Feasibility of Pharmacy and Home Healthcare Transitions of Care **Services in an Emergency Department Population**



The Ohio State University

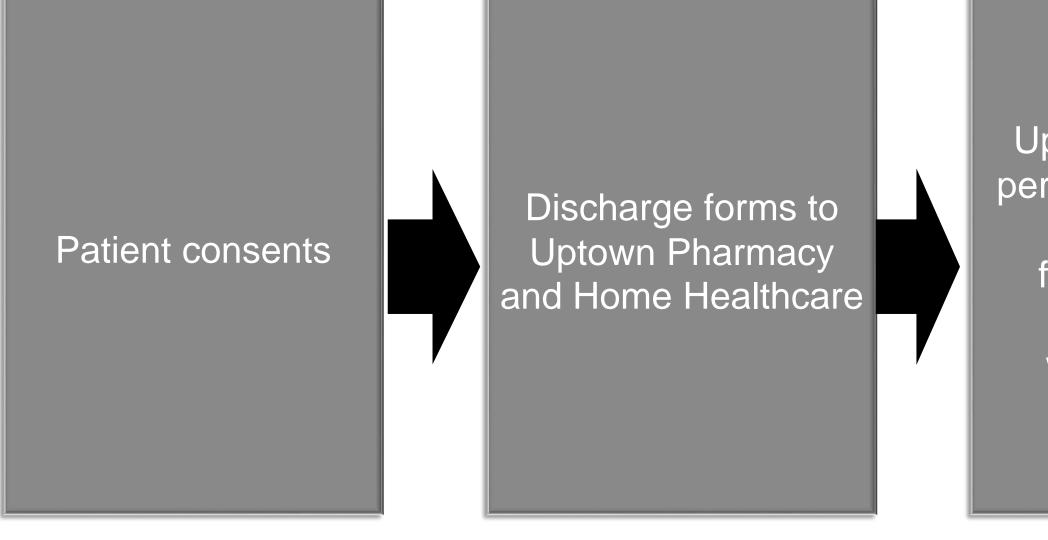
INTRODUCTION

- •1 in 12 patients treated and discharged from the emergency department (ED) revisit the ED within 3 days; 1 in 5 patients revisit within 30 days¹
- •Additionally, only 88% of ED patients fill their prescriptions; 48% take the medications correctly²
- •While many transitions of care studies have shown positive outcomes focused on 30-day hospital readmission rates³⁻⁵, no research has focused on applying these services to non-admitted patients who are treated and discharged from the ED



OSU East Hospital is a community hospital located on the eastern edge of downtown Columbus and is a part of OSU's medical system.

Figure 1. Pharmacy plus home healthcare service flowchart





Uptown Pharmacy is an independent community pharmacy located in Westerville, Ohio (suburb of Columbus)

FUTURE IMPLICATIONS

- This project will determine the feasibility of these services as applied to patients treated and discharged from the ED
- Results from this study could be used as a guide for other organizations to implement a successful and sustainable transitions of care service

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OBJECTIVES

Primary Objective

- Determine the feasibility of pharmacy-only or pharmacy an healthcare transitions of care services for an emergency de population
- Secondary Objectives
- Assess revisit rates and/or hospital admissions, assess pr discharge medication adherence, identify and resolve med related problems (MRPs), describe patient satisfaction

METHODS

- Inclusion criteria:
- Age ≥ 65 years old
- Not admitted to the hospital
- Discharged with \geq 1 new
- medication

- **Exclusion criteria:**

- facility

Uptown Pharmacy performs medication reconciliation, fills medication, and delivers within 24 hours

Uptown Pharmacy sends comprehensive medication list to Home Healthcare





ACKNOWLEDGEMENTS

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RESULTS (TO BE COLLECTED)

Objectives	Day 3	Day 10	Day 30
Feasibility	\checkmark	\checkmark	\checkmark
Revisit Rates	\checkmark	\checkmark	\checkmark
Adherence	\checkmark	\checkmark	\checkmark
MRPs	\checkmark	\checkmark	
Patient Satisfaction			\checkmark
	Feasibility Revisit Rates Adherence MRPs	Feasibility✓Revisit Rates✓Adherence✓MRPs✓	Feasibility✓Revisit Rates✓Adherence✓MRPs✓

 Discharged with a controlled 2 substance or IV medication Home address > 50 miles from OSU East Hospital •Patients who reside in a nursing home or assisted living Patients will self-select either: **1.Pharmacy-only service; or** 2.Combination service of pharmacy plus home healthcare (Figure 1)

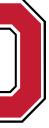
Non-English speaking patients



1Duseja R, Bardach NS, Lin GA, et al. Revisit rates and associated costs after an emergency department encounter: a multistate analysis. Ann Intern Med. 2015;162(11):750-6.

emergency department? A randomized controlled trial. Annals of Emergency Medicine. 2013; 62(3): 212-223. 3Hawes EM, Maxwell WD, White SF, Mangun J, Lin FC. Impact of an outpatient pharmacist intervention on medication discrepancies and health care resource utilization in posthospitalization care transitions. J Prim Care Community Health. 2014;5(1):14-8. 4Sen S, Bowen JF, Ganetsky VS, et al. Pharmacists implementing transitions of care in inpatient, ambulatory and community practice settings. Pharm Pract (Granada). 2014;12(2):439.

5Pherson EC, Shermock KM, Efird LE, et al. Development and implementation of a postdischarge home-based medication management service. Am J Health Syst Pharm. 2014;71(18):1576-83.



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- 2McCarthy ML, Ding R, Roderer NK, et al. Does providing prescription information or services improve medication adherence among patients discharged from the