

FOCUS:
CARE PLANNING



From *sticky notes* to pharmacy *software* *systems*

Planning patient care

by Cody Clifton, Kim Roberts, and Hugh Heldenbrand

Document. Document. Document. If it's not documented, it didn't happen. That is what pharmacists and pharmacy technicians have always heard about patient encounters. For years, many of them have written their notes on scrap paper and sticky notes to help them remember to complete an immediate follow-up task: calling a doctor, fixing a dose, counseling a patient or caregiver, or synchronizing a refill. Once that was finished, the notes were tossed into the shred bin. During the encounter, the staff went above and beyond for the patient. Sometimes the patient recognized it, but no one else was aware.

These additional efforts, along with other enhanced services such as medication reconciliation, vital signs measurement, and vaccination are considered *care planning*. By deliberately planning patient care, community-based pharmacists remain relevant and accountable to providing higher quality service. This sets them apart in the care they provide compared to others in the health care universe.

Here are a few examples of patient encounters that are care planning:

- Logan, the pharmacy technician, prepares to refill Mr. Smith's lisinopril and notices that 20 days have passed since Mr. Smith was supposed to receive it. Logan discusses medication synchronization and adherence packaging with Mr. Smith, and Mr. Smith agrees to enroll. Megan, the

Figure 1: Pharmacist eCare Plan Functionality Active in the Marketplace

Technology Companies with eCare Plan active in the marketplace



Technology Companies with eCare Plan active in the marketplace via integration



Technology Companies building eCare Plan functionality

Azova; Cost Effective Computers; Digital Business Solutions; DocStation; Habitnu; Kloudscript; Mobile Mediclaim

pharmacist, verifies the lisinopril prescription and has a conversation with Mr. Smith to figure out what will influence him to take his medication as prescribed, and reviews the new strategies to help improve adherence.

- Mrs. Johnson comes into the pharmacy and states that her stomach has been upset and she has diarrhea. Tim, the pharmacist, reviews Mrs. Johnson's medication profile and notices that she recently started metformin immediate release and titrated the medication correctly. Tim contacts the provider's office to request the extended release formulation, which resolves the side effect for Mrs. Johnson.

CREATING COMPREHENSIVE DOCUMENTATION

In the era of electronic health records, or EHRs, there should be a

way pharmacy staff can document meaningful patient encounters that allows them to improve workflow, do continuous follow-up with patients, track progress toward patient-centered treatment goals, and prove their value to other health care team partners. Fortunately, there is.

Documenting critical patient encounters can now be performed via many pharmacy management systems and technology solution providers. As pharmacy staffs move from point-in-time, medication-level technologies to patient-level care services, they need their IT systems to help them record and track patient care over time. Care planning is used in other health care settings including nursing, home health care, and other areas. Now it is coming to pharmacy to help manage patient care. Documentation can be implemented by any technology company that chooses to adopt care planning elements

in its user interface and the standard data formats that allow information exchange between systems.

As the electronic care plan (Pharmacist eCare Plan) is simply a transmission standard, any system using the standard can send the same data, in the same format, in the same way, but still have the flexibility to put the care planning elements into place and order within the user interface that the vendor chooses for its customers. This allows pharmacies to select a vendor that works best for their workflow. (See **Figure 1** for a list of current systems.) It conforms to the same rules for interoperability as a physician's. Therefore, the data contained within the Pharmacist eCare Plan can be exchanged between systems, allowing the work done by the pharmacist to be seen by the patient's physicians and care

Continued on page 41 ►



► *Continued from page 38*

managers if they have access to systems that can read it.

SHARED INFORMATION

The Pharmacist eCare Plan is flexible enough for pharmacists to decide what is valuable for staff members to document. Information that can be documented and shared includes, but is not limited to, medication-related health concerns, interventions, patient education, and goals that may have been established during an encounter between a pharmacist and a patient. A care plan can also change over time as new problems arise, old problems are solved, and progress is made toward goals. As a coordination tool, this new way of documenting the service provided to patients can serve as a valuable resource for other care team members. It allows them to receive information about patients' medications, health condition concerns, and other important aspects, such as social health

determinants including food insecurity and transportation issues.

Payer engagement, care coordination, and quality assurance are key benefits to documenting in this format. Payers are recognizing that they can use the information submitted by pharmacies as a quality assurance tool, which allows them to see proof that community-based pharmacists and community-based pharmacy team members are truly benefitting their patients and saving them money down the road. Prescribers and other care team members are also seeing the benefits as their patients become more engaged with their care and their performance metrics start to improve. Pharmacists who use this documentation method now have the opportunity to look back at their own encounters with patients to find opportunities for new ways to provide better care.

SUSTAINABILITY

Documenting encounters via a care

plan standard is critical moving forward for sustaining community-based pharmacy. Community-based pharmacies, specifically CPESN® USA network members, are using the Pharmacist eCare Plan to document their medication management encounters with patients as a requirement for participation in CPESN USA. Many of these pharmacies are being compensated for their efforts by payers interested in the patient value provided. To learn more about CPESN USA, please email info@cpesn.com or visit www.cpesn.com. ■

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