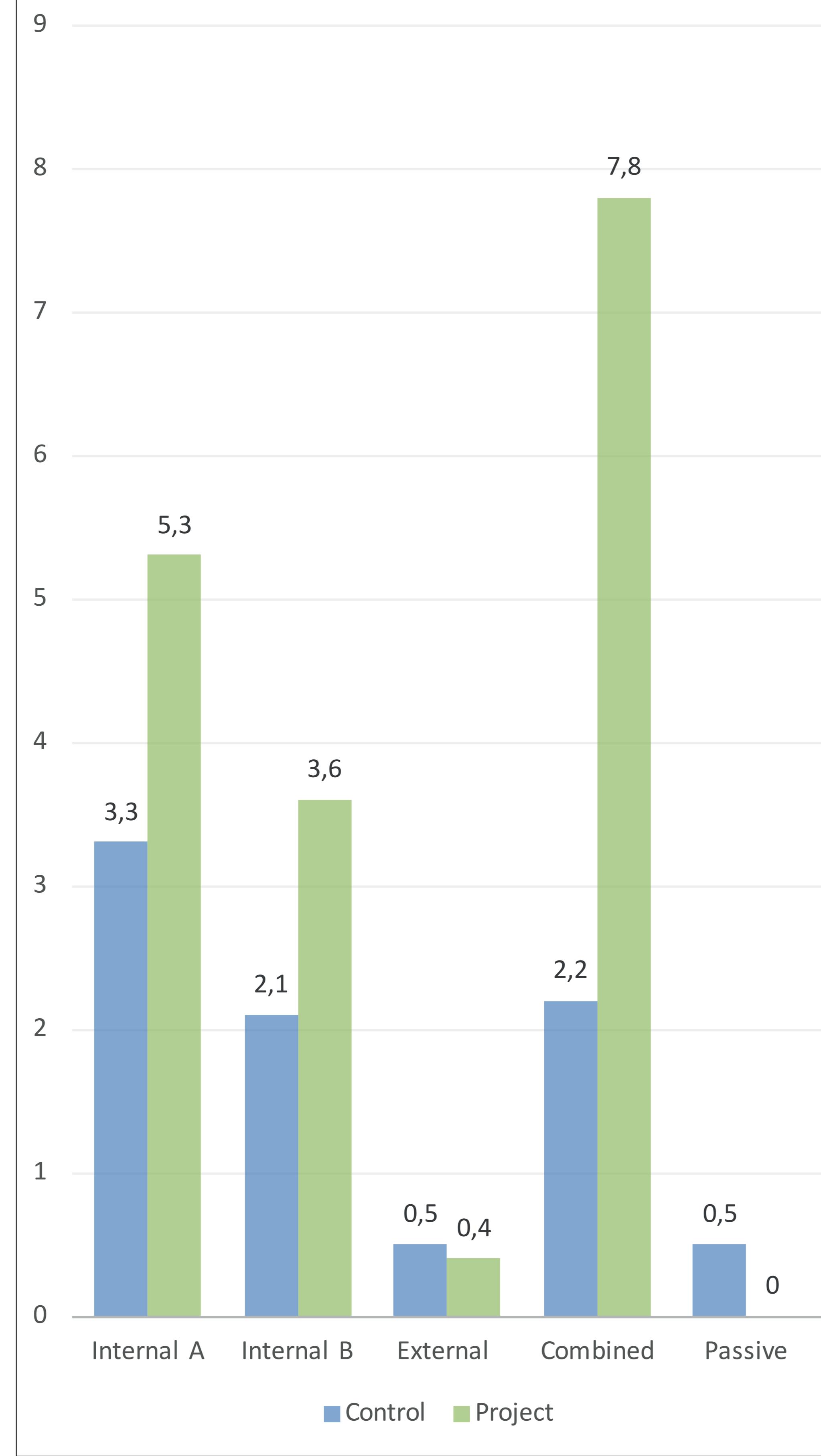


Method

Control period	March 1 st - May 31 st 2016
Project period	June 1 st - August 30 th 2016
Internal training	Internal training of the pharmacy staff. Weekly activities to ensure continuous focus.
External promotion	Marketing activities directly to the customer or other healthcare professionals without including the pharmacy staff.
Combined	A combination of internal training and external promotion.
Passive	None or very little activities.
Comparing results between pharmacies	To eliminate differences in customer flow and holiday seasons each pharmacy has gathered data on the number of prescription lines in the control and project period. The results are shown in no. of NMS per 10,000 prescription lines.

Results

Number of NMSs per 10,000 prescription-lines



Conclusion

Passive and external marketing methods produced no growth in the number of NMS. Internal training of staff resulted in increases of 61% and 71% compared to the reference period. The method combining internal training and external marketing gave an increase of 255%, but only one NMS was requested by the patient.

The combined method may have caused a synergistic effect throughout the staff as it resulted in the largest increase in no. of NMS. A solid and continued support from the entire staff and management is crucial to implementation of a new healthcare service. Regular training, reminders and internal competitions are also valuable tools for successful implementation.

References

- Bekendtgørelse om medicinsamtale på apotek. <https://www.retsinformation.dk/forms/R0710.aspx?id=173251>
- Farmaci 10, november 2015.
- Elliott RA, Boyd MJ, Salema N, et al. Supporting adherence for people starting a new medication for a long-term condition through community pharmacies: a pragmatic randomised controlled trial of the New Medicine Service BMJ Qual Saf 2016;25:747-758.

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