Hypertension Progression Change Package
Month 5

Flip the Pharmacy: Champion Checklist

- ☐ **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 with hypertension, focusing on identified problems and interventions.**

Monthly Focus

This month, the **Change Package** is focused on **increasing the quality of patient interactions** by building upon previous months and sharing findings with prescribers.

Utilize information provided to identify which medication related problems and interventions the pharmacy staff wants to focus on this month with patients who have hypertension.

As we prepare for the last **Change Package** for the hypertension progression, understand which prescribers the pharmacy has the most mutual hypertension patients.

Understanding the Different Types of Documentation Notes

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**. Organizing care involves the marshalling of personnel and other resources needed to carry out all required patient care activities, and is often managed by the exchange of information among participants responsible for different aspects of care.

The act of coordinating care can include various types of care plans, including prescriber communication. As you being to implement care coordination 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 outside your documentation platform (when needed)
- Leverage the variety of technology partners you work with to use tools you already have in place

Care Coordination: Hear from your Peers

ACTION → **Listen to the ThriveSubscribe Podcast** – *Care Coordination Vol 2-6*
Click **HERE** to listen to the podcast

The **Pharmacy Champion** is encouraged to listen to the podcast as one of the February requirements. The Podcast is available on the ThriveSubscribe podcast channel on both iTunes and Soundcloud

Key Podcast Points

- Prescriber relationships
  - We discussed how the pharmacy worked to build relationships with local prescribers
  - 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

GUESTS

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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. This month, we will focus on ensuring you have tools to complete steps 1 and 2. While we won't visit prescribers as part of this month's **Change Package**, that will be a goal for next month 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 with

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 begin 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 on mutual patients. You may do this to share BP logs, adherence summary reports, medication lists or intervention notes related to identified medication-related problems. Page 4 provides tools the pharmacy can utilize.

STEP THREE: Visit the Prescriber

Looking ahead: Scheduling prescriber visits is not required, but you may want to consider creating a list of local prescribers to visit for a meeting. This will be used in the next **Change Package**.

Click **HERE** for a sample Blood Pressure Log to download, print, and keep on hand at the pharmacy

Below is a template that you may utilize for a **Patient Adherence Summary**. Click **HERE** to download and customize for your own pharmacy.

PATIENT ADHERENCE SUMMARY

Date_____

Patient Name _____ **Prescriber**_____

DOB_____ **Fax**_____

Current Complete Medication List (including OTC, herbals, supplements)

Medication Name/Strength	Directions	Indication	PDC %**

***Proportion of Days Covered (PDC) measures the percentage of days covered by a prescription medication within the calendar year. PDC < 80% for a given medication is classified as "non-adherent."*

Adherence Summary of Non-Adherent Medications Listed Above (over the last 6 months)

Medication	Date(s) Filled	Quantity	Day Supply

Pharmacist Adherence Assessment and Patient-Reported Comments:

Pharmacist Name _____ **Pharmacist Signature** _____
(please print)

Click **HERE** to view an example of how Towncrest Pharmacy communicates information to a prescriber.

Workflow Innovation: Optimizing the Use of Technology and eCare Plans

Click **HERE** to learn more about **Commonly Used Medication Related Problems (MRPs) and Interventions** from the eCare Plan Documentation Guide.

Consider making a list of MRPs and respective interventions that the pharmacy common identifies and resolves, respectively. Click **HERE** to learn how to make your own **Pharmacy's Personalized Patient Encounter Documentation Form**.

- Click **HERE** to access the blank template for eCare Plan documentation.

Identifying a MRP and Providing an Intervention

1. Make prescriber aware of the MRP
   - This can be done via a phone call or sharing of information over fax
   - EXAMPLES: Sharing a BP log or adherence summary report
2. Offer a recommendation to the prescriber
   - This can be done via a phone call or sharing of information over fax.

Click **HERE** for a document that Montross Pharmacy has utilized focused on the **Practical Clinical Process: Blood Pressure Measurement**, which helps you to follow a process for monitoring a patient's blood pressure management.

Click **HERE** for more information on **eCare Plan** documentation by following along with a **sample eCare Plan scenario**.