



Transitions in Life to Transitions in Care

by Alastair Hay

A “transition” usually signifies an important time where changes are measured by new experiences, life adjustments, and, frequently, departures from our comfort zone.

Jennifer Shannon of Johns Creek, Ga., found herself facing one of those moments as an undergraduate at Virginia Commonwealth University. While choosing her future profession, Shannon knew she had a passion for patient care, but she was unsure of which medically-related path to walk. Initially, pursuing a doctor of medicine degree seemed like the right choice, but as she gained more experience shadowing physicians, she realized that option was not best for her. The profession felt too messy, and Shannon was unsatisfied with the seeming lack of direct patient interaction. This realization sparked her life transition into another medical field, leading her to seek out a doctor of pharmacy degree, beginning her journey into the world of pharmacy.

Like many others in her pharmacy class, Shannon did not see the value in pursuing a pharmacy residency early in her education. In fact, she would tell you she was anti-residency until a preceptor helped change her mind. Her rotation at the time was at a “big-box” pharmacy where Jennifer worked a particularly busy shift. In the midst of a hectic environment, she was again unsatisfied with the lack of direct patient care. Fortunately, her next rotation was at an ambulatory care block where her focus shifted from securing a job after graduation to seeking out a residency that would allow her the patient care aspect of medicine that she was craving. Before she graduated, she secured a PGY1 residency at Grady Memorial Hospital in Atlanta. The residency program proved to be incredibly valuable, as it

was a hybrid program of both primary care and ambulatory care, allowing her to experience the best of both settings.

Shannon opted to straddle the line between inpatient and outpatient after completing her residency when she started working for Grady Hospital’s outpatient clinic. The union of her clinical knowledge, including how to manage heart failure, diabetes, and hypertension, combined with the experience of guiding patient transitions back into the community, was the perfect combination and landing spot for Shannon. She eventually began teaching with the Philadelphia College of Osteopathic Medicine’s School of Pharmacy in Suwanee, Ga., while simultaneously working at her practice site at the local Good Samaritan Health Center. The move also gave Shannon an opportunity to continue helping patients transition care away from the hospital setting, while at the same time teaching students. Amassing this wealth of experience and knowledge prepared Shannon for another leap into the next segment of her life—opening a pharmacy of her own.

PERSONAL EXPERIENCE BRINGS CLARITY

Finding the time to start a pharmacy proved to be difficult, as Shannon and her husband Michael were also beginning their family. Unknowingly, the transition into having children and their experience with pharmacy as patients would jumpstart the process of opening a pharmacy of their own. Shannon had a pregnancy complication resulting in the need for medical and pharmacy services. While Shannon recovered at home, Michael would pick up the medications she needed from their local pharmacy. Unfortunately, they felt they were treated like “drug seekers” from their big-box pharmacy instead of patients in need of care. While trying to help his wife, the pharmacy sent Michael to a 24-hour pharmacy almost an hour away. The scarring situation left the couple determined to begin something new and more patient-centered. A year later, the Shannons were proud

***Editor’s Note:** “Profit Pearls” is an occasional series of articles focusing on pharmacies who have successfully used innovation, expanded offerings and outstanding customer service to become staples of their community.*



“People benefit so well by knowing their pharmacist,” Shannon says. “Why not have someone work with you during this transition, especially as you begin to consume something potentially toxic, but keeps you alive?” That question began a new initiative for her young pharmacy that would change the mindset of patients and physicians alike.

OFFERING TRANSITIONS OF CARE SERVICES

As a patient, leaving the hospital feels like an accomplishment, allowing for celebration and overwhelming relief. The last thing any patient wishes for is to return to a gloomy hospital room. While most patients receive some discharge counseling, many are left without instruction regarding continued pharmaceutical services. Shannon understood how overwhelming a transition from hospital to home can be, many times complicated with chronic illnesses or new diagnoses, and she wanted to positively impact patients' lives in this area.



Shannon knew that her local hospital, the 110-bed Emory Johns Creek Hospital, discharged patients that she could help transition back into the community. Shannon developed a plan for her pharmacy to fill in these gaps in care and began the process of talking to the hospital to share her ideas. She prepared her pitch, including how her pharmacy services would save the hospital money by avoiding readmission and Centers for Medicare and Medicaid Services' penalties, and that her services would improve patient satisfaction and outcomes. But the hospital did not respond to her for six months and only after multiple attempts were made to contact them.

Lily's Pharmacy now gets two or three new transitions of care patients a day and none have been readmitted to the hospital.

owners of their own pharmacy, named appropriately after their first born, Lily.

As many can relate, opening a pharmacy from scratch brings excitement and challenges. Shannon needed to make Lily's Pharmacy of Johns Creek stand out from the other pharmacies surrounding her. With her passion for patient care, transitions of care made perfect sense as a critical service to provide her community.

Finally, Shannon reached the hospital's pharmacy director who began to understand what she was offering. However, the hospital had a contract with a chain pharmacy for a similar program. She also still had to convince the hospital's CEO of the validity of her services. When the meeting finally arrived to discuss her proposition with the hospital administration who would make a final decision on her proposal, Shannon was given 20 minutes to sell her idea. She showed that her services would have the potential to save the hospital up to \$2 million over the next year if just seven patients were discharged into her service per month. She would not initially charge the hospital for the service. She would simply receive the referrals and the patient's health records from the hospital to help with the transition. Once again, though, the answer was delayed.

REAL WORK BEGINS

Finally, three months later, the hospital embraced Shannon's plan, and then the real work began. Before patients could arrive, Lily's Pharmacy needed to develop standards

for the transition of care services, train pharmacy staff, and develop the legal and technical logistics of the process, which took about another nine months. One year after making her initial pitch to the hospital, Shannon received her first referral, and since then, the hospital has yet to see a readmission from a patient who went through Lily's Pharmacy's transition of care program.

Currently, the hospital sends two to three patients a day to see Shannon and the rest of her staff, and here begins the next hurdle to providing these services: convincing patients of their benefit. Some patients have difficulty comprehending the value and need for extended pharmaceutical services after discharge from the hospital. Patients wonder why a pharmacist will be taking over their care. They need an explanation of the utility of the services, as they typically assume they can care for themselves. However, after being convinced to enroll, most patients realize the value of this continued care and recognize the benefits in these services, leading them to love the care, the pharmacist, and the pharmacy. The program is an appointment-based model where Shannon reviews discharge notes and prescriptions, compares medications the patient had prior to the hospital admittance, assesses current disease states, and helps the patient understand the treatments, the importance of adherence, and how the pharmacy will

help monitor the transition. Although some patients almost returned to the hospital after being discharged, Shannon was able to intercede and help before an expensive trip back to the emergency room.

Frequently, problems are easily solved through a quick refill of a medication like insulin. Shannon's strong relationships with hospital physicians allow her to reach them around the clock for immediate solutions. In other cases, the pharmacy has a 24/7 hotline where patients can reach a pharmacist for any of their needs.

The model Shannon has created is designed to help transition her pharmacy into a role model for future pharmacies aiming to add patient-centered services. Lily's Pharmacy continues to grow from the idealistic goal of what a pharmacy should be into a place that employs multiple pharmacists and technicians. While it was tough building from the ground up, Shannon calls her store a "blessing" now and certainly many patients would agree with her. Lily's Pharmacy transitions of care program is helping transform patient care in the northern Atlanta suburbs and pharmacy care across the country. ■

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