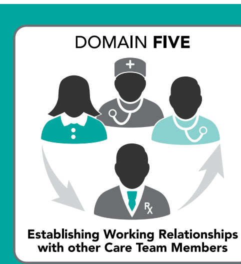
Flip the Pharmacy Change Package
Domain 5



Flip the Pharmacy: Champion Checklist
Collaborative Working Relationships

- ☐ **Understand care coordination by hearing from peers on ThriveSubscribe Podcast: Care Coordination.**
- ☐ **Practice care coordination in communicating with providers.**
- ☐ **Identify medication related problems and make interventions.**
- ☐ **Document and submit an eCare plan for patients focusing on identified problems and interventions.**

ACTION ➔ **Listen to the ThriveSubscribe Podcast – *Care Coordination Vol 2-7***
Click **HERE** to listen to the podcast

Key Podcast Points

Prescriber Relationships

- Learn how the pharmacy worked to build relationships with local prescribers by being an interventionist (identifying and resolving medication-related problem or MRPs).
- Learn more about how to ensure prescribers know that you, your pharmacy and your staff take care of patients through medication management and don't only dispense prescriptions.

Prescriber Communication Methods

- Learn more about the various ways pharmacies communicate information to physician practices. Examples are shared!

The Pharmacist Care Plan

- Details on this, and specifically, how the care coordination notes are used within the care plan
- Guests spoke about how they were able to document and share care coordination notes that worked to help their pharmacies

Workflow Innovation

If you are just implementing immunization screening/administration services or you do not currently have a process in place for care coordination in your existing immunization workflow, follow along with *Baseline Workflow C*.

What is Care Coordination?

Care Coordination is defined by the National Institutes of Health as the deliberate organization of patient care activities between two or more participants (including the patient) involved in a patient's care to facilitate the appropriate delivery of health care services.

In other words, we are part of the health care team and have a professional responsibility to ensure that our patient's medications are optimized. **This requires working collaboratively with providers**, sharing our "work- ups" of mutual patients, identifying and resolving medication-related problems (MRP), and making appropriate clinical interventions.

What is a Care Coordination Note?

The intent of a care coordination note is to document the status of coordination with providers, it's NOT meant to go to providers. The status may include what, when and whom.

Example Care Coordination Note:
2/1/21: Sent note to Dr. Wellness to notify him that DKA received her first shingles vaccine.

The act of coordinating care can include various types of care plans, including **prescriber communication**. As you are beginning to implement care coordination and documentation of that care through notes, pay attention to the following considerations for documentation of care plan coordination.

- Each pharmacy has different practices in place, so use what you have that works well for your pharmacy team in your current capacity. This may evolve over time and that is both okay and expected!
- Consider how to send communication to prescribers.
  - Leverage the variety of technology partners you work with to use tools you already have in place.

Baseline Workflow C

Create a process within your workflow for care coordination with other providers.

Many community pharmacists are care coordinators throughout the day as they call provider offices, caregivers and patients to resolve a medication-related problem or other issues that affect the patient.

How Do You Currently Communicate with Providers?

Do you make phone calls and send faxes as needed or do you have a process in place that your entire staff follows consistently? Care coordination and communication with providers should happen in a systematic fashion for ease and consistency. Communication to providers regarding immunization recommendations and administration is likely the easiest place to start if you do not currently have a system in place because pharmacy is typically notifying a provider that an intervention took place, rather than asking for feedback.

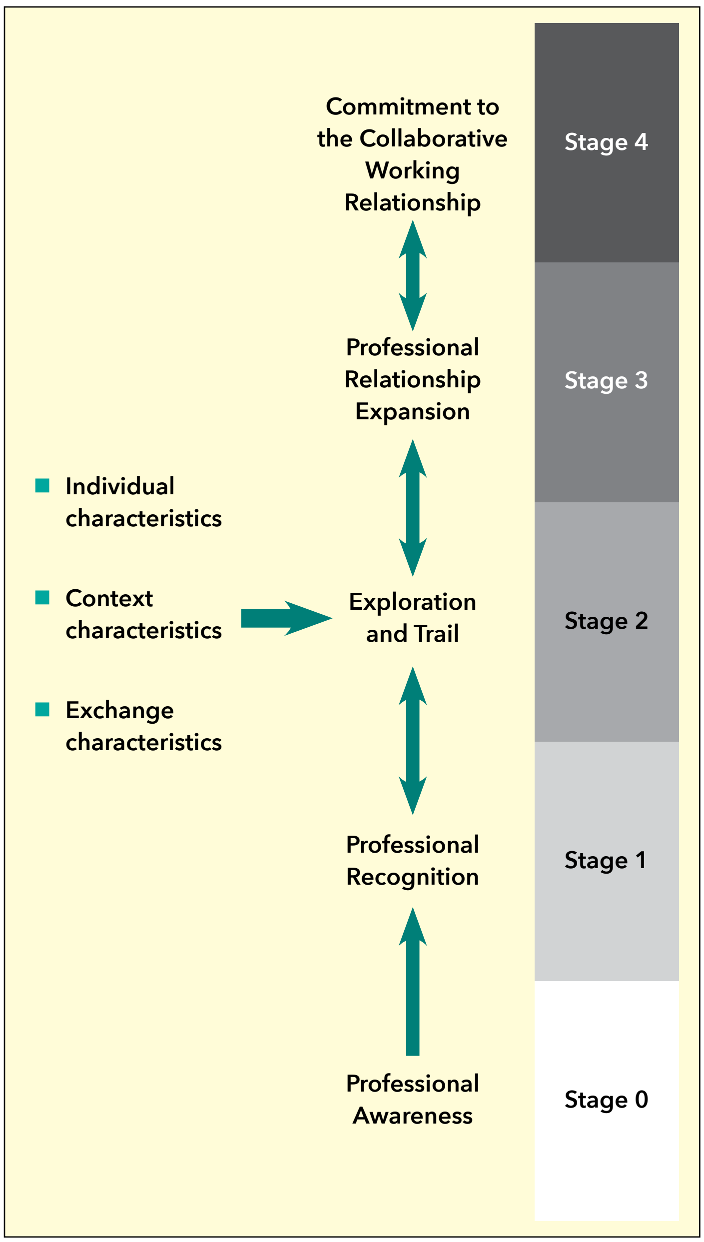
What are other considerations when communicating with prescribers?

- Keep patient focused
- Provide the physician with any meaningful background information
- Clearly and concisely outline the problem the patient is experience with drug therapy (i.e. needs drug therapy = immunization)
- Propose a solution (i.e. pharmacist's intervention = immunization administered)

Click HERE to access: *Improving Communication Skills of Pharmacy Students Through Effective Precepting*

Developing Collaborative Working Relationships with Prescribers

- Collaboration is a staged approach that is impacted by individual, contextual, and exchange characteristics
- Pharmacists can use apply specific strategies to move from one stage to the next
- Progressing up and maintaining the different level of stages requires continual proof of competence, trust, and managing expectations as stage movement can happen in both directions.
- The goal is to reach Stage 4 which is the commitment to Collaborative Working Relationship (CWR) stage between pharmacists and prescribers (other health care providers).



Pharmacists actions to continue CWR

- Keep communicating and maintain quality
- Streamline the care process
- Improve the efficiencies of the patient care process
- Quality assurance meetings with the provider and their staff as necessary
- Comprehensive documentation of outcomes attained
- Report generation and sharing with physician

Pharmacists actions to advance

- Inform physician on how your actions are affecting patient outcomes
- Documentation will be important
- Consistency of the quality of the service is important
- Processes used for patient care should remain relatively stable
  - Except when the process needs to be streamlined or communication needs to be changed/improved
- Report generation
- Follow-up meeting with physician to discuss service and his/her thoughts about the service
  - May need to meet with nurses, receptionist, and other personnel who are working with the physician

Pharmacists actions to advance

- Make high quality, high priority interventions to create expectation of value added
- Good and consistent communication
- Outstanding service to both the patient and the physician
- Follow-up and follow through as indicated

Pharmacists actions to advance

- Face to face visits
- Demonstrate competence
- Get to know each other professionally and move from awareness to recognition
  - "You can't trust what you don't know"
- Go above and beyond expectations

McDonough RP, Doucette WR. Building working relationships with providers. *J Am Pharm Assoc* (2003). 2003 Sep-Oct;43(5 Suppl 1):S44-5. doi: 10.1331/154434503322612447. PMID: 14626530.

Workflow Innovation: Communicating with Providers

Communication with prescribers is key to transforming your pharmacy practice to moving beyond filing prescriptions at a moment in time to caring for patients over time. Below is a simplistic overview of a **3 step process** to developing a collaborative working relationship. We will focus on ensuring you have tools to complete steps 1 and 2. While we won't visit prescribers as part of this Change Package, that will be a goal for future so it is important to follow through with steps 1 and 2 below.

STEP ONE: Complete an introductory conversation with prescribers

STEP TWO: Start sharing interventions and monitoring with prescribers

STEP THREE: Visit the prescriber

STEP ONE: Complete an Introductory Conversation with a Prescriber

Select one prescriber to have an initial conversation

KEY → **Focus on shared patients with hypertension**

How to select a provider?

- Run report of patients on anti-hypertensives by prescriber
- Select one you know well/comfortable with and have shared patients

Call and explain the "new" role of your pharmacy and discuss shared patients

- Be sure to **quantify the number of patients you share** with the prescriber or practice
- **Ask what you can do to better** help the prescriber manage patients?
  - **Share** measured Blood Pressure Logs
  - **Teach proper technique** to patients using home blood pressure monitoring
  - **Share** an up-to-date patient medication list and/or adherence summary

Example Phone Conversation: Introductory Call

Hi, Dr. Smith this is the Pharmacist from ABC123 Pharmacy on Main street in town. We see over 60 of your patients with hypertension at our pharmacy each month. Over the past month, we have been able to review their blood pressure logs – which include both self-reported and pharmacy reported measures. We'd like to being faxing these records to you each month. What is the best way to ensure you are able to review these and the documents are not just filed in the patient charts?

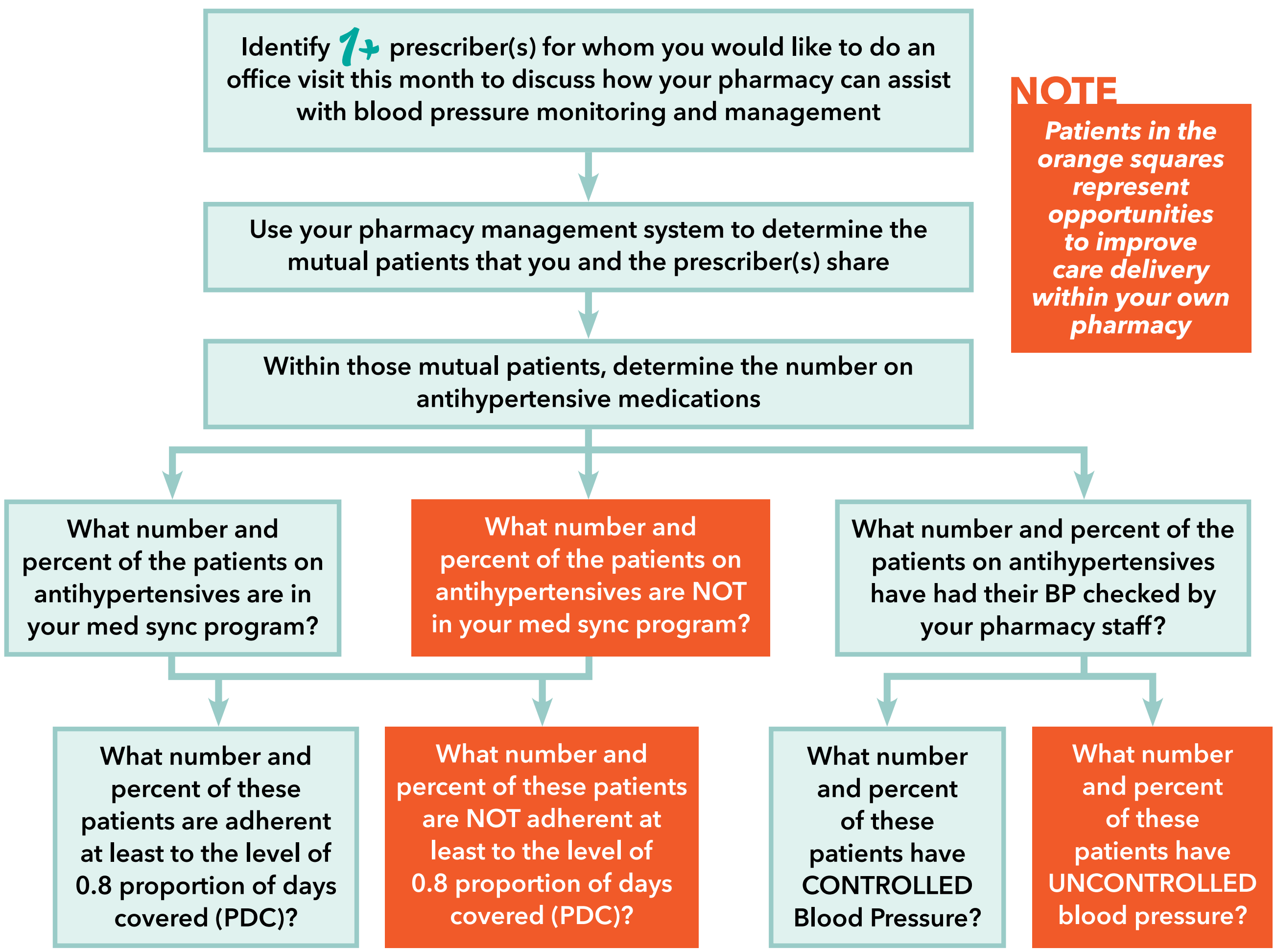
STEP TWO: Start Communicating with Prescribers

- **Begin faxing or calling prescribers with mutual patients.** You may do this to share BP logs, adherence summary reports, medication lists or intervention notes related to identified drug therapy problems

STEP THREE: Visit the Prescriber

Know Your Data Before the Practice Visit

Before you approach your local prescribers with whom you share a lot of common patients about how you can work together, it is best to make sure you know your own data – and specifically how your pharmacy is performing on all measures related to blood pressure care, since that is your current focus.



Consider the following for use for the practice visit:

Share Your Prescriber Visit Data – Mutual Patients Template

TALKING POINTS: We wanted to take a look at how we are doing managing our patients who take antihypertensive medications, and how these new services might allow us to assist your practice. (Explain the mutual patients that you share, and highlight the data showing how med sync helps to maintain high levels of medication adherence. Then show how your recent initiation of blood pressure monitoring has slowly started to incorporate patients at the practice.)

Share the Enhanced Services Prescription Pad

(Click **HERE** to access the Enhanced Services Prescription Pad template)

TALKING POINTS: We'd like to incorporate more of our mutual patients with hypertension into our blood pressure monitoring program, and even consider doing this for other patients of yours that are not currently using our pharmacy. This is an **enhanced services prescription pad** that you can use to communicate the need for pharmacy services to us. It can be used for existing patients that we share, or for new patients who are willing to fill their prescriptions at our pharmacy in addition to having us monitor their blood pressure and provide education about optimal self-management.

CPESN

HILLCREST PHARMACY

Hillcrest Pharmacy
Phone: 919-555-5555
Fax: 919-555-0000

PRESCRIPTION FOR SERVICES

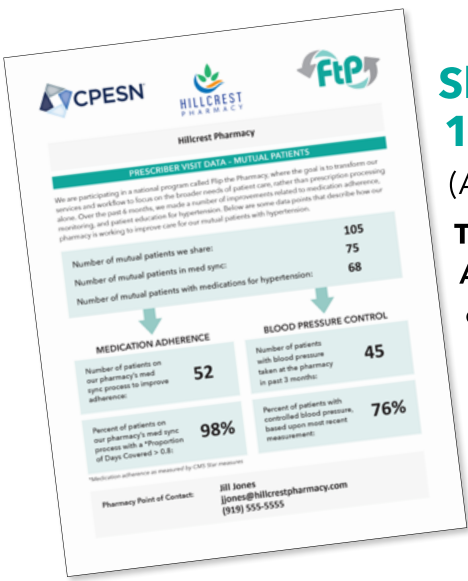
Patient Name ____________________
Phone # ____________________ Date ________
DOB ________
☐ Medication Synchronization ☐ Blood Pressure Monitoring
☐ Adherence Report Card ☐ Other Service: ________
Supporting Notes: ____________________

☐ Follow-up with Prescriber Office Needed by ________
Follow-up Contact ____________________
Phone ____________________
Email ____________________ Fax ________

Prescriber Name ____________________
(please print)
Prescriber Signature ____________________

Prescription-Level Moment-In-Time FtP Patient-Level Care Plan-Over-Time

TIP → **Inform the prescriber's practice that they can have the patient bring the enhanced services prescription to the pharmacy, or it may be better for the practice to fax it to the pharmacy so that pharmacy staff will not have to depend on the patient to bring it to the pharmacy.**



CPESN

HILLCREST PHARMACY

FtP

Hillcrest Pharmacy

PRESCRIBER VISIT DATA - MUTUAL PATIENTS

We are participating in a national program called Flip the Pharmacy, where the goal is to transform our services and workflow to focus on the broader needs of patient care, rather than prescription processing alone. Over the past 6 months, we made a number of improvements related to medication adherence, monitoring, and patient education for hypertension. Below are some data points that describe how our pharmacy is working to improve care for our mutual patients with hypertension.

Number of mutual patients we share:	105
Number of mutual patients in med sync:	75
Number of mutual patients with medications for hypertension:	68

MEDICATION ADHERENCE

Number of patients on our pharmacy's med sync process to improve adherence:	52
Percent of patients on our pharmacy's med sync process with a *Proportion of Days Covered > 0.8:	98%

*Medication adherence as measured by CMS Star measures

BLOOD PRESSURE CONTROL

Number of patients with blood pressure taken at the pharmacy in past 3 months:	45
Percent of patients with controlled blood pressure, based upon most recent measurement:	76%

Pharmacy Point of Contact: Jill Jones
jjones@hillcrestpharmacy.com
(919) 555-5555

Share a Patient Adherence Summary for 1-2 of Your Mutual Patients

(Access the Patient Adherence Summary template **HERE**)

TALKING POINTS: We have started producing these **Patient Adherence Summaries** and providing them to the patient's primary care physician. The feedback they have gotten is that physicians find this adherence data very helpful, because it is not otherwise readily available to them. Is this something that would be useful to you? If so, how can we coordinate the timing of the information relative to the patient's appointment with you?

Questions to Consider Asking the Practice

- If we were going to share blood pressure values with your practice, what is the best way for us to share them with you?
- If our blood pressure monitoring shows that a patient's medication dose or regimen might need to be changed, what is the best way for us to send that to you?
- How is your practice currently doing with the hypertension performance measures? Is there a way our pharmacy could help using the services I've described?