How to find the right patients for specific pharmacy services?

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PCNE Working Conference 2019



Pharmaceutical care services



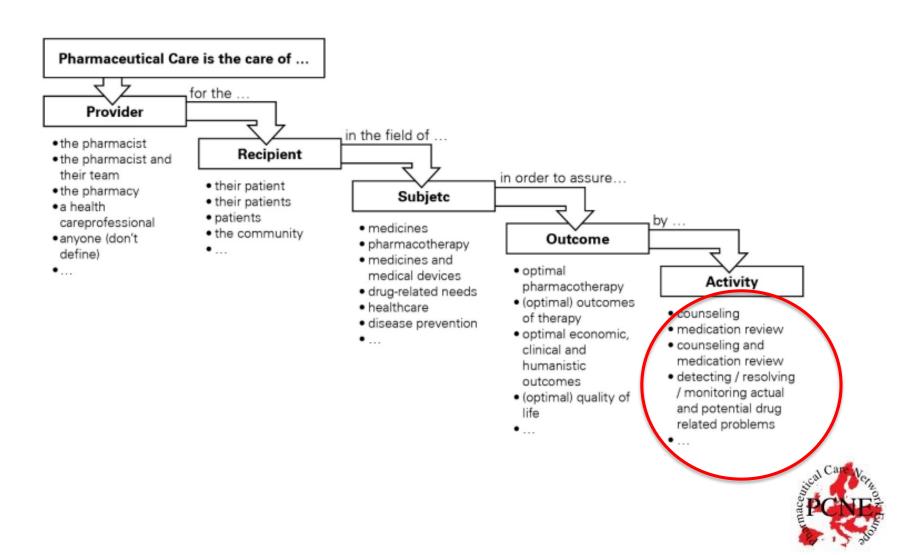
Differences in medication complexity & health outcomes



Tailoring and targeting services to needs & selection of (risk) patients for specific services



Pharmaceutical care PCNE definition



Tailoring and targeting services

 When/how to tailor routine pharmacy services regarding actual medication use for specific patient groups

 How to select patient subgroups most in need of advanced, targeted services



3 subgroups – 3 different topics

Group 1: Patient selection for medication review *Risk score based on electronic data*

- **Group 2:** Tailoring pharmaceutical care services around non-adherence
- Signs, data, clinical judgement ("gut feeling")
- **Group 3:** Requirements / conditions for implementation of pharmacy services

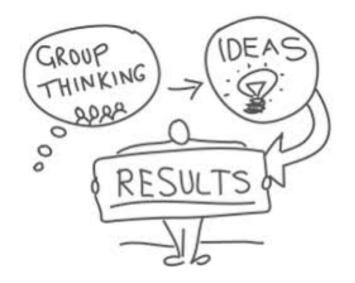
Wants, needs, concerns



Output of the workshop













Group 1

How to select patients for medication review by proven criteria (electronically) by a risk score in primary care





STEP 1

- Number of medicines (+OTC)
 - 5-10:1 points
 - 11-15: 2 points
 - >15: 3 points
- AND high risk medication
 - Anticoagulants, cancer, antidiabetics associated with hypoglycemia, 3 or more antihypertensives, narrow therapeutic range (immunosuppressants, digoxin, lithium, anti-epileptics)
 - 1: 1 point
 - 2: 2 points
 - 3 or more: 3 points

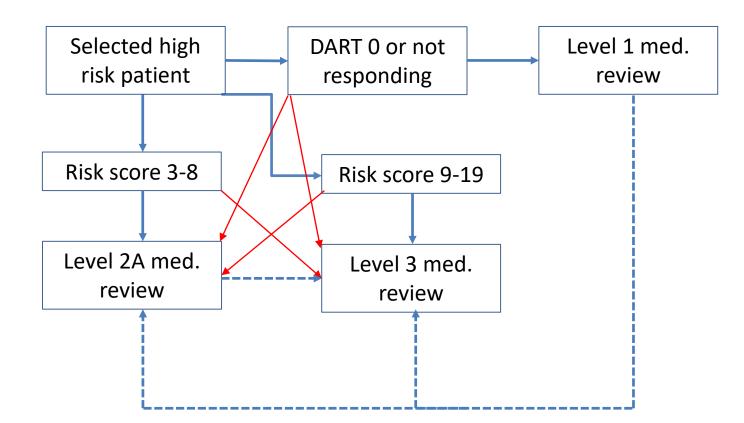


STEP 2

- DART Questionnaire adapted version
 - Do you have intake problems? 1 point
 - Do you worry on medication? 1 point
 - Do you ever forget medication? 1 point
 - Are you living alone? 1 point
 - Do you like to change anything in your medication? 1 point
 - Do you experience side effects? 4 points
 - Do you think any of your drugs don't work? 4 points



Pharmafun selection model®



Optional choices Clinical judgement Communication of outcomes^{Car} of the medication review of the physician

Adjusting to hospital setting

- Changing a selection criterion
 ≥10 medicines at admission
- Adding a selection criterion
 - Unplanned admission or readmission (based on case mix)
 - Renal function ≤30 ml/min
- DART questionnaire
 - included in the medication reconciliation



Group 2: tailoring adherence intervention

Pre-evaluation / triggers

Patient, disease & medication factors, clinical judgement

- Questions during patient contact
- Interventions

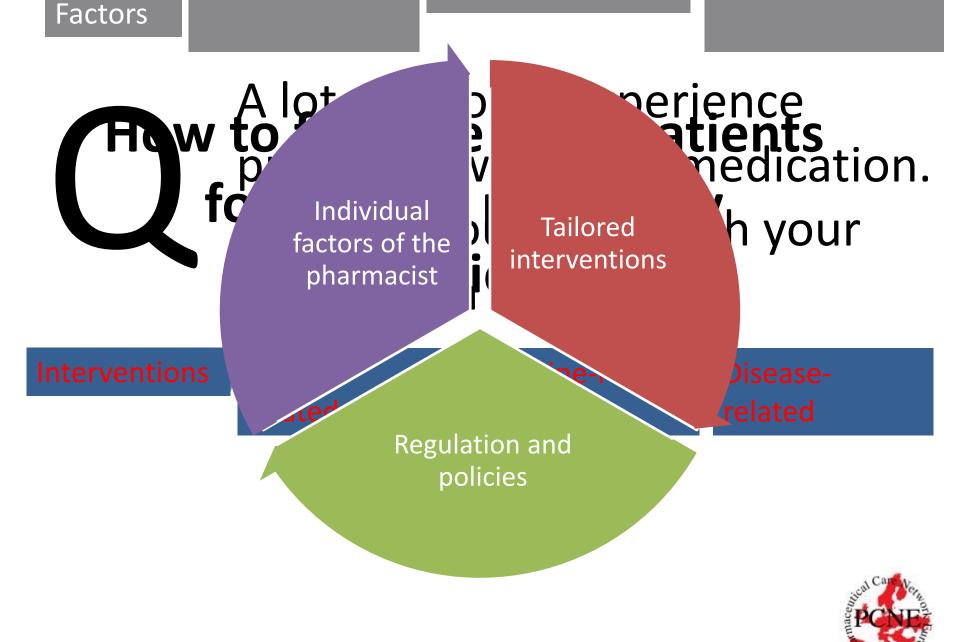
Patient, medication & disease related



Patient-related

Medicine-related

Disease-related



1. A lot of pple may experience problems with their meds. How are you doing with your meds? (ongoing). Do you have any concerns taking meals? (preventive) Bonus qus: 2 How do you use your med? 3. Do you experience any difficulty/problem taking your med? 4. How do you organise your meds? 5. What do you expect from your treatment?

Disease-velated intervention [Patient-related interventions] Med-related interventions -Education on disease -Education (leaflet, verbal) - Pill organisers/aids - Regular monitoring pictograms, images/videos, Switch to alternative Formulation/med/device Feedback on progress demonstration) of treatment Teach back/double-check - Combined formulations -Motivational interviewing - Education on Reminders (phone, txt, app) = Medication schedule self-monitoring/ self-management -Family/carer support/education Manage timing -Mange time based on <> individual preference/habits Referral to GP - Switch to less - Follow-up visit appointment expensive / generic mols -Set goals with pt/ - Pharmacostenetic shared decision making evaluations FRIDAY 2 Medulation review



WS2 – HOW TO FIND THE RIGHT PATIENT FOR SPECIFIC PHARMACY SERVICES

SG3 - IMPLEMENTATION

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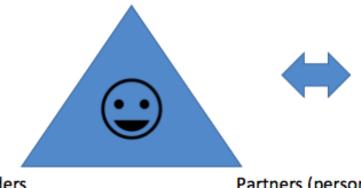


TAILORED IMPLEMENTATION

Tailoring to:

"Public"

Pharmacy (pharmacist, team, premises, characteristics,...



Stakeholders (government, insurance, pt associations) Partners (person, HCPs,...)

Service

- Medication Use Review
- Asthma Service
- Adherence intervention

• ...



IMPLEMENTATION FRAMEWORK

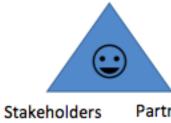
CHECKLIST

- 1. NEEDS
- 2. WANTS
- 3. CONCERNS (BARRIERS)



TAILORED ACTION PLAN

- 4. SET OF FACILITATORS
- 5. IMPLEMENTATION
- 6. TIMELY FOLLOW-UP



Pharmacy









What did we learn?

- Pharmacy population is a very heterogenous group
- Needs vs. wants
- Clinical judgement ("gut feeling") is very important in targeting services at the right patients and tailoring your pharmaceutical care



How do we continue?

- Conducting small pilot projects, e.g.
 - Applying the risk score for medication review patients retrospectively
 - Using the implementation checklist to gain more insight in barriers pharmacists experience with implementing a new service
- Exchange experience by e-mail (or the PCNE website / wiki if possible)





