Developing Pharmacist-Managed Clinics in the Outpatient Setting

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A Primer for Developing Pharmacist-Managed Clinics in the Outpatient Setting

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• Objectives
• Introduction
• Building support for services
• Needs assessment
• Selecting the focus of Clinical services
• Developing the proposal
• Marketing
• Conclusion
Objectives

- Serve as a primer for pharmacists who wish to establish clinical pharmacy services in outpatient settings
Introduction
Clinical pharmacists are an integral part of the health care system

Providing supportive services to health professionals and patients alike may improve quality of pharmaceutical care
• Pharmacists have made significant contributions to improved patient care in primary care clinics and in other clinical settings as well

• Pharmacists have extensive knowledge about drugs regarding their therapeutic administration, cost, and adverse effects

• Pharmacist can help physicians choose appropriate drugs while maximizing clinical benefits and reducing the number of negative outcomes
• Diabetes
• Hypertension
• Anticoagulation
• Hyperlipidemia
• Asthma
• Pharmacotherapy services
Building support for services
• Pharmacy administration
• Medical staff
• Nursing staff
• Laboratory unit
• Clerical staff
Pharmacy administration

• **Gather momentum** for the initial proposal and subsequent development of the clinic

• To motivate administrators, **anticipate the needs and outcomes desired**

• Provide **routine progress reports**
Medical staff

- Physician support readily available if the physicians have had experience with pharmacist-managed services at their current or previous institution.

- Physician support frequently needs to be fostered if pharmacist services are new to the institution.
  - Education on how a pharmacist, acting as a drug therapy expert, can enhance patient care services.

- Frequent communication between these two partners helps ensure continued trust and knowledge regarding the progress of specific patients.
• Not all physicians refer patients to the pharmacy clinic immediately.

• Some may choose to first observe how the service functions and how patients react to the service.

• Other physicians may start referring once the clinic becomes better established.
• Continued physician support can be maintained through good communication, such as periodic presentations of outcomes, thus maintaining accountability and credibility.
Nursing staff

For the new service

- The first group consists of the nurses who assist physicians during clinic hours
  - help identify patients who may be candidates for the pharmacy service and can prompt the physician for a referral.
  - help answer patient’s query
    * location of the pharmacy clinic
    * how to make an appointment
    * cost of services
The second group of nurses that can offer support are those who provide physical support for the pharmacy clinic:

- obtain vital signs
- make telephone calls for triage patients
- place patients in examination rooms
- prepare examination rooms for the next patient
Laboratory Unit

1. **Point-of-service machines** to run specific laboratory tests - use blood samples obtained by finger stick
   - Analyze prothrombin time (PT)
   - International normalized ratio (INR)
   - Glycosylated hemoglobin (A1C)
   - Cholesterol panels

2. **Heel ultrasound scan** for osteoporosis - radiology department
3. **Carbon monoxide monitor** used in smoking cessation programs
4. **The spirometer** for patients with asthma.
Advantages of using these machines

• Increased speed in receiving results
• Enhanced clinic efficiency
• Heightened patient satisfaction
Clerical Staff

- Assist with developing the *clinic schedule* in the computer
- Scheduling appointments
- **Calling patients** with appointment reminders
- Answering *phone* calls
- Entering *laboratory orders*
- Processing *consultations*
Needs assessment
• Needs assessment analysis - identified possible services

• Methods used to identify the specific needs
  ~ Examining hospitalization and rehospitalization rates
  ~ Reviewing emergency department visits
  ~ Comparing compliance with national, state, or local guidelines
• If the institution excels at managing specific conditions, starting a new service in this area should be avoided

• Thus, target conditions that lead to frequent hospitalizations or emergency care
Selecting the focus of Clinical services
• Results of the needs assessment

• Areas in which the institution excels

• Pharmacy staff expertise or areas in which the staff can become experts

• Availability of pharmacy staff

• Clinic supporters
Developing the proposal
• The purpose of the clinic proposal is to specify the details of the new clinic and its services

• This information can be presented to administrators, physicians, or any initial supporter

• The organization of the proposal should be succinct and easy to follow.
Purpose

Outlines the purpose of the pharmacy clinic:

- Decreasing hospitalizations and emergency department visits
- Improving patient care
- Increasing compliance with formulary drugs
- Decreasing drug costs
- Improving patient satisfaction with the health care
Background Information

- Information describing the current standards of care
- A review of pharmacist-managed literature showing improved outcomes to support the pharmacist's involvement in patient care
- The local institution's success at achieving these standards.
- Information on pharmacy and medicine laws relating to pharmacists' clinical privileges
Clinic Structure

• Outline the proposed clinic structure
• Available staff per week
• Clinic location
• Referral process
• Specific tasks and disease states to be managed
• **Method of service** (e.g., Telephone contact, face-to-face visits, or written postcards or surveys)

• Amount of **time to be spent** with new and follow-up patients (e.g., 60 minutes for new patients, 30 minutes for follow-up patients)

• Planned frequency of **follow-up**

• **Plan** for patients once they have achieved their therapeutic goal
Implications

- Expanding pharmacy services,
- Enhancing job satisfaction,
- Increasing opportunities for research,
- Providing an experiential opportunity for pharmacy residents and students
• Clinical implications
  - Improved care
  - Increasing patient compliance with drug therapy,
  - Improving management of specific disease states
  - Improving quality of life
Assessment

- What outcomes will be assessed
- To whom the data will be presented
- The frequency of such assessments
- Whether the analysis will be prospective or retrospective
- The length of time that this process may take
- The assessment tools
Financial Summary

- Essential component to estimate of the financial impact of the clinic on the institution

- Factors contribute to the overall financial impact of the clinic
  - Cost avoidance,
  - Decreased drug costs,
  - Appropriate prescription of formulary drugs,
  - Direct patient care revenue
Resources

• **Space and equipment** that are necessary for the pharmacy clinic
  - examination room, or office

• **Personnel resource**
  - nursing staff be needed to obtain vital signs
  - receptionist or clerk schedule and process orders

• laboratory technician
The primary audience consists of patients and physicians.

- Direct marketing to patients can be achieved by
  ~ providing brochures,
  ~ writing a patient education column in the local newspaper,
  ~ hosting a health information spot on a local radio or television station.

- Marketing to physicians- provide specific details and continued reminders of the pharmacy service.
Conclusion
• Initiating a pharmacy clinic in an outpatient setting typically requires obtaining support from administrators, pharmacy directors, physicians, and other department personnel within the institution involved.

• Evaluating the impact the pharmacy clinic will have on each department provides foresight regarding possible questions, hurdles, and level of support for the clinic.

• A well-organized clinic proposal not only delineates what support is being requested, but also focuses on how the pharmacy clinic can positively affect patient care at the institution.
• **Marketing** of the service is important with promotion of the service to patients & physicians

• Presenting interim **results** to administration and clinic physicians often fosters further support for the service, permitting expansion of clinical pharmacy services
Thank You