



Pharmacy Practice Model Initiative

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Pharmacy Practice Model Initiative

- Objectives (Six)
 - Describe optimal pharmacy practice models that ensure the provision of safe, effective, efficient, and accountable medication-related care for hospital and health-system patients, taking into account the education and training of pharmacists, the prospect of enhancing the capacity of pharmacy technicians, and the current and future state of technology;
 - Determine the tools and resources needed to implement optimal pharmacy practice models in hospitals and health systems;



Pharmacy Practice Model Initiative

- Goal
 - Significantly advance the health and well being of patients in hospitals and health systems by developing and disseminating optimal pharmacy practice models that are based on the effective use of pharmacists as direct patient care providers.



Pharmacy Practice Model Initiative

- Objectives (Six)
 - Identify core patient-care-related services that should be consistently provided by departments of pharmacy in hospitals and health systems;
 - Identify existing and future technologies required to support optimal pharmacy practice models in hospitals and health systems;
 - Identify specific actions that hospital and health-system pharmacists should take to implement optimal practice models;

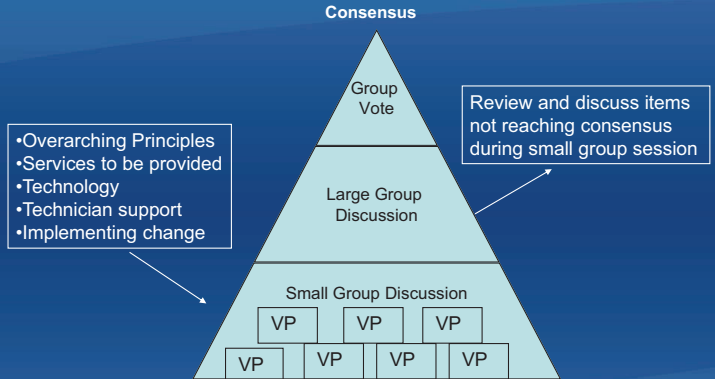


Pharmacy Practice Model Initiative

- Objectives (Six)
 - Foster understanding of and support for optimal pharmacy practice models in hospitals and health systems by patients and caregivers, health care professionals, health care executives, and payers.



Pharmacy Practice Model Initiative



Pharmacy Practice Model Initiative

- Structure
 - Approximately 150 persons in attendance
 - 110 voting participants from across the U.S. including the District of Columbia and Canada
 - 39 Invited observers
 - 13 Persons on advisory committee
 - Small group discussions on survey data
 - Large group discussions
- } Consensus



Pharmacy Practice Model Initiative Overarching Principles*

- Opportunity to significantly advance the health and well being of patients...by changing how pharmacists, pharmacy technicians, and technology resources are deployed.
- Pharmacy departments need to take responsibility for the overall financial health of their hospital/health system.

* >90% Agreement



Pharmacy Practice Model Initiative Overarching Principles*

- Pharmacy technicians...could be used more extensively to free pharmacists from routine drug distribution activities
- Assigning distribution tasks to pharmacy technicians would make it possible to redeploy pharmacists' time to drug therapy management
- Hospital pharmacists must be responsible and accountable for patient's medication-related outcomes

* >90% Agreement



Pharmacy Practice Model Initiative Overarching Principles*

- In the next 5 – 10 years
 - Hospitals or health systems will be under increasing pressure to cut operating costs
 - Executives will require pharmacy department operations to be more efficient
 - Increased demand among new pharmacy graduates for residency training
 - Required quality measures related to medication use in hospital/health systems will increase

* >90% Agreement



Pharmacy Practice Model Initiative Overarching Principles*

- In optimal practice models, the role of pharmacists in frontline practice should not be limited to drug distribution and reactive order processing
- Medication use policy development; ensuring institutional safe medication use

* >90% Agreement



Pharmacy Practice Model Initiative Overarching Principles*

- Departments of Pharmacy should...
 - Play a critical role in ensuring the hospital adheres to medication-related national quality indicators
 - Play a critical role in ensuring the hospital adheres to medication-related evidence-based practice guidelines
 - Track and trend adverse drug events
 - Manage prospective and retrospective medication-use evaluation programs to improve prescribing
 - Identify problem-prone and/or high risk therapies using pre-established criteria
 - Routinely review hospital antibiotic resistance patterns

* >90% Agreement



Pharmacy Practice Model Initiative Overarching Principles

- *Drug-therapy management should be provided by a pharmacist only for selected high-risk hospital inpatients – **Not supported***



Pharmacy Practice Model Initiative Technician Support*

- Uniform national standards should apply to the education and training of pharmacy technicians
- Technicians must be certified by the Pharmacy Technician Certification Board (PTCB)
- Tech-Check-Tech
- Compounding of routine sterile preparations in conformance with well documented procedures
- Scheduling outpatient clinic drug therapy management visits

* >90% Agreement



Pharmacy Practice Model Initiative Technology*

- Electronic medical record systems are important to hospitals and health systems that are committed to pursuing an optimal pharmacy practice model.

* >90% Agreement



Pharmacy Practice Model Initiative Technician Support*

- Inspecting and replenishing medication storage devices
- Supervising other technicians
- Managing..
 - Controlled substance systems
 - Medication assistance programs
 - Department information technology systems including routine database management and billing systems

* >90% Agreement



Pharmacy Practice Model Initiative Technician Support

- Teaching patients about their medication regimens – *Not supported*
- Reviewing patient charts to clarify medication orders – *Not supported*
- Coordinating therapeutic interchanges – *Not supported*
- Communicating with prescribers to ensure formulary compliance – *Not supported*



Pharmacy Practice Model Initiative Implementing Change*

- Insufficient evidence demonstrating the value of pharmacists' provision of drug-therapy management is a barrier to optimal pharmacy practice models – *Not supported*
- Satellite pharmacies are a critical component in the implementation of optimal pharmacy practice models – *Not supported*



Pharmacy Practice Model Initiative Implementing Change*

- ...pharmacists must perceive themselves as and, at all times, act as a professional
- Critical components in implementation of optimal pharmacy practice models:
 - Leadership (administrative and clinical)
 - Pharmacist access to complete patient-specific data
 - Support from health care executives, medical staff leadership

* >90% Agreement



Pharmacy Practice Model Initiative





Pharmacy Practice Model Initiative Harris County Hospital District

- **Background:**
 - Several attempts to incorporate 'clinical' functions into current workflow
 - Staff development program – 2002
 - CAPs – 2005
 - PACE – 2007
 - ClinOps v.1.0 – 2009
 - ClinOps v.2.0 – 2011
 - Basic clinical functions identified
 - IV to PO
 - Anticoagulation monitoring
 - Renal dosing
 - Code Blue attendance
 - TDM for certain drugs (aminoglycosides; vanc)



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- **Current State:**
 - Decentralized
 - Piloting centralized model
 - 1 FTE
 - 9 Inpatient Clinical Specialists
 - Onc, IM, Critical Care, Pedi, EC
 - Staffing component – 1 to 2 days weekly
 - 14 ambulatory Clinical Specialists
 - Primary Care, Anticoagulation, HIV
 - Staffing component – none
 - 192 staff pharmacist and 234 technicians
 - Anticoagulation monitoring
 - *Code Blue*



Pharmacy Practice Model Initiative Harris County Hospital District

- **Challenges:**
 - Absence of Trust
 - Concerns about job stability
 - Fear of conflict
 - Resultant complacency
 - Lack of Commitment
 - Actions and words don't always align
 - Avoidance of Accountability
 - Set low standards with no real "teeth"
 - Inattention to Results
 - Difficulty in agreeing to meaningful results
 - Generational struggles
 - Fiscal struggles
 - Workflow (time to perform duties)



Pharmacy Practice Model Initiative Harris County Hospital District

- **Future State:**
 - Largely Unknown
 - Piloting centralized model
 - Reviewing workflow for possible implementation of tech-check-tech model
 - Attainment of 2015 goals
 - Others ??



freedom to succeed