

Prescription for Collaboration

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Disclosure

I have no relevant financial relationships with commercial interests or conflicts of interest to disclose.



Statement of Need

- People with chronic conditions account for 91% of all prescriptions filled. By 2020, over 157 million Americans will have at least 1 chronic medical condition for which self-management education will be needed to achieve healthcare goals.
- Pharmacists are the most underutilized resource for improvement of public health.
- The patient-centered medical home model seeks to develop a multi-disciplinary approach to health care, yet pharmacists are underrepresented in team-based care. Through the development of clinical pharmacy services, free clinics may attract a new lifeline of pharmacist volunteers.



¹ <https://www.cdc.gov/cdcgrandrounds/archives/2014/oct2014.htm>

² American Public Health Association, Policy 8024: the role of the pharmacist in public health. *Am J Public Health*. 1981;71:213-216.

Objectives

After this presentation, you will be able to:

- 1 Describe components of clinical pharmacy services provided in a free clinic setting
- 2 Identify strategies for the recruitment of volunteer pharmacists, pharmacy residents, and pharmacy interns
- 3 Discuss the implications of collaborative practice using a provided implementation toolkit



Expected Outcome

To understand the roles a community pharmacist could fill as a member of a free clinic's healthcare team

To implement processes in a free clinic that could integrate clinical pharmacy services in conjunction with primary care



Collaborating Organizations

- St. Vincent de Paul Charitable Pharmacy
 - Prescription medication dispensing
 - Medication therapy management
 - Diabetes self-management education
 - Medication reconciliation
 - Tobacco cessation
 - Immunizations
- Good Samaritan Free Health Center
 - Primary Care
 - Dental
 - Optometry
 - Gynecology
 - Behavioral Health
 - Clinical Pharmacy



Funding Collaboration

Charitable Pharmacy opens
375,000 Rx worth \$43 mil



In-clinic pharmacy services
Diabetes management
Tobacco cessation
+University of Cincinnati
+Kroger Pharmacy



2006

2011

2013

2015

PAYDAY

2017

Free Health Center opens
400 mutual patients

Medication Therapy Management
4,500 med reviews
15,000 RPh interventions
\$7.2 mil cost avoidance

2017 Grants Received
\$15,000 \$20,000
\$20,000 \$25,000
\$30,000 \$100,000



Self-Assessment

Currently, what is the minimum level of degree required for new pharmacists to be eligible for licensure?

- Bachelor's (4 years)
- Master's (5 years)
- Doctorate (6-8 years)
- Doctorate + residency (8+ years)

Which of the following is outside a pharmacist's scope of practice?

- Providing tobacco cessation counseling
- Providing diabetes education services
- Administering influenza vaccine
- Diagnosing asthma
- Training proper inhaler technique



Self-Assessment

Which of the following pharmacy personnel would NOT be eligible to provide clinical pharmacy services in a free clinic?

- a. Pharmacy Technician
- b. Pharmacy Intern
- c. Pharmacy Resident
- d. Pharmacist

Which of the following functions is a pharmacist permitted to do under a collaborative practice agreement?

- a. Modify prescription therapy
- b. Initiate prescription therapy
- c. Perform physical assessments
- d. Order and interpret laboratory tests
- e. All of the above



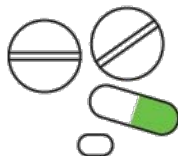
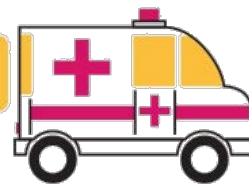
THE PROBLEM



Americans spend over
\$300B PER YEAR
on prescription meds

\$41B

is spent on
readmissions



66%
of readmissions are
medication related

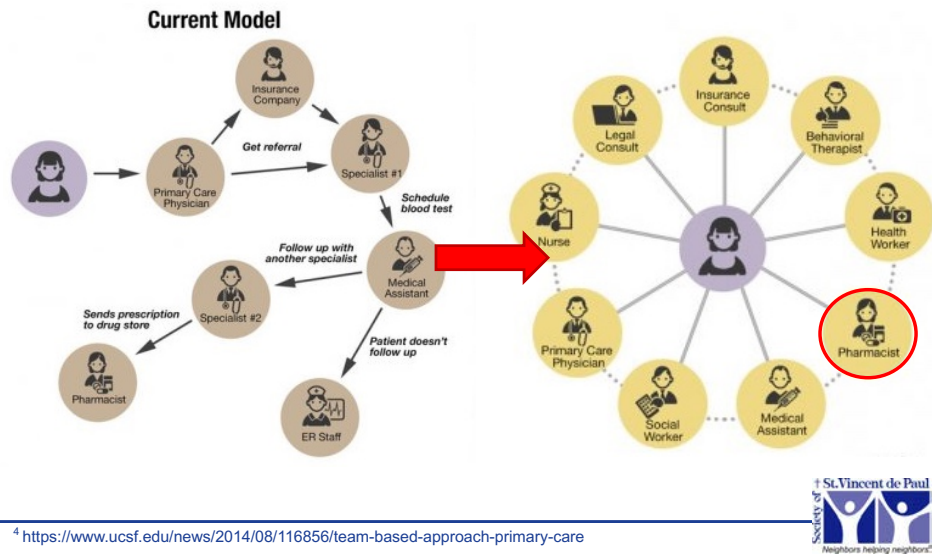
56M

Americans lack adequate
access to primary care
despite the majority being
insured



³ <http://papharmacistsnetwork.com/how-ppcn-works/>

Patient-Centered, Team-Based Care



Progression of Pharmacy Training

19th Century

Apprenticeships
Product-Oriented

20th Century

B.S Pharm
Product-Oriented



Today

PharmD (+/- residency)
Patient-Centric

All pharmacy graduates since 1997 are doctorate credentialed with experience in ambulatory care settings through clinical rotations.

⁵ <https://www.studentdoctor.net/2012/01/pharmacy-a-brief-history-of-the-profession/>

Over-Trained, Underutilized



“

Pharmacists offer an accessibility that is rare among health care professionals. The pharmacist has health knowledge on which to build and is often uniquely cited in the community to provide public health services, in some cases 24 hours per day.

– American Public Health Association

Pharmacists are one of the most underutilized health care professionals.

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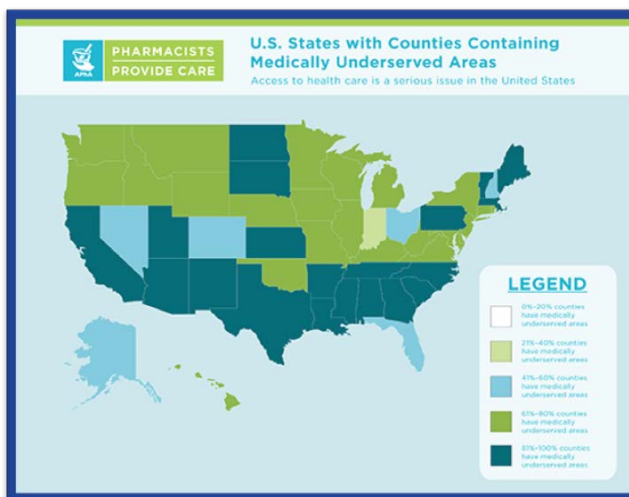
The most overtrained and under utilized profession in America

BY REP. EARL L. "BUDDY" CARTER (R-GA) - 05/02/16 03:57 PM EDT

⁶ <http://thehill.com/blogs/ballot-box/278414-the-most-overtrained-and-under-utilized-profession-in-america>
⁷ <https://www.cdc.gov/dhdsp/pubs/docs/CPA-Translation-Guide.pdf>



Pharmacists as Providers




- By 2020, over 157 million Americans will have a chronic health condition.
- People with chronic conditions account for 91% of all prescriptions filled.
- National initiatives may lead to provider status to reduce medically underserved areas.

¹ <https://www.cdc.gov/cdgrandrounds/archives/2014/oct2014.htm>
⁸ <https://www.pharmacist.com/national-map>



THE SOLUTION

90% of Americans live within **5 MILES** of a community pharmacy



Integrating pharmacists into direct patient care results in **favorable outcomes across health care settings and disease states.**

³ <http://papharmacistsnetwork.com/how-ppcn-works/>

† St. Vincent de Paul
Society of
Neighbors helping neighbors®

1

Describe components of clinical pharmacy services provided in a free clinic setting

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Medication Therapy Management

A pharmacist-provided service intended to improve clinical outcomes through drug optimization.

- 1 Comprehensive Medication Review
- 2 Patient Medication Record
- 3 Medication-Related Action Plan
- 4 Intervention and Referral
- 5 Documentation and Follow-Up



⁹ https://www.pharmacist.com/sites/default/files/files/core_elements_of_an_mtm_practice.pdf

MTM Interventions

Patient Interventions

- Adherence – Administration
- Adherence – Overuse
- Adherence – Underuse
- Needs Patient Education
- New/Changed Drug

Follow-up

Face-to-face Telephone



Prescriber Interventions

- Adverse Drug Reaction
- Cost Effective
- Dose Too High
- Dose Too Low
- Drug Interaction
- Needs Drug Therapy
- Needs Health Test
- Needs Immunization
- Suboptimal Drug
- Unnecessary Therapy



MTM Estimated Cost Avoidance

ECA is a severity rating for MTM interventions derived from average national health care utilization costs.

1. Improved Quality of Care	\$ 0.00
2. Reduced Drug Cost	\$ 65.11
3. Prevented Physician Visit	\$ 366.73
4. Prevented Additional Drug Therapy	\$ 424.33
5. Prevented Emergency Room Visit	\$ 845.25
6. Prevented Hospital Admission	\$26,205.40

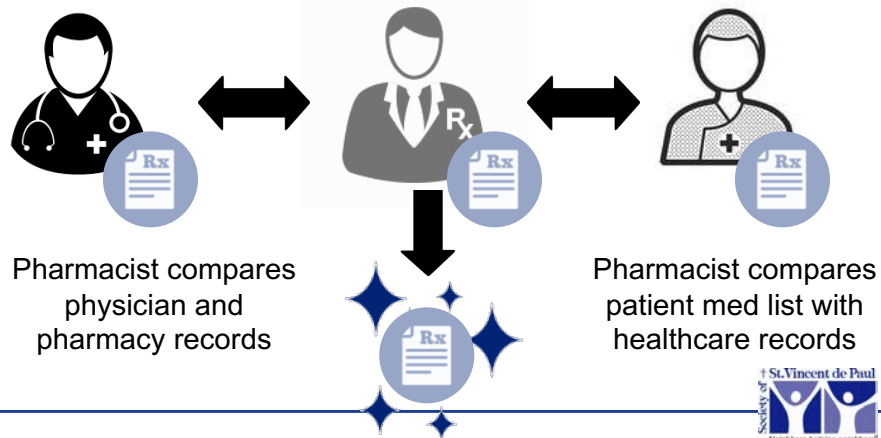
ECA gives value to pharmacist-resolved interventions that can be used as metrics for grant writing and strategic program development.

¹⁰ <http://www.amcp.org/data/jmcp/018-031.pdf>



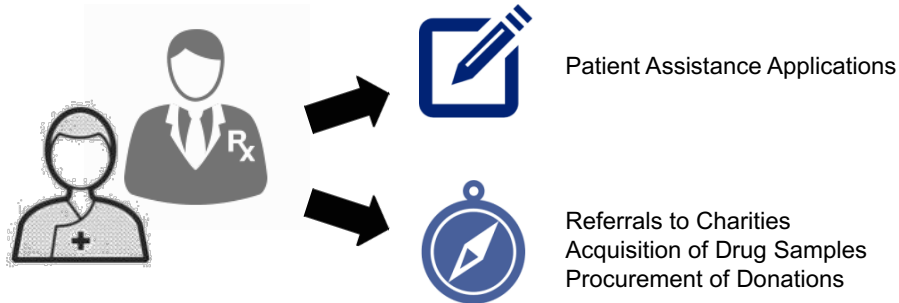
Medication Reconciliation

The formal process for creating the most complete and accurate list possible of a patient's current medication regimen.



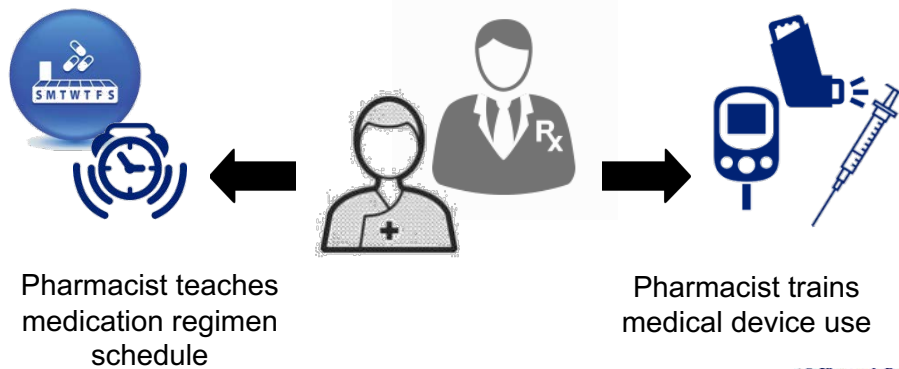
Medication Access

Pharmacists advocate for patients to access medications or assist in navigating through safety-net options.



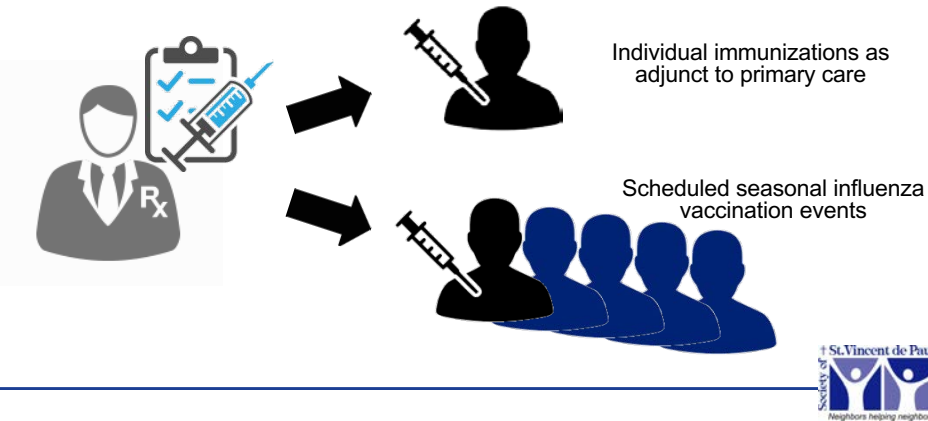
Adherence Education

A patient consultation to improve underuse, overuse, or administration/technique related to medication adherence



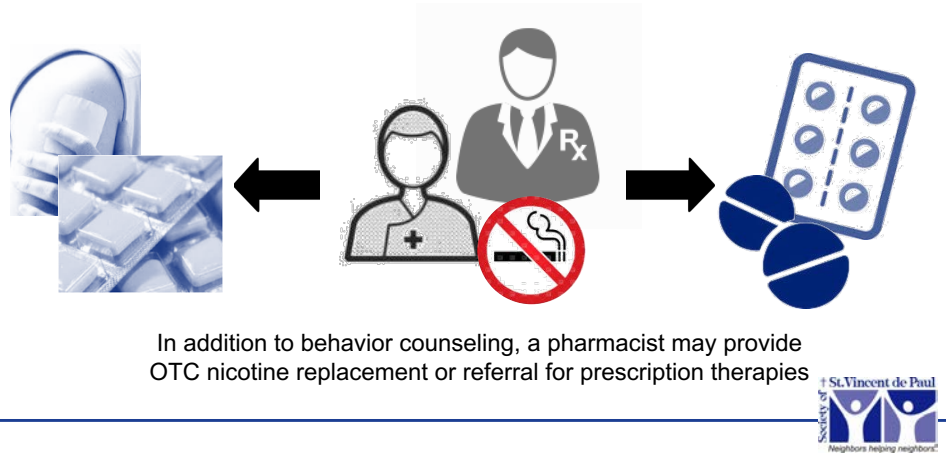
Immunizations

As allowed by state law, pharmacists may provide CDC-recommended immunizations.



Tobacco Cessation

Pharmacists may provide tobacco cessation aides with monitoring and counseling to improve success rates.



In addition to behavior counseling, a pharmacist may provide OTC nicotine replacement or referral for prescription therapies

Diabetes Self-Management Education

Pharmacists may lead or collaborate with efforts to obtain optimal diabetes control through education and management.

AADE-7 self-care behaviors may be taught by a pharmacist or may be delegated to a team including a dietician and counselor.



¹¹ <https://www.diabeteseducator.org/patient-resources/aae7-self-care-behaviors>



Identify strategies for the recruitment of volunteer pharmacists, pharmacy residents, and pharmacy interns



Potential Pharmacy Volunteers



Pharmacy Intern

Students in Final Year

Advanced Pharmacy Practice Experiential (APPE) students are required to complete 1 month of ambulatory care service under a pharmacist preceptor for graduation.



Pharmacy Resident

Licensed in Training

Community and ambulatory care post-graduate pharmacy residents complete an optional 1-2 years of advanced training as licensed pharmacists under a pharmacist preceptor.



Pharmacist

Licensed

Practicing pharmacists seek additional experience or board credentialing in conjunction with their primary practice sites in community, ambulatory care, or institutional pharmacy settings.



Pharmacist Incentives to Volunteer



Job Satisfaction

- Community pharmacists often report reduced job satisfaction due to stress level and low direct patient care. Volunteering in a clinical setting may enhance job satisfaction.



Skill Differentiation

- Newly graduating pharmacists are finding the job market more saturated than in previous years.
- They are looking for clinical experience to set themselves apart from their peers competing for jobs.
- Serving as a pharmacist preceptor for interns and residents hones leadership and teaching skills.



Credentialing

- Eligibility to become a Board Certified Ambulatory Care Pharmacy (BCACP) requires 4 years of experience with at least 50% of time in ambulatory care pharmacy settings.
- Board Certification in Advanced Diabetes Management (BC-ADM) requires 500 hours of experience and Certified Diabetes Educator (CDE) requires 1,000 hours.



¹² https://www.ptcommunity.com/system/files/pdf/ptj2903184_0.pdf

Residency Site Development



High Demand for Residencies

- Pharmacy residencies are competitive largely because there are too few residency programs.
- About 40% of residency applicants will not be matched for a position as a pharmacy resident.



Free Clinics: Ideal Practice Sites

- American Society of Health-Systems Pharmacists is the only accrediting body of pharmacy residencies.
- Accreditation for community pharmacy residencies requires an "interprofessional" learning experience.
- Free clinics provide an innovative approach to interprofessional care ideally suited for residency training



Shared Responsibility

- Partnering with a college of pharmacy shares the responsibility of hosting a pharmacy resident.
- Residents are paid about 40% the cost of a pharmacist, and this cost is often shared between the community pharmacy and college of pharmacy.



ashp

Accredited



¹³ <http://www.pharmacytimes.com/contributor/timothy-o-shea/2016/03/2016-pharmacy-residency-match-the-results-are-in>

¹⁴ <http://www.pharmacytimes.com/contributor/timothy-o-shea/2016/12/5-questions-to-ask-yourself-before-pursuing-a-pharmacy-residency>

Experiential Training Site



High Demand for Ambulatory Care Sites

- Pharmacy students must complete 10 months of clinical rotations to be eligible for graduation and licensure
- Experiential directors at colleges of pharmacy are often seeking new ambulatory care sites



Professor Preceptors

- Colleges of Pharmacy require professors to maintain their licensure through weekly service hours
- These professors will often train APPE students at their practice site.
- Free clinic staff may also serve as preceptors in conjunction with a licensed pharmacist

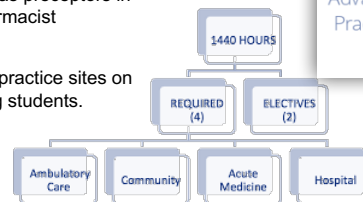


Training Stipend

- Most APPE programs pay their practice sites on average \$500/month for training students.



APPE
is a shorter form of
Advanced Pharmacy
Practice Experience



Tools for APPE Development



St. Vincent de Paul Charitable Pharmacy
Institution: Can APPE Rotation

Article Highlights
The Pharmacy **INTERvention**
at Good Samaritan Free Health Center

Rotation Syllabus Template

Rotation Calendar Template

Weekly Activity Report

Newsletter Assignment

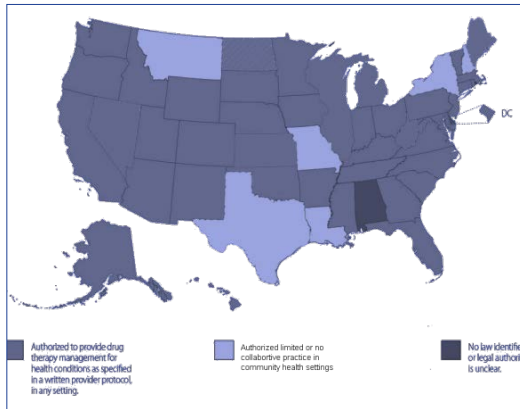
St. Vincent de Paul Society of America
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Discuss the implications of collaborative practice using a provided implementation toolkit

Collaborative Practice Agreements

A formal practice relationship in which a prescriber delegates authority to a pharmacist beyond the typical scope of practice



Authorization Levels

- Full CPA (43 states)
- Limited CPA (6 states)
- No CPA (Alabama)



State Laws Vary

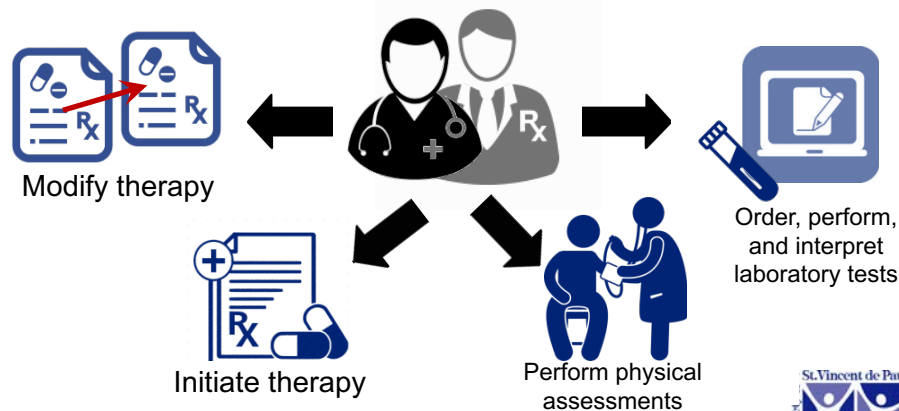
- Site restrictions
- Provider qualifications
- Multiple or single providers
- Functions to be delegated
- Liability insurance
- Documentation
- Approval by state agency

¹⁵ <https://www.cdc.gov/dhdp/pubs/docs/CPA-Team-Based-Care.pdf>

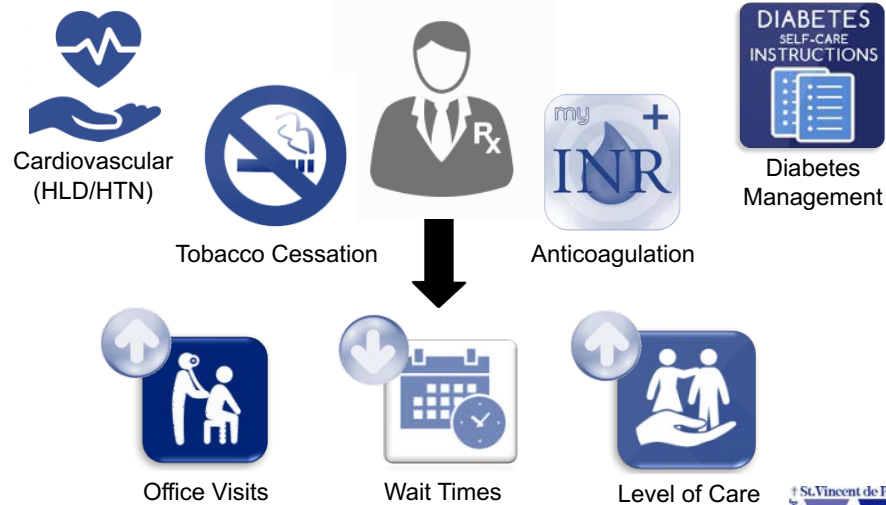


Functions Authorized by CPA

As allowed by state law, a physician may extend authority to a pharmacist when specified in a collaborative practice agreement.



CPA in Ambulatory Care



Delays at Community Pharmacy

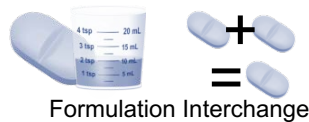


Patients with limited resources often experience significant adverse events following medication access delays.



¹⁶ Odukoya, O. K., Stone, J. A., & Chui, M. A. (2014). E-prescribing errors in community pharmacies: Exploring consequences and contributing factors. *International Journal of Medical Informatics*, 83(6), 427-437. doi:10.1016/j.ijmedinf.2014.02.004

CPA in Community Pharmacy



2017 CDC Implementation Guide



CPA Overview



Templates



Summary of State Laws





Brief Business Plan



¹⁵ <https://www.cdc.gov/dhdp/pubs/docs/CPA-Team-Based-Care.pdf>

CPA Community Pharmacy Toolkit

 Tips for Relationship Building

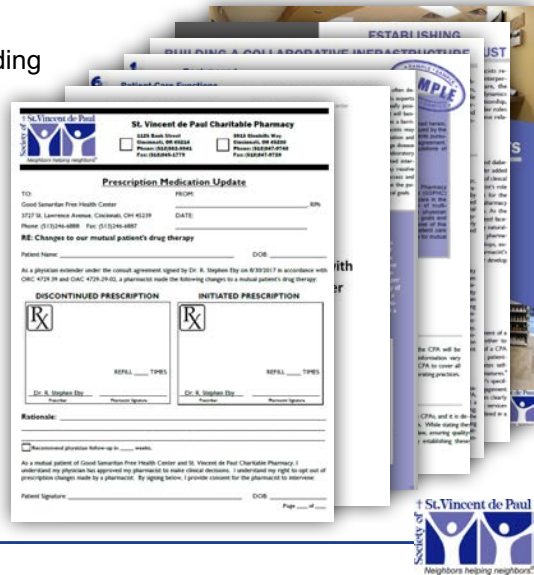
 Infrastructure Planning

 CPA Design Guide

 Practical Examples

 CPA Template

 Communication Template



Downloadable Resources



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or

☒ Remember me

Sign in

[Forgot your password?](#)

<https://www.dropbox.com>



Self-Assessment

Currently, what is the minimum level of degree required for new pharmacists to be eligible for licensure?

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References

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Any Questions?

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