The Pharmacists’ Patient Care Process: Where Does Technology Fit?

Anne L. Burns, RPh
Vice President, Professional Affairs
American Pharmacists Association
Disclosures

Anne Burns is an employee of the American Pharmacists Association. The conflict of interest was resolved by peer review of the slide content. She declares no other conflicts of interest or financial interest in any product or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria.
Objectives

Following this presentation, participants should be able to:

• Describe the development of the Pharmacists’ Patient Care Process.
• Describe the elements of the Pharmacists’ Patient Care Process.
• Explain how the Pharmacists’ Patient Care Process is being incorporated into EHR tools and resources for pharmacists.
• Discuss current strategies underway for implementation of the Pharmacists’ Patient Care Process.
Joint Commission of Pharmacy Practitioners (JCPP)

- JCPP Vision:
  - Patients achieve optimal health and medication outcomes with pharmacists as essential and accountable providers within patient-centered, team-based healthcare.
Pharmacists’ Patient Care Process

• JCPP Strategic Plan: Consistent patient care process identified as key driver for achieving the JCPP vision
  • Supports the profession’s provider status activities
  • Needed to meet demands of evolving health care system focused on triple aim
• Collaboration of national pharmacy organizations working to develop a standardized pharmacist patient care process
  • Purpose: to stimulate consistency, predictability, and measurability in pharmacists’ service delivery
JCPP Pharmacists’ Patient Care Process Workgroup

- Activities: January 2012-May 2014
  - Workgroup meetings
  - Environmental scan
  - Testing among clinicians
  - Organizational feedback
Pharmacists’ Patient Care Process Development

• Review of key resources
  – Pharmaceutical care – Strand & Cipolle
  – Profession’s MTM definition and MTM Core Elements
  – PCPCC Medication Management Resource Guide
  – ACA language
  – Nurse Practitioner’s Practice Standards

• Should apply to the wide variety of patient care services provided by pharmacists AND the pharmacist’s medication expertise
  – Level of intensity varies depending on the service
  – One pharmacist might be responsible for all the steps in some settings where in others more than one pharmacist may be involved at different stages of the process.
Goals

• Pharmacists’ Patient Care Process created to:
  – Promote consistency across the profession.
  – Provide a framework for delivering patient care in any practice setting.
  – Be a contemporary and comprehensive approach to patient-centered care delivered in collaboration with other members of the health care team.
  – Be applicable to a variety of patient care services delivered by pharmacists, including medication management
Pharmacists’ Patient Care Process

- Foundational Components:
  - Establishment of patient-pharmacist relationship
  - Engagement and effective communication with patient, family, caregivers
  - Continually collaborate, document, and communicate with physicians and other health care providers
  - Process enhanced by interoperable information technology systems that facilitate effective and efficient communication
Pharmacists’ Patient Care Process

• Approved by JCPP organizations in May 2014
• Supported by 13 national pharmacy organizations

Pharmacists’ Patient Care Process

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Collect

The pharmacist assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient. Information may be gathered and verified from multiple sources.

Collect:
- A current medication list and medication use history for prescription and nonprescription medications, herbal products, and other dietary supplements
- Relevant health data that may include medical history, health and wellness information, biometric test results, and physical assessment findings
- Patient lifestyle habits, preferences and beliefs, health and functional goals, and socioeconomic factors that impact access to medications and other aspects of care
Assess

The pharmacist assesses the information collected and analyzes the clinical effects of the patient’s therapy in the context of the patient’s overall health goals in order to identify and prioritize problems and achieve optimal care.

Assess:

• Each medication for appropriateness, effectiveness, safety, and patient adherence

• Health and functional status, risk factors, health data, cultural factors, health literacy, and access to medications or other aspects of care

• Immunization status and the need for preventive care and other health care services, where appropriate
Plan

The pharmacist develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence-based and cost-effective.

The plan:

- Addresses medication-related problems and optimizes medication therapy
- Sets goals of therapy for achieving clinical outcomes in the context of the patient’s overall health care goals and access to care
- Engages the patient through education, empowerment, and self-management
- Supports care continuity, including follow-up and transitions of care as appropriate
Implement

The pharmacist implements the care plan in collaboration with other health care professionals and the patient or caregiver.

The pharmacist:

• Addresses medication- and health-related problems, and engages in preventive care strategies, including vaccine administration
• Initiates, modifies, discontinues, or administers medication therapy as authorized
• Provides education and self-management training to the patient or caregiver
• Contributes to coordination of care, including the referral or transition of the patient to another health care professional
• Schedules follow-up care as needed to achieve goals of therapy
Follow-up: Monitor and Evaluate

The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed.

Monitor and evaluate:
- Medication appropriateness, effectiveness, and safety and patient adherence through available health data, biometric test results and patient feedback
- Clinical endpoints that contribute to the patient’s overall health
- Outcomes of care, including progress toward or the achievement of goals of therapy
Application Examples: Service/Setting

- Comprehensive medication review and follow-up
- IV to oral anticoagulant dosing
- Medication reconciliation during a care transition
- Diabetes management
- Immunization
The Pharmacists’ Patient Care Process and Technology

• Need for technology that supports efficient and effective delivery of patient care services
  – User-friendly documentation and billing
  – Seamless electronic information exchange between pharmacists and other providers
  – Quality measurement documentation and reporting
Advances in HIT and Pharmacist-Provided Care

• Development of billing codes (CPT Codes)
• Development of documentation codes (SNOMED CT Codes)
  • Medicare Part D Enhanced MTM Program
• Guidelines and processes for Health Information Exchanges
• Development of Structured Electronic Document Templates using HL7 Standards
  • Pharmacy Care Note
  • Transitions of Care
• EHR system functionality for pharmacists providing patient care

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## Implementation

### Current strategies underway:

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<th>Outreach: Press release, presentations</th>
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<td>Communications plan, toolkit, practice-setting specific case examples, and other materials under development through JCPP</td>
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<td>ACPE has incorporated the process in PharmD Standards 2016. ASHP has incorporated into residency accreditation standards</td>
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<td>Pharmacy HIT Collaborative is using the process as a framework to develop structured patient care documents for the EHR</td>
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<td>The Pharmacy Quality Alliance (PQA) is considering the process in developing quality measures.</td>
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<td>Projects (example): Patient care process is being used in a national patient safety organization project to identify gaps in care.</td>
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<td>Training (examples): The Alliance for Integrated Medication Management Collaborative, several CMMI grantees, CE providers incorporating into education and training.</td>
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Questions and Discussion

Anne Burns
aburns@aphanet.org
202-429-7522

Website: www.pharmacist.com