

Development of an Innovative Technology-Driven Transitions of Care Service to Improve Medication Use in Rural Populations

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BACKGROUND

- Pharmacist-driven transitions of care have been recommended to reduce hospital readmissions and improve patient outcomes
- However, access to pharmacy services in rural areas limit opportunities for patients to benefit from face-to-face pharmacist care within the critical time period immediately following discharge
- An innovative approach to in-home medication reconciliation and patient education supported by technology is one solution to increasing access to care for this population

SERVICE MODEL

Eligible Patients

Any interested patient discharged from a 92-bed county hospital in rural Ohio

Enrollment

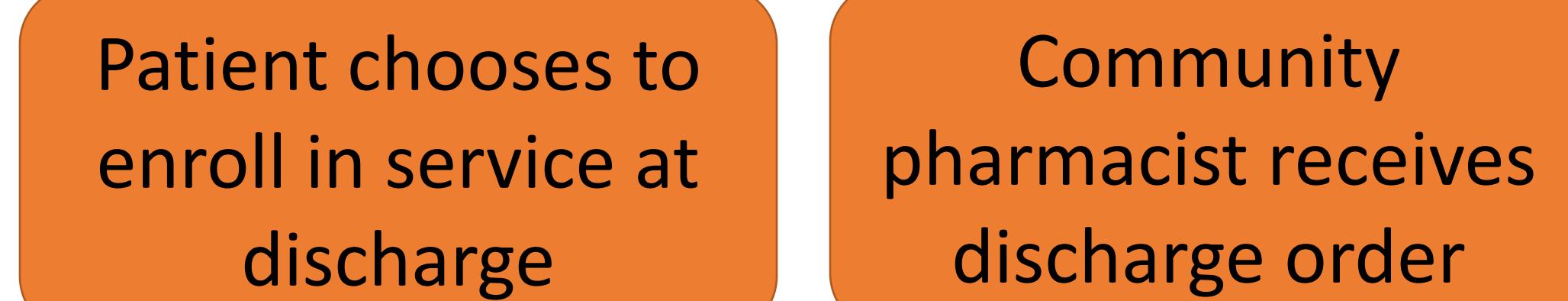
Social workers and/or pharmacy marketing representatives invite patients and/or caregivers to enroll in the service face-to-face and immediately prior to discharge

Service Workflow

- Pharmacists at the partner community pharmacy receive discharge orders and new medication orders
- Community pharmacists coordinate with hospital pharmacists, primary care providers, patients, and caregivers as needed to reconcile medications
- Community pharmacists pack new medication regimen in calendar-based adherence packaging
- New medications are delivered to patients' homes, typically within 72 hours following discharge
- Pharmacists videoconference with patients through a tablet device brought to the home by the delivery driver to provide education and instruction on new medication regimen
- Pharmacists generally follow up with patient within a few days prior to exhaustion of medication supply to prepare for next 30- or 90-day period, but also have more frequent follow-up as needed

SERVICE MODEL

Patient Discharge + Service Enrollment



Medication Reconciliation

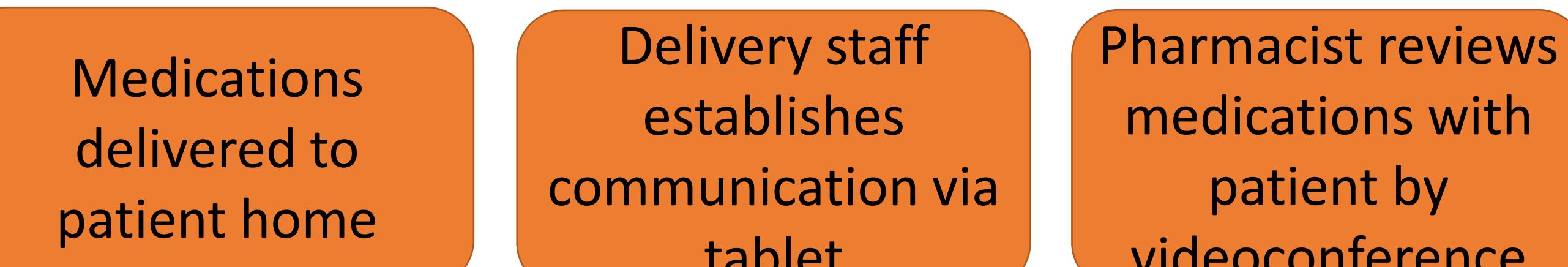


Prescription Processing + Packaging

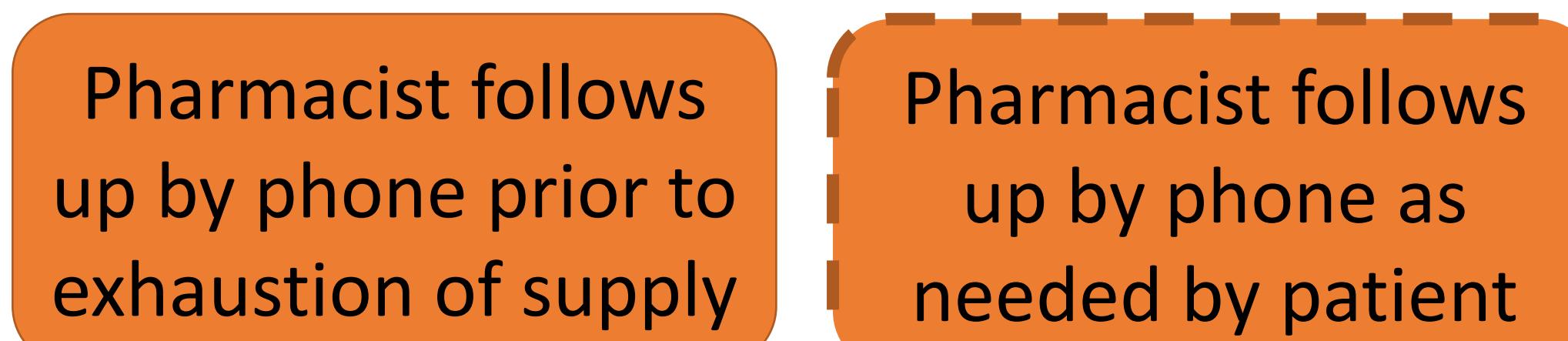
Prescriptions filled and packaged in calendar adherence system



Home Delivery + Consultation



Pharmacist Follow Up



PRELIMINARY RESULTS

- Patients participated in this service between August 2014 and May 2015
- Enrollment in the program has been discontinued due to low enrollment rates
- 18 patients enrolled in the service before the service was discontinued

Table 1. Enrolled Patient Characteristics (n=18)

Age, median (range)	81 (46-100)
Female Sex, n %	12 (67)
30-Day Follow-Up Complete, n (%)	16 (89)
180-Day Follow-Up Complete, n (%)	11 (61)

NEXT STEPS

- Next steps are to conduct an analysis of impact on 30 and 180-day hospital readmissions
- A descriptive analysis will be conducted of:
 - Hospital admission diagnoses
 - Drug therapy problems identified and resolved by pharmacists
 - 30- and 180-day patient satisfaction data, based on a tool modified from the National Quality Forum Care Transition Measure (CTM-15)
 - Medication adherence trends, based on proportion of days covered

ACKNOWLEDGEMENTS

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