Objectives

- Transitions of care refers to a collection of services aimed at ensuring optimal communication and coordination of services to provide health care continuity, avoid preventable poor outcomes among at-risk populations, and promote the safe and timely transfer of patients from one level of care or from one type of setting to another.
- It is complementary to but not the same as primary care, care coordination, discharge planning, disease management or care management.
- It requires a multidisciplinary health care team, with pharmacists being the distinct medication expert and reconciling discrepancies in medication therapy that translate into improved outcomes and reduce readmissions.

Background

- Shadowed institutional staff pharmacists on medical/surgical floors
- Attended daily transitional care rounds on medical/surgical floors.
- It requires a multidisciplinary health care team, with pharmacists being the distinct medication expert and reconciling discrepancies in medication therapy that translate into improved outcomes and reduce readmissions.
- Presence of institutional staff pharmacists on medical/surgical floors
- Placed on various floors in HNMC to process medications orders and provide pharmaceutical information when approached by healthcare professionals
- Available for counseling sessions with in-house patients when requested

Methods

- Attended daily transitional care rounds on medical/surgical floors.
- Observed the format of discussing obstacles to discharge.
- Shadowed institutional staff pharmacists on medical/surgical floors
- Observed their tasks during order entry
- Observed their counseling sessions of in-house patients
- Meds–to–Beds Program at Holy Name PharmaCare (PharmaCare)
- PharmaCare is an outpatient pharmacy located in Holy Name Medical Center that provides prescription services to the public, employees and patients upon discharge
- Enhancement of Meds–to–Beds program
- Established criteria for ideal patients who would benefit from receiving PharmaCare services upon discharge.

Results

Transitional Care Rounds (TC)

- Floors holding rounds: Lobby North, 1North, 3Marian, 4Marian, 5Marian/Chadwick, 6Marian
- Personnel recommended to attend: transitions of care nurse and social worker, nurse manager, clinical coordinator, charge nurse, respiratory therapist, physical therapist, pharmacist
- Discussed progress of each patient
- Provided information of definite and tentative discharges for the day
- Opportunities for discussion between different disciplines
- Inconsistency of: Structure and format of rounds
- Attendance of recommended personnel
- Duration

Presence of institutional staff pharmacists on medical/surgical floors

1. Placed on various floors in HNMC to process medications orders and provide pharmaceutical information when approached by healthcare professionals
2. Available for counseling sessions with in-house patients when requested

Obstacles

- Pharmacist staffing doesn't allow for same pharmacist to cover a unit
- Implementing new method for workflow
- Attributing inpatient pharmacy resources to assist in developing a transitions of care program
- Lack of prioritization of patient counseling efforts

Recommendations

Interim

- In place of attending TC rounds, pharmacists can read Utilization Review notes to become familiar with patient cases and progress
- Such notes will provide information on: reason for admission/readmission, chief complaint, history of present illness, diagnosis
- Will provide a “quick snapshot” of each patient’s case
- To provide a list of tentative patient discharges for the day, PharmaCare can utilize Transitional Care notes
- Such notes will provide information on: plans upon discharge, barriers to discharge

Long Term

- Integrated work list for the institutional and retail pharmacy
- Identifying and recommending patients for counseling, PharmaCare services
- Pharmacists can add patients to this work list based on their observations
- Unified format of transitional care rounds throughout HNMC
- Designate a pharmacist on one medical floor for the duration of one week
- This will assist in patient progress, follow-up on assigned floor and identifying opportunities for pharmacy intervention and Meds–to–Beds program
- Advanced training for pharmacists
- To better recognize and identify patients through clinical workflow and identify problems that require transitions of care intervention

Conclusions

- Barriers were identified when evaluating the implementation of a pharmacy transitions of care program
- Retail and institutional pharmacies can work independent of the other disciplines at establishing a pharmacy transitions of care program.

References