Pharmacy Programs Administrator

Compliance Bulletin
Residential Medication Management Review

The Pharmacy Programs Administrator (PPA) has developed this Residential Medication Management Review (RMMR) Program bulletin to define best practice for obtaining informed consent for the RMMR Program and to outline issues relating to consent commonly observed by the PPA Compliance team.

Best practice for obtaining consent for the RMMR Program

The pharmacist receives a referral from a medical practitioner for an RMMR service.

Before conducting the initial RMMR interview, the pharmacist:

- explains the RMMR service to the patient
- outlines that personal information will be processed as part of the service
- obtains their consent
- gives them opportunity to ask questions.

The pharmacist obtains the patient's written consent using the PPA RMMR Patient Consent Form.

The pharmacist interviews the patient.

Note that there are other approaches to obtaining consent (see Consent options*) to allow for different circumstances. The approach outlined above represents best practice and should be adopted where possible.*

Pharmacists need a referral from a general or medical practitioner before seeking patient consent, even when they recommend patients for a RMMR service.

The PPA Compliance team recommends that pharmacists use the most recent version of the RMMR Patient Consent Form on the PPA website to obtain your patients' informed consent correctly. Doing so will ensure that your patients understand that, by consenting, they are agreeing to:

- voluntarily participating in the RMMR service
- sharing their information, as needed, with other healthcare professionals
- allowing service providers to share personal details with the PPA and the Department of Health, Disability and Ageing for claiming and program monitoring and evaluation purposes.

Correctly obtaining patients' informed consent enables service providers to meet their obligations under the RMMR Program Rules and PPA's General Terms and Conditions and ensure that claims are eligible for payment.

Consent options

In some circumstances it can be difficult to obtain written patient consent, particularly when a patient cannot give their consent and an authorised person must consent on their behalf. However, service providers have a number of options for obtaining consent in these circumstances.

Table 1 outlines best practice for obtaining consent, including when an authorised person consents to an RMMR service on a patient's behalf and the specific circumstances when a service can be provided without consent.

The table also outlines the new option for a pharmacist to obtain a patient's verbal consent. This option can only be used when a patient is able to give informed consent but cannot physically give their consent in writing.

Table 1: Consent options in the RMMR Patient Consent Form

Option	Who gives consent	In what circumstances
Written consent (page 3)	The patient	The patient can consent and gives their informed consent in writing.
	The patient's authorised person	If a patient cannot consent to the RMMR service, the pharmacist may obtain written consent from the patient's authorised legal representative.
Verbal consent (pages 4 and 5)	The patient's authorised person	If a patient cannot consent to the RMMR service and it is difficult to get written consent from the patient's authorised person, the pharmacist may document verbal consent from an authorised person.
	The patient (only acceptable in circumstances where the patient lacks physical capacity)	The pharmacist may document a patient's verbal consent only if the patient has a condition that physically prevents them from giving their consent in writing. The pharmacist must: • explain the RMMR service • obtain the patient's verbal consent • document the condition that prevents the patient signing the form • ensure that the facility staff member completes their section of the form in full.
Unable to obtain patient consent (used only if the patient would otherwise be at risk – see the RMMR Patient Consent Form for more details) (page 6)	N/A	Providing a service without first obtaining patient consent is only an option if the patient would otherwise be at imminent risk. If the pharmacist cannot obtain consent and no authorised legal representative is available, promptly notify facility management and the referring medical practitioner. See Q6 of the RMMR FAQ's on the PPA website for more information.

Patient information

Pages 1 and 2 of the PPA's RMMR Patient Consent Form can be given to the patient or their authorised person. The remaining pages of the form are used to document consent, with different sections used depending on the consent approach needed as outlined in Table 1.

Common issues with informed patient consent

The PPA Compliance team sees many consent forms incorrectly or only partly filled out. Missing, incorrect or incomplete forms may result in claims being cancelled.

Service providers need to keep all records, including signed patient consent forms, for RMMR services for at least 7 years after submitting claims for payment. Records can be kept in electronic format.

Before submitting claims, make sure all relevant information is included:

- if the patient consents in writing, they must sign and date the form
- if a patient's authorised person consents in writing on the patient's behalf, they must indicate their relationship to the patient, sign the form, record the date of consent, and provide their name
- if a patient's authorised person consents verbally on their behalf, the person who records the verbal consent must document the authorised person's name, address and relationship to the patient as well as the date of consent and their own details.

Service providers should avoid a protracted period between getting a patient's informed consent and providing the RMMR service because a patient's clinical circumstances may change or they may withdraw their consent.

Below are additional specific issues related to consent for RMMR services.

Issue: Pharmacists obtain consent from someone other than a patient or an authorised person.

A common situation that the PPA Compliance team sees is that someone, for example, a nurse coordinator from the residential aged care facility (RACF), has given consent on behalf of a patient but that person is not authorised to do so.

Review any patient consent forms, particularly forms that have been completed by others, before accepting them to check who consented. **In particular, service providers must not accept written consent given by facility staff on a patient's behalf unless the staff member holds legal authority to do so**. A referrer also cannot consent on behalf of a patient unless they hold legal authority to do so.

Issue: Pharmacists delegate responsibility for informing patients and obtaining consent to facility staff.

Staff in aged care facilities must not manage the consent process for RMMR services.

After receiving an RMMR referral and before the initial RMMR interview, service providers are responsible for:

- explaining the RMMR service to the patient or their authorised person
- explaining that they are seeking consent from the patient or, where applicable, their authorised person for both the service and to share the patient's

information with the PPA and the Department of Health, Disability and Ageing for claiming and program monitoring and evaluation purposes
- getting consent
- documenting relevant details, such as date of consent and the authorised person's relationship to the patient.

Issue: Pharmacists don't get a patient's informed consent before each RMMR service.

Pharmacists must get a patient's informed consent for each RMMR service before the initial interview. You don't need to get consent again for any follow-up interviews that may be required for the same RMMR service. **Importantly, however, if a patient has a subsequent RMMR service, you must obtain their consent again before the initial interview.**

Pharmacists cannot use RACF admission paperwork that includes a patient's consent to share information with approved parties for medication management review services. Using RACF admission paperwork in place of a RMMR Patient Consent Form will result in claims being deemed ineligible for payment.

Considerations with custom patient consent forms

The PPA recommends that service providers use the RMMR Patient Consent Form available on the PPA website.

If, however, service providers choose to develop their own consent form, it must align with the content of the RMMR Patient Consent Form and include all relevant clauses. Using custom patient consent forms that don't align with the PPA's RMMR Patient Consent Form will result in claims being deemed ineligible for payment.

For example, service providers may not include clauses that:

- restrict how a patient withdraws their consent
- indicate that their consent applies to all future RMMR services.

The PPA cannot provide legal advice or feedback on the content of custom patient consent forms.

More information and support

These program resources contain more information about informed consent:

- RMMR Program Rules
- PSA Guidelines for Comprehensive Medication Management Reviews
- RMMR FAQs
- PPA General Terms and Conditions.

The PPA Compliance team is available to support you and clarify the program requirements regarding patient consent. For any enquiries about patient consent or the RMMR Program generally, call 1800 951 285 to speak to a member of the Compliance team.