



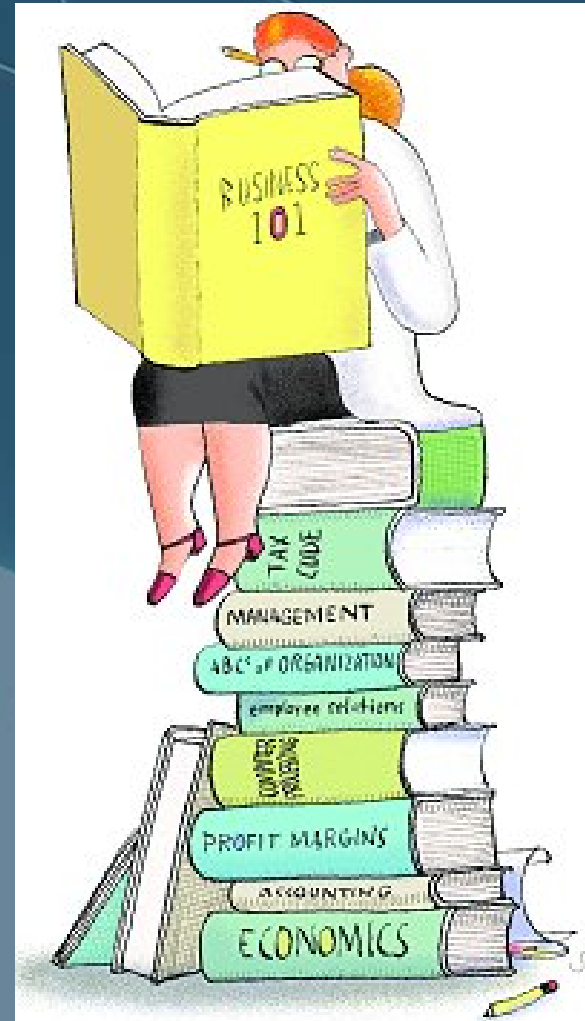
PCNE Working
Conference 2007

Patient Safety and Continuity of Care

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Patient Safety and Continuity of Care

- Introduction
- Health Care providers
- Health Care Systems
- Chronic Diseases
- Example
- Conclusion

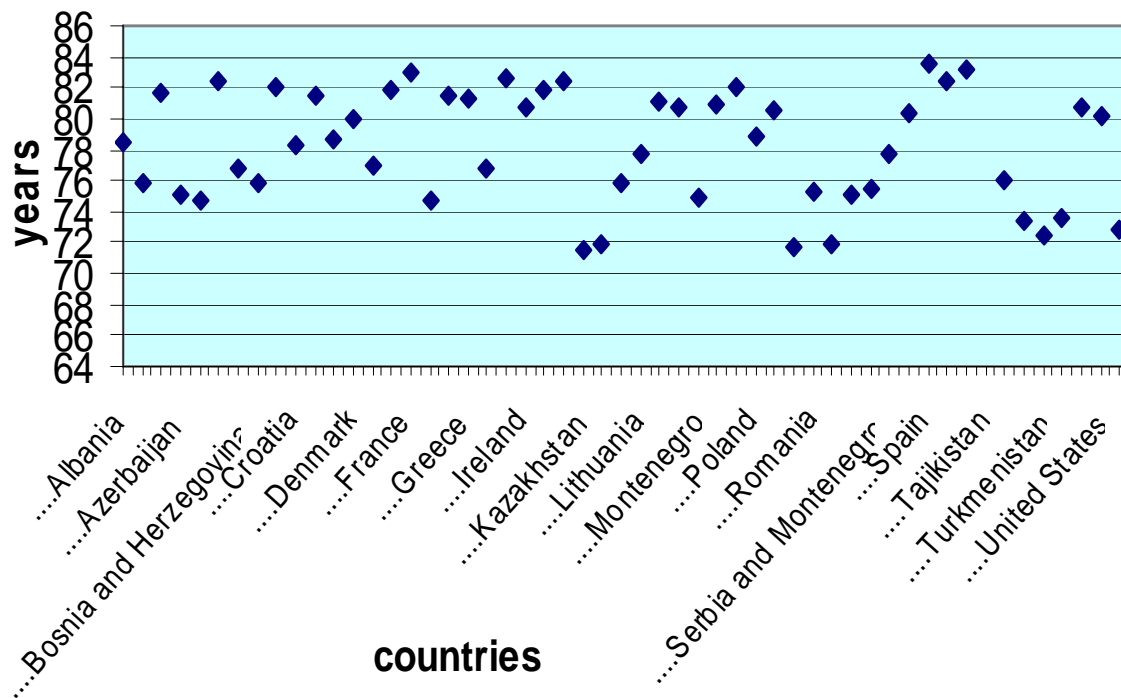


Social trends and their impact on Health

- Increasing population

- Ageing

Life expectancy at birth in for females in 2003



Social trends and their impact on Health

- Population with long term conditions
- Health Care sustainability
- Shortage of doctors
- Expanded roles for various healthcare providers
- New teams and membership roles





Health Care Professionals

- Physicians
- Nurses
- Pharmacists
- ...
- Hospital team (s)
- Primary care team (s)
- Community Team (s)

- AND the patient





Health Care Professionals

Type:

Know what to do. Know how to do it.
And they do it!

Know what to do. Know how to do it.
But, don't do it !

Know what to do. Don't know how to
do it. And don't do it!

Don't know what to do. Don't know
how to do. But do it!...

Massimo Porta, 1996, SVD Rethinopathy working group





Physicians perceive pharmacists

- Independent specialists on the field of medication and drug technical provision
- Mostly Business Men (pharmacy owners)
- Fear of over cross boundaries and accountability
- "Outsider" of the clinical team





Chronic Diseases

Conditions that need to be studied and cared for, from different perspectives: the patient's and the healthcare provider's.



Does the disease affect the patient role?

Does patient role affects the progression of the disease?

In what degree the disease prevention treatment need active patient involvement?

Chronic Diseases and Continuity of Care

- Need accurate transfer of medication information across the continuum of care.
- When patients transition from one health care setting to another they are at increased risk of experiencing fragmented care.



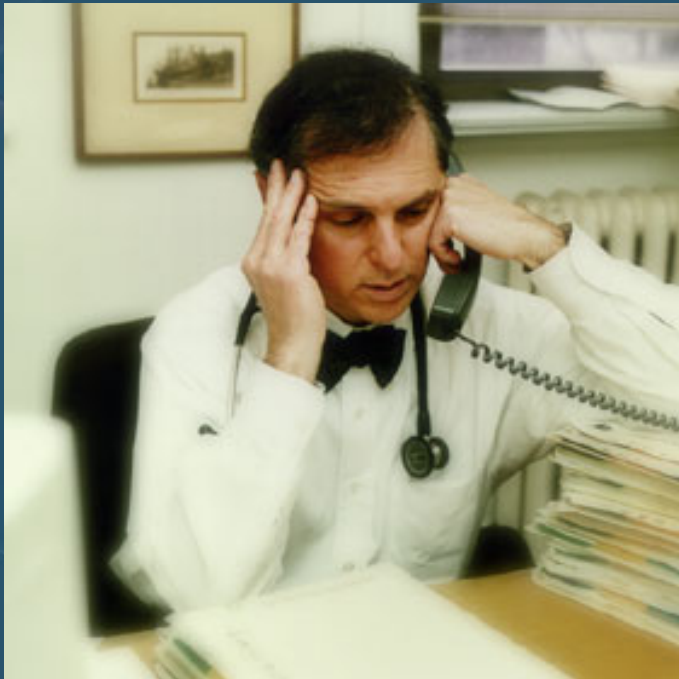


Need of interprofessional collaboration


- Increased:
 - Drug-related morbidity and mortality
 - Rapid advancements on drug treatments
 - Innovation on medicine
 - Movement of patients



Systems of Care



In the last decades there has been increase in initiatives to encourage professional partnership working with the aim of improving services to patients and communities in most of the European countries.



Systems of Care

- **Total Neglected:** nobody does anything for anyone
- **Random Care:** most people do something for somebody
- **Partial Shared Care:** some people do everything for some (sometimes twice) and nothing for the rest
- **Total Partial Care (Shared Neglected):** people hope someone else will do what they don't. In theory everyone gets everything, but doesn't
- **Total Integrated Care:** Everyone co-operates to ensure everything is done for everybody

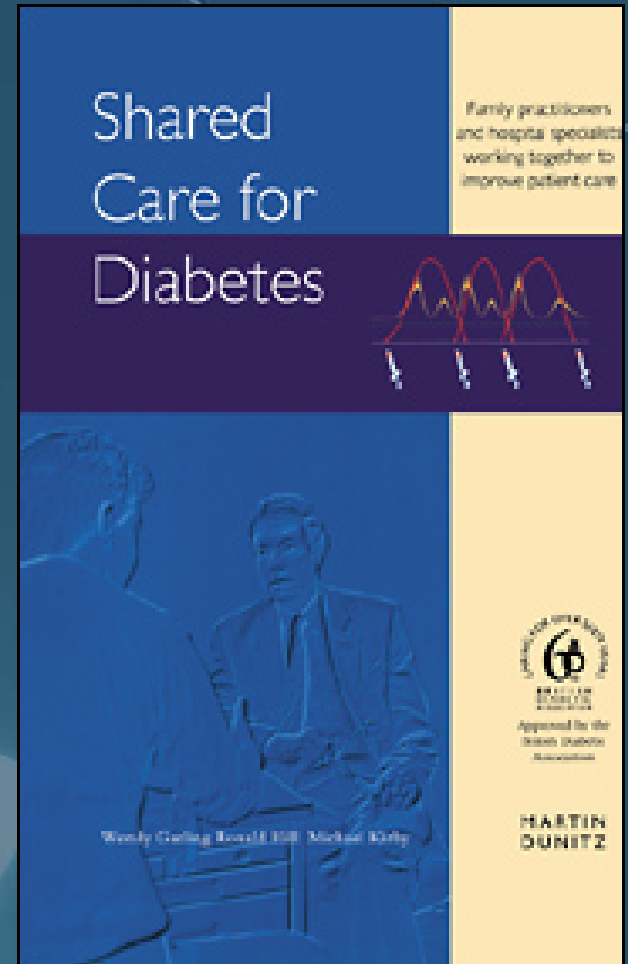




Shared Care

- Term used in healthcare and social care in UK
- Describes the establishment of partnerships between professionals and laymen where they share a common goal

Example UK



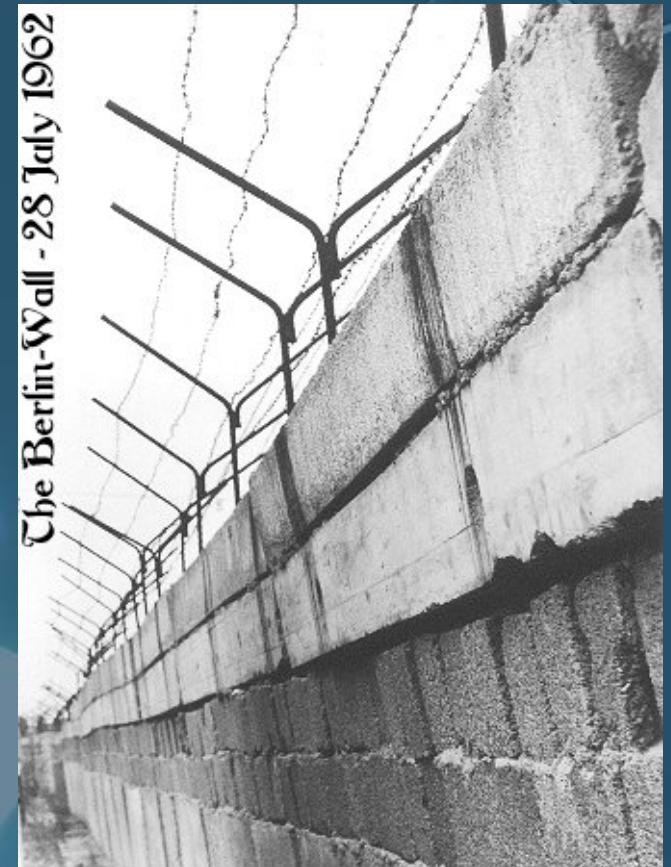
Also available as a printed book
see title verso for ISBN details



Transmural care

- Defined as the interface between Primary and Secondary Health Care
- Provided in the basis of cooperation and coordination between Primary and Secondary care givers to overcome the “wall between them”

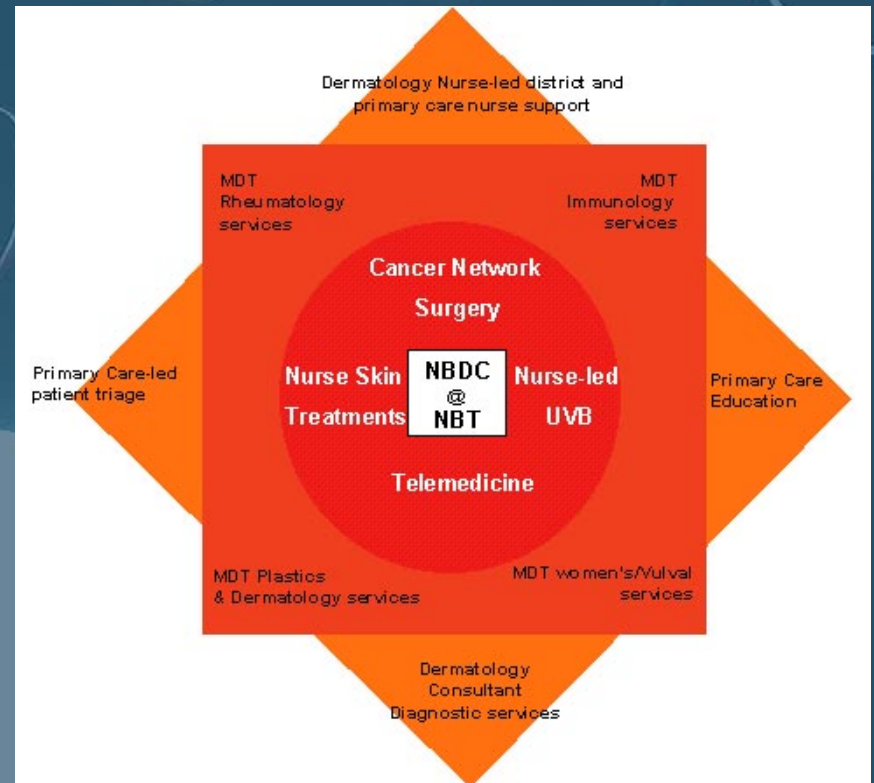
Eg: NL



Integrated Care

- Ultimate result in accessible and patient oriented health care system of optimal quality and efficiency
- **Protocols: Everybody knows what, how, when to do. And they do it!**
Everyone co-operates to ensure everything is done for everybody!

Eg. UK





Cooperative Experiences

- **CH: Quality Circles**
- **NL: Meetings of Pharmacotherapy**
- **Australia: Therapeutical revisions**
- **USA: Managed Therapeutic Protocols**
- **UK: Pharmaceutical prescription**



Coordination of activities

The need of the activities from various providers demands coordination in order to improve quality care





Communication



- socializing health care providers in working together
- developing mutual understanding of, and respect for
- instilling the requisite competencies for collaborative practice.
- in shared problem solving and decision making, towards enhancing the benefit for patients, and other recipients of services

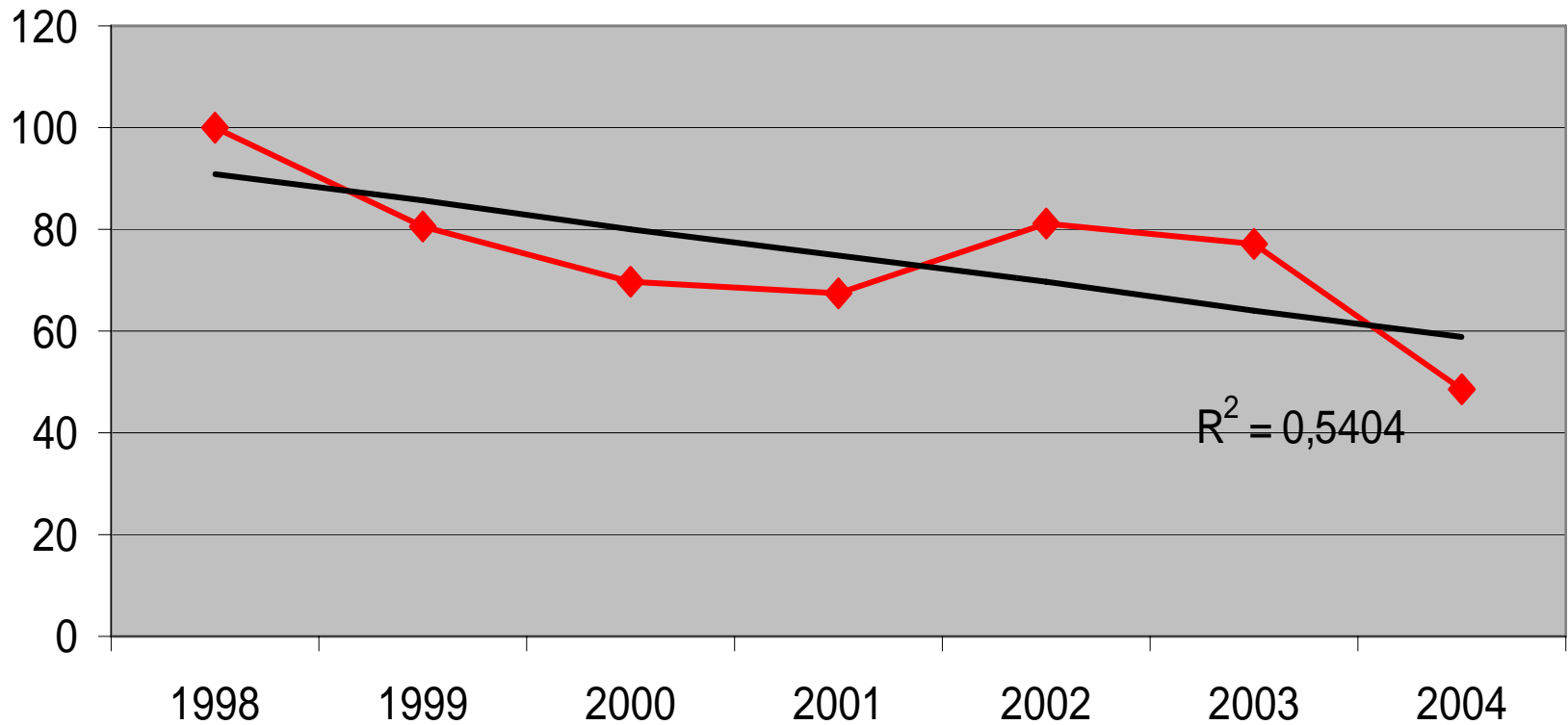



Portugal: one example

- 1998 – pharmacists integrated a national diabetes program for decreasing diabetes related complications distributing the materials free of charge
- 2002 – pharmacists initiated a program by enhancing patient empowerment through selfmonitoring and selfcontrol
- 2006 – pharmacists initiated an evaluation



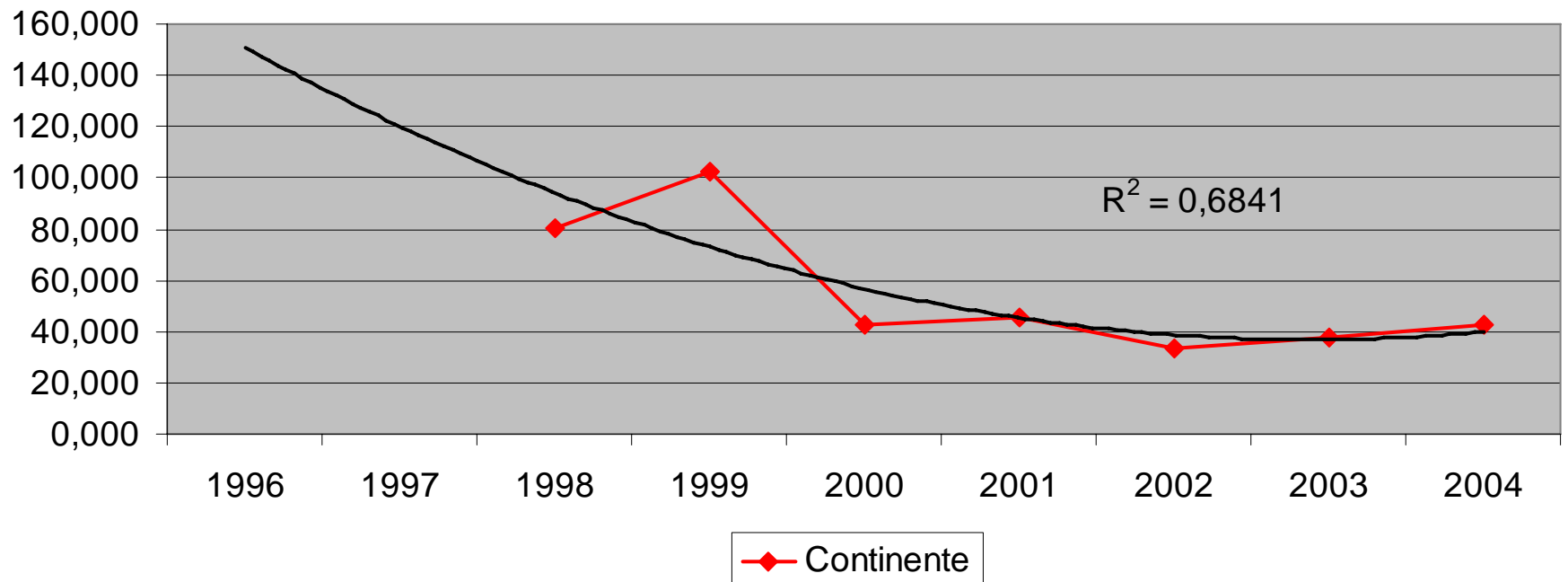
Episodes of Ketoacidotic and Hypoglycaemic comas Standardized Rate per 100000 PwDiab





Severe hypoglycemia episodes per 100000 Pwdiab

Standardized Inpatient Hypo episodes per 100000 diab (>15 yr age)





Results (6)

Biochemical and physiological parameters

| | 0-3 Mo | 0-6 Mo |
|---|---------|--------|
| Glycaemia fasting mg/dl ¹ | - 12,3* | -13,5* |
| Glycaemia pos-prandial mg/dl ¹ | -30,1* | -34,0* |
| HbA1c (%) ² | -0,6 | -0,7* |
| PA systolic mm Hg ² | -3,0* | -3,4* |
| PA diastolic mm Hg ² | -0,8* | -1,5* |
| BMI (Kg/m ²) ² | -0,02 | -0,08* |
| Tryglicerides mg/dl ¹ | -0,8 | -5,5 |
| Cholesterol mg/dl ² | -7,2* | -8,0* |

3-6 Mo:

No statistical difference

¹ Averaging; ² Average; * meaningful statistical difference (p<0,05)

BG Selfmonitoring → 46,5% at t₀ and 48,0% at t₂

Score of technical performance → 86,6% at t₀ and 91,9% at t₂



Portugal: (1)

the program allowed the **identification of Medication Related Problems (MRPs)** in 74% of the patients

63% reported to the physician

in 58% the therapy was changed

This program contributed to the **promotion of BG selfmonitoring** and to **enhancing the quality of the performance of the technique**



conclusion

- There is an interest from the societal perspective
- There is evidence on good outcomes on patient safety and continuity of care by the collaboration between physicians and pharmacists
- There are identified barriers and facilitators
- There is the will of forming teams and exchanging expertise

A 3D puzzle with glowing blue pieces against a dark blue background. The puzzle pieces are white with blue outlines and are arranged in a circular pattern. The lighting creates a strong glow around the pieces, making them stand out against the dark background.

Thank you

for allowing me to be a member of
a larger and more efficient team