COMMUNITY PHARMACY
ANTI-COAGULATION MANAGEMENT SERVICE (CPAMS)
Information for primary and community care

About CPAMS

The Community Pharmacy Anti-Coagulation Management Service (CPAMS) provides point of care international normalised ratio (INR) testing and dose adjustments for warfarin patients.

All pharmacists providing the service must be accredited and have completed training provided by the Pharmaceutical Society of New Zealand.

Over 160 community pharmacies currently provide the service, and more than 6000 patients are participating and working with their pharmacists to manage their warfarin levels.

The benefits

CPAMS ensures the patient remains at the centre of care, freeing up General Practitioners (GPs) and practice staff time. For example, GPs would no longer need to phone the patient with their test results.

When testing the patient, the pharmacist can gather a comprehensive picture of their situation and the factors influencing their health and warfarin management. The pharmacist then shares this information with GPs so you can work together for your patient's benefit.

Patients will experience a consistently high level of Time in Therapeutic Range (TTR) as shown in the CPAMS Quality Reports available on the Te Whatu Ora website.

Who should I refer?

We encourage GPs and CPAMS pharmacies to work together to identify patients that may benefit from the service.

People that should be strongly considered for the service include those with:

- Venous access issues
- Poor attendance at your practice
- Frequently missed appointments
- Who are difficult to contact
- Reduced compliance and/or reduced warfarin control
- High needs people with poor health literacy
- Mobility challenges

Patient benefits

Immediate information and advice

Convenient and flexible access to testing due to pharmacy opening hours

Finger prick testing versus a venous blood test

Online results

More involved in the management of their own INR levels and health

Reduced complications and adverse events

Individualised take home dosing calendar and access to results online.

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Which pharmacies provide CPAMS?

Visit the Te Whatu Ora website for a full list of community pharmacies providing the service.

How can my practice get involved?

Follow these simple steps to get involved in the service:

1. Sign a standing order with the pharmacy providing CPAMS.
2. Identify and refer patients that you think may benefit from CPAMS by completing a referral form so they can begin receiving the service.
3. Talk to the patient about the service and how it works.
4. Involve your practice manager and practice nurses so they can become familiar with the service.
5. Watch for INR test results alerts from the pharmacy that are outside of the prescribed range. Automatic information updates on each test are sent via an HL7 message to your practice inbox. The pharmacist will contact you directly about patient results that are out-of-range.
6. Have processes in place to allow the pharmacist to contact you about patient results.

Patient Safety and quality

Warfarin is not without risks and safeguards are in place to ensure your patient's safety. Each community pharmacy is closely regulated by the Standing Order. All CPAMS pharmacies are also required to perform quality control regularly and report on adverse events, compliance and anticoagulant control every three months.

Where can I get more information?

Further reading and resources are available on the Te Whatu Ora website. Contact a local pharmacy providing the service and they will be able to help you get up and running.

Costs

Selected pharmacies are contracted by their DHB to provide a funded CPAMS service. Pharmacies may also elect to offer an unfunded service to patients.

Patients say

"I am pleased that pharmacy can offer this service as it was a pain going to the labs and then waiting for the nurse or doctor to call me. This is instant."

"Great that you are working together with my GP."

"I understand my warfarin management and what INR means for me."

"It doesn't hurt as much, just a finger prick."

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