

Pharmacy Letter: Medication Assistance Program (MAP) in Home Care

Date:

Recipient name:

Recipient Fax/ Address:

Client Name:

Client Address:

Client Phone:

Date of Birth:

PHN:

_____, is receiving medication assistance through the Medication Assistance Program (MAP). In the MAP, direct medication support is provided to clients by an unregulated health care provider (e.g., health care aide) under the indirect supervision of a regulated health care professional (e.g., registered nurse).

Certain requirements are necessary to permit an unregulated health care provider to assist a client with their medication. Please see important information below, outlining these requirements. Additional information is available in the Alberta Health Services *Medication Assistance Program (MAP) Manual* located online:

<https://www.albertahealthservices.ca/assets/info/seniors/if-sen-map-program-in-alberta.pdf>

The MAP requires a team approach to deliver safe medication support services. As valued members of the client's health care team, community pharmacy has an integral role in medication management and frequently collaborates with other health care professionals. If your pharmacy is not able to meet the needs of the program, please discuss with the client and their AHS Case Manager (identified below).

Pharmacy services needed to support a safe and effective MAP, include, but are not limited to:

- Dispensing oral medication, including prescription, over the counter and natural health products in a controlled dosage system. *Exception:* Any medications that are required to be provided in non-controlled dosage systems e.g., topicals, inhalers, liquids.
 - The AHS Case Manager will contact the pharmacist(s) to discuss any additional exemptions to these packaging requirements.
 - PRN medications are not a routine part of the MAP. When PRN medication is required, please contact the AHS Case Manager to coordinate a safe plan for PRN medication use.
 - Manufacturer prepared unit dose medications should be left in the original packaging as deemed appropriate by the pharmacy staff, in accordance with standards of practice.
 - Controlled dosage system modifications done by pharmacy staff must be clearly labeled to reflect the change, in order to provide sufficient information to health care providers to assist or administer from the altered packaging.
 - When clinically appropriate, instructions must be provided which allow for health care providers to determine the order in which the controlled dosage system packages need to be given (e.g. sequential numbering or specific dating).
 - To minimize safety risks, the care team should discuss if it is appropriate to separately package short term or frequently changing medications.

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- Accommodating medication changes or other medication requests (e.g., prescription change or, spilled/missing medications) within a timely manner, depending on the urgency of need (e.g., by the next business day, next scheduled medication delivery or sooner depending on need).
- Communicating medication changes to the client and AHS Case Manager.
- Labelling dispensed medications (including prescription, over the counter and natural health products) according to Alberta College of Pharmacy (ACP) Standards.
 - Unregulated staff are not able to assist with medications that are not labelled according to Standard 7 of the *ACP Standards of Practice for Pharmacists and Pharmacy Technicians*.
- Providing the client and AHS Case Manager a current and complete medication list (including prescriptions, over the counter, natural health products), inclusive of regularly scheduled and PRN medications dispensed by the pharmacy.
- Providing a medication documentation record (e.g. medication administration/assistance record), when requested and if possible.
- Collaborating with the other health care professionals, including the client's Physician and AHS Case Manager, to perform medication reviews, as requested.
- Optimizing medications to reduce the number of times assistance is required.
 - Standard medication assistance times are morning, noon, supper and/or bedtime.
 - Whenever clinically appropriate, reduce medication dosing to daily, or no more than twice daily.
 - If medication is time sensitive and/or requires dosing more frequently than twice daily or outside of these standard times, please contact the AHS Case Manager. We recognize there are clinical circumstances where increased frequencies are appropriate.
- Establishing a process for the Client to return medications to the pharmacy for disposal.
- Providing safety engineered devices and sharps containers when health care providers assist with medical sharps (e.g., needles, lancets), when requested.
 - The AHS Case Manager must inform the pharmacy of any product needs.

Thank you. We look forward to collaborating with you to meet our client's need and outcomes. Please feel free to phone anytime.

AHS Case Manager:

Email:

Phone:

Fax: