**KCC Community MAR Chart Pilot Service Specification**

1. **Background**
	1. This Specification has been co-produced by Kent County Council and Kent Local Pharmaceutical Committee to establish a funded, formalised and consistent process for issuing MAR Charts.
	2. The Medication Administration Record Service is designed to support providers delivering home care services on behalf of the Council and to achieve best practice, as defined by the National Institute for Clinical Excellence[[1]](#footnote-1) and Care Quality Commission[[2]](#footnote-2), in respect of medication administration and governance.
2. **Aims**
	1. By implementing this Service Specification, the Council is seeking to achieve the following aims:
		1. To ensure Community Pharmacists continue to provide Medication Administration Records (MAR Charts) and that it is financially and operationally viable for them to do so.
		2. For the governance supporting the provision of MAR Charts to be strengthened.
		3. To ensure there is a consistent approach to provision of MAR Charts for home care service users (including both in-house services and any organisation delivering services on behalf of the Council) across the county.
3. **Service Description**
	1. Participating pharmacies will supply a MAR Chart for adults aged 18 and over in receipt of home care (including both in-house services and any organisation delivering services on behalf of the Council) where the Care Worker is responsible for ‘removing medication from the container and directly administering’ the medication.
	2. A MAR Chart will be provided alongside a person’s medications provided in ‘normal pharmacy medicines containers’ in replacement of a Multi Compliance Aid by Maidstone and Tunbridge Wells Hospital for; any person who is admitted with a Multi Compartment Aid and returning home with support from a home care provider (including both in-house services and any organisation delivering services on behalf of the Council). People who are self-managing their medications are excluded and will return home with a Multi Compartment Aid.
	3. The continuation of a MAR Chart will be provided by the persons regular pharmacy with their medications.
4. **Process for a New Individual Entering the Service**
	1. The pharmacy will receive notification of the request for service via a notification in PharmOutcomes.
	2. Having received the request for service the pharmacy must accept the referral or reject the referral in the PharmOutcomes programme as soon as possible.
	3. All rejections must be clearly documented in PharmOutcomes so appropriate action can be taken by the hospital staff.
5. **Duties of the Pharmacy**
	1. Upon acceptance of the referral, the Pharmacist will enter all required details into PharmOutcomes and prepare the initial MAR Chart. The Pharmacist will use their professional judgment to ensure the MAR Chart meets the persons current circumstances and supports the safe and effective use of prescribed medication.
	2. The Pharmacist will produce a MAR Chart that includes all currently prescribed medication required to be administered to the person. Where feasible this may include medicines not supplied by the pharmacy at that time e.g. hospital supplies or antibiotics supplied by another pharmacy although responsibility and liability for the other pharmacy’s or hospital’s supply will remain with them; in this instance the Pharmacist will exercise their professional judgement to determine if a MAR Chart can be produced and will indicate they have not provided the medication. The Pharmacist will use the following information (or as fully as is available) to compile the MAR Chart:
* Prescription
* Patient medication record
* Repeat medication list, in addition to the prescription
* Summary Care Record
* Pharmacy label bearing a recent date
	1. The Pharmacist will check the MAR Chart and supply it at the point of supplying the medication.
	2. The Pharmacist preparing the initial MAR Chart will create and annotate the patient records appropriately to ensure future supply of MAR Charts for subsequent dispensing of prescriptions, both repeat and acute.
	3. The Pharmacy will continue to supply MAR Charts for the medication prescribed to the service user until notified by the person’s care provider that this is no longer required, completing the relevant section of the PharmOutcomes form.
	4. Pharmacists and their staff must be fully aware of their responsibility to safeguard vulnerable adults and refer appropriately as per local safeguarding procedures. Pharmacies must also have internal procedures in place to deal with safeguarding concerns.
1. **Principles of Governance**
	1. The following principles will be adopted by Pharmacists to support the successful delivery of the Service:
		1. All Pharmacies will use the standardised MAR Chart Details (Appendix A).
		2. Any Pharmacist or group of Pharmacists wishing to use an alternative to the standardised MAR Chart as detailed in Appendix A when the service commences will submit the document to the Kent County Council for review when expressing interest in providing the service.
		3. Wherever feasible, medication should be reissued for the same period of treatment as the MAR Chart and not exceed 28 days.
		4. In the event that a person, or their family, is unable to collect medication, the MAR Chart and related medication will either be delivered by the Pharmacy and maybe charged as per the pharmacies standard internal policy, as this is not an NHS service or collected by the home care provider, depending on the specific arrangements in place for the individual service user.
		5. The Pharmacist will indicate the required time of administration i.e. morning, lunch, tea, bed on the MAR Chart.
		6. Pharmacists should add ‘not dispensed this time’ to medications if they can be satisfied the treatment is still current; this will typically apply to PRN items. The Pharmacist may need to check Summary Care Records (if available and/or consent is in place) and/or contact the GP surgery for confirmation. The Pharmacist should indicate on the MAR Chart by entering the quantity supplied as ‘0’.
		7. The Pharmacist should check ambiguous dosage instructions with the GP before printing the MAR Chart to ensure that the service user is receiving the correct dosage of medication.
		8. Lost MAR Charts can be reissued but additional checks may need to be made and the Pharmacist satisfied that all the medications are still current. This may involve checking Summary Care Records and/or contacting the GP. When issuing the new MAR Chart, the Pharmacist will record an additional instruction stating, ‘any MAR Charts dated before X date (determined using their professional judgment based upon the available information) must not be used’, it should be recorded in the patient’s PMR that the original MAR Chart was lost, along with the date of issue of the duplicate.
		9. Any medications issued between repeat prescriptions will be added to an existing MAR Chart where feasible by the Pharmacy. The MAR Chart should detail either; the number of days the course of treatment should be taken for, or; that a treatment is long-term and will be an ongoing repeat prescription.
		10. Pharmacists will proactively undertake Medicines Use Reviews (MUR)[[3]](#footnote-3) for service users in receipt of the MAR Service on at least an annual basis, wherever feasible.
		11. Pharmacists will proactively undertake New Medicines Reviews (NMR)[[4]](#footnote-4) for service users in receipt of the MAR Service, wherever feasible.
		12. Pharmacists will proactively offer any additional enhanced services they provide in their pharmacy to the person if they feel the person could benefit e.g. flu vaccination or smoking cessation.
		13. The Pharmacist will exercise their professional judgement as to whether the supply of a MAR Chart is safe, for example in respect of lost MAR Charts and ‘not dispensed this time’ items.
		14. The Pharmacist will ensure that any data pertaining to people in the scheme are stored securely and required protocols in respect of confidentiality are adhered to. Any breach of confidentiality, such as the loss of data regarding vulnerable adults, will be reported to the Council at the earliest possible opportunity.
2. **Quality Assurance & Monitoring**
	1. Kent County Council will monitor the quality of the Service by utilising a range of options, including but not limited to:
* Reviewing MAR Charts for quality and accuracy purposes (this will be completed by the home care provider)
* Seeking feedback from care service providers
* Cross referencing the following data:
* Claims for payment
* Number of opt outs from the Service
* Number of new Service Users
* Number of MAR Charts issued
* Evidence that the pharmacy has robust systems in place to ensure timely removal from the MAR Chart of items no longer prescribed or administered.
* Evidence Pharmacists have stopped invoicing for service users no longer requiring a MAR Chart
1. **Pricing Schedule**
	1. The pharmacy will be reimbursed a fee of £26 per patient in need of a MAR chart for the entirety of the pilot period. This payment covers the provision of initial MAR chart, interim and ongoing MAR chart and provision of feedback by the pharmacy on this pilot service.
2. **Payment Mechanism & Invoicing**
	1. Claims for payment should be submitted via PharmOutcomes at the end of the pilot period.
	2. The pilot period will run from Monday 15st June for 8 months, with no new patients being referred after 6 months (13th December 2020). The last 2 months of the pilot will be used to undertake a full analysis.
3. **Contacts**

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1. **Appendices**

Appendix A: Standardised Medication Administration Record

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**Kent & Medway Domiciliary Care MAR Chart Codes and Definitions**

These are the set codes for MAR charts in Kent and Medway when used in a home care setting. The codes have been introduced to reduce medication errors and provide staff with continuity when providing medication support. Either number or letter code can be adopted. Please contact your system IT provider as they should have the ‘Kent MAR Chart’ created in their system and can support you in the download.



1. <https://www.nice.org.uk/guidance/ng67> [↑](#footnote-ref-1)
2. <http://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulations-service-providers-managers> [↑](#footnote-ref-2)
3. <http://psnc.org.uk/services-commissioning/advanced-services/murs/> [↑](#footnote-ref-3)
4. <https://psnc.org.uk/services-commissioning/advanced-services/nms/>

5 <https://psnc.org.uk/services-commissioning/advanced-services/> [↑](#footnote-ref-4)