Integration of a shared care pharmacy technician in an ambulatory care clinic

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Results

- Prior to implementation of this project, completion of medication histories was not formally tracked at CFM
- During 14-day pilot period in February 2018 the ambulatory pharmacy technician completed 172 medication histories (average 12.3/day) meeting the set target of 12 medication histories per day
- While completing medication histories the technician:
  - Identified 501 medication list discrepancies (see figure 1)
  - Categorized 61 medication access barriers (see figure 2)
  - Documented 69 medication access resolution interventions including provider notification, referral to NHRMC outpatient pharmacy and referral for pharmacy specific clinic visit
  - Notified providers of 83 refill requests

Methods

- Pilot program integrating an ambulatory care technician into direct patient care in a family medicine residency clinic
- Practice setting: Coastal Family Medicine (CFM), family medicine residency clinic associated with New Hanover Regional Medical Center
- Approximately 75 adult patients seen each day at CFM and approximately 40 patients meet high risk criteria (defined below)
- Through completion of medication histories, technician worked with pharmacists to identify and resolve medication access issues
- Tool developed in medical record to allow tracking of ambulatory pharmacy technician patient interactions
- All patients were eligible for technician intervention, however patients meeting the following criteria were prioritized:
  - Pharmacist clinic visit
  - Physician referral
  - High Risk Criteria

Methods cont.

- Smartform built in EPIC to track ambulatory pharmacy technician patient interactions
- Smartform modeled after NHRMC inpatient transitions of care flowsheet and allows technician to document:
  - Referral and information source
  - Type of patient encounter
  - Type of medication access issues
  - Resolution of medication access barriers
  - Total number of technician interventions
  - Time in contact with patient and time in patient follow-up
  - Allows for easy data tracking and adjustment of pharmacy technician weekly/daily schedule based on interventions documented

Potential Technician Interventions

| Call to pharmacy to confirm medication list | Notify CFM pharmacist of discrepancies that require immediate follow-up | Referral for pharmacist clinic visit |
| Call for NHRMC Outpatient Pharmacy services (synchronization and shipping of refills, medication assistance, etc.) | Identify/resolve patient safety issues (provide pill box, medication lock box, etc.) | Referral for technician intervention (synchronization and shipping of refills, medication assistance, etc.) |

Impact of project based on NHRMC three strategic pillars

<table>
<thead>
<tr>
<th>Access</th>
<th>Value</th>
<th>Health Equity</th>
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<tbody>
<tr>
<td>With integration of a permanent technician, goal would be to eventually see all high risk patients as these patients are seen in clinic on a regular basis</td>
<td>Identification of cost savings for patients</td>
<td>Technician able to help ensure higher risk patients are receiving necessary resources</td>
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<td>Standard work and flowsheet model for other clinics to integrate technicians</td>
<td>Revenue generated through NHRMC outpatient pharmacy</td>
<td>Potential to decrease readmissions through improved accuracy of medication lists</td>
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Discussion

- Over a two week period the ambulatory pharmacy technician was able to extend care of pharmacy services to 172 clinic patients and documented 69 medication access resolution interventions
- Standard work developed during this project will be available for other clinics within NHRMC health system to establish a workflow for an ambulatory pharmacy technician in their clinic
- An A3 is in final development process for submission of a permanent position at our family medicine clinic with the goal of expansion to other outpatient clinics
- Future roles identified for ambulatory pharmacy technicians in addition to medication histories include:
  - Participation in Medicare Annual Wellness Visits
  - Transitional Care Management phone calls
  - Completion of prior authorizations
  - Involvement in specialty clinics (hepatitis C, medication assisted therapy, pre-exposure prophylaxis (PrEP), etc.)

Resources

- Jones J, Edgerton, M. Impact of pharmacy advantage program on decreasing health care encounters; Poster presented at: NHRMC Quality Week; 2017 Oct 16; Wilmington, NC.

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