Measure #20. Family Medicine Medication Use Processes Matrix (MUPM)

CARE COORDINATION MEASURE MAPPING TABLE

	MEASUREMENT PERSPECTIVE		
	Patient/Family	*Health Care Professional(s)*	*System Representative(s)*
CARE COORDINATION ACTIVITIES			
Establish accountability or negotiate responsibility		□	
Communicate			
Interpersonal communication			
Information transfer		□	
Facilitate transitions			
Across settings			
As coordination needs change			
Assess needs and goals		□	
Create a proactive plan of care			
Monitor, follow up, and respond to change		■	
Support self-management goals		□	
Link to community resources			
Align resources with patient and population needs		□	
BROAD APPROACHES POTENTIALLY RELATED TO CARE COORDINATION			
Teamwork focused on coordination			
Health care home			
Care management			
Medication management		■	
Health IT-enabled coordination			

Legend:
■ = ≥ 3 corresponding measure items
□ = 1-2 corresponding measure items

Family Medicine Medication Use Processes Matrix (MUPM)

Purpose: To measure the perceptions of primary care physicians (family practice) in regard to pharmacists' contributions within the practices.

Format/Data Source: 22-item Family Medicine Medication Use Processes Matrix instrument mailed to family practice physicians at 3 times: (1) 3 months, (2) 1 year, and (3) 19 months after pharmacist integration. There are response sections for 5 different health care professionals: (1) family physician, (2) family practice pharmacist, (3) nurse, (4) receptionist, and (5) community pharmacist.

Date: Measure published in 2008.[1]

Perspective: Health Care Professional(s)

Measure Item Mapping:

- **Establish accountability or negotiate responsibility:** 13
- **Communicate:**
  - Information transfer:
    - *Within teams of health care professionals:* 20
    - *Participants not specified:* 17
- **Assess needs and goals:** 4, 9
- **Monitor, follow up, and respond to change:** 9, 11, 12
- **Support self-management goals:** 9, 19
- **Align resources with patient and population needs:** 19
- **Medication management:** 3, 5, 7, 10, 15-18, 20

Development and Testing: The IMPACT Program was used in large scale to develop this 22-item Family Medicine Medication Use Processes Matrix (MUPM). The self-completed questionnaire was pilot tested by 11 pharmacists, nurses, and physicians. Five theoretical groupings were identified: (1) Diagnosis & Prescribing, (2) Monitoring, (3) Administrative/ Documentation, (4) Education, and (5) Medication Review. Good internal consistency and test-retest reliability were demonstrated. Preliminary validation suggested the tool can identify differences in how health professionals view their and others' roles in primary care. Cronbach's alpha coefficient was used to determine internal consistency, test-retest reliability scores were calculated using intra-class coefficients, and all were deemed sufficiently valid.[1]

Link to Outcomes or Health System Characteristics: None described in the sources identified.

Logic Model/Conceptual Framework: Development of the MUPM instrument was informed by several frameworks of medication-use processes. The MUPM was developed as part of the Integrating family Medicine and Pharmacy to Advance primary Care Therapeutics (IMPACT) project.[1]

Country: United States

Past or Validated Applications*:
- **Patient Age:** Not Applicable
- **Patient Condition**: Not Applicable
- **Setting:** Primary Care Facility

*Based on the sources listed below and input from the measure developer.

Notes:
- This instrument was provided by the corresponding author upon request (B. Farrell, personal communication, September 13, 2010).
- This instrument contains 23 items; 15 were mapped.

Sources:

1. Farrell B, Pottie K, Woodend K, et al. Developing a tool to measure contributions to medication-related processes in family practice. J Interprof Care 2008;22(1):17-29.
2. Farrell B, Pottie K, Woodend K, et al. Shifts in expectations: Evaluating physicians' perceptions as pharmacists become integrated into family practice. J Interprof Care 2010;24(1):80-9.