Developing Curriculum to Teach Students about Pharmacy Quality and Patient Safety

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Background

The American Association of Colleges of Pharmacy (AACP) and the Accreditation Council for Pharmacy Education (ACPE) have recognized the needs for future pharmacists to understand quality improvement.
Are pharmacy students ready for the future?

The Mission of the PQA is to:

Improve health care quality and patient safety through a collaborative process in which key stakeholders agree on a strategy for measuring performance at the pharmacy and pharmacist levels, collecting data in the least burdensome way, and reporting meaningful information to consumers, pharmacists, employers, health insurance plans, and other health care decision-makers to help make informed choices, improve outcomes and stimulate the development of new payment models.

www.pqaalliance.org
Educating Pharmacy Students and Pharmacists to Improve Quality (EPIQ) Specific Aims

Aim 1:
To develop a turn-key quality improvement education program for pharmacy students and pharmacists

Aim 2:
To develop teaching aids to deliver the education content in concise and modular formats

Educating Pharmacy Students and Pharmacists to Improve Quality (EPIQ)

• Purpose of the Program is to develop quality improvement educational resources
  o to educate
    o pharmacy students
    o pharmacists, and
    o other stakeholders
  o about
    o measuring
    o reporting, and
    o improving quality in pharmacy practice

Educational Theory

• Provide appropriate learning conditions
  1. stimulation to gain attention;
  2. Informing of the learning objective;
  3. Remind of previously learned material;
  4. Presentation of material;
  5. Guidance of learning;
  6. Eliciting performance; and
  7. Providing feedback. (Gagne, 1970)
EPIQ: Content Outline

- Status of QI and Reporting in US Health Care System
- Quality Improvement Concepts
- Quality Measurement
- Quality-Based Interventions and Incentives
- Application of QI to the Pharmacy Practice Setting

EPIQ: Unique Program Aspects

Advisory Board established
  - To identify materials and guide project
  - Includes
    - AACP Medication Safety Task Force
    - PQA Communications and Education Committee
    - Others

Educating Pharmacy Students and Pharmacists to Improve Quality (EPIQ)

Module I – Status of QI and Reporting in US Health Care System

Session 1 – Quality and the Future of Health Care (Holdford)

1. Summarize major recommendations of the Institutes of Medicine (IOM) regarding health care quality
2. Define what is meant by quality, in general, and health care quality, specifically
3. Describe what is meant by “value-driven health care”
4. Argue the case for multiple strategies for improving health care
5. Explain why quality must be measured
EPIQ: Unique Program Aspects

Instructional systems design utilized
• Systematic design process
• Iterative
• 50 minute sessions
  ▪ Slides
  ▪ Student activity
  ▪ Evaluations questions

EPIQ: Unique Program Aspects

Coordinators guide includes
• Previous slide plus
• Readings
• Discussion questions
• Examples of outside class projects
• Syllabus examples
• Alternative use suggestions for modules
• Evaluation forms
• Implementation options

EPIQ: Unique Program Aspects

Program Development based, in part, on
• Interactive learning
• Options for capstone projects
Dissemination

- Book
- Website
- ACPE CE
- Pharmacy school train the trainer
- How you can get content now
  warholak@pharmacy.arizona.edu
  520.235.5529

Reporting Pharmacy Quality

- A look at the instructor guide

Reporting Pharmacy Quality

Module 4: Session 14
Donna Strum-West, Ph.D.
Objectives

By the end of this lesson, the student will be able to:
1. Describe a health care report card
2. List 3 reasons why report cards are used in the health care system
3. List 3 principles of reporting quality in pharmacy as outlined by PQA
4. Discuss the advantages and disadvantages of reporting quality in pharmacy

Introduction

Activity: Health Care Report Cards

View the following websites, looking specifically for the health care report cards. For each website, answer the discussion questions.

- Medicare: www.medicare.gov
- California Office of the Patient Advocate: www.opa.ca.gov/report_cards
- New York State Health Accountability Foundation: www.nysha.org/index/hmo_report_card
- Wisconsin Collaboration for Healthcare Quality: www.wchq.org/joinreports/
Activity: Health Care Report Cards

• For the Medicare website, please compare hospitals in your city or state. Which hospitals have the best quality ratings? Which have the worse? Also compare nursing homes in your city or state.

• Have you used a website like these before to compare health care plans or providers? Why or why not?

Activity: Health Care Report Cards

• Do you think that you and/or your family will use these types of websites in the future to compare health care plans or providers?

• After looking at these various websites, what do you think of health care quality report cards? useful? easy to understand? Informative?

• Do you believe that in the future consumers will link to a website that provides pharmacy quality reports and use the information to select a pharmacy? Why or why not?
Report Cards in Health Care

Caring Pharmacy receives Highest Quality Ratings

Provider Report Card Uses

• Encourage continuous improvement
• Motivate performance improvement through benchmarking
• Generate external pressure
• Identifying best practices

Report Card Format

• Explanation of measurement
• Various performance measures- indicators
• Provide previous results for the provider/organization
• Provide benchmarks based on peer groups
AFMC Report Card Example

Public Reports
Rationale

Impact of Report Cards

Public Report Example
CMS: Plan Performance

Overview

The Medicare program provides seniors and people with disabilities with the first comprehensive prescription drug benefit ever offered under the Medicare program, with most significant improvement to senior health care in nearly 40 years.

Prominent Links Outside CMS

Related Links

CMS: Plan Performance

Part D Performance Data

This page contains performance data related to the Part C & D program. Please check back, as Part C & D performance data is being added to the site on a regular basis.

Prominent Links Outside CMS

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Related Links

CMS: Plan Performance

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Prominent Links Outside CMS

Related Links
PQA Measures and Reporting

• Performance improvement and public reporting
• Pharmacy reporting workgroup

PQA Principles for Reporting to Pharmacists and Pharmacy Practices

• Content of reports
• Transparency
• Report design and usability

PQA Principles for Public Reports

• Content of reports
  – Include appropriate contextual information to frame purpose of report
• Transparency
  – Report design and usability
  – Consumer involvement
  – Design accounts for cultural differences and literacy levels
  – Accessible through various media

• Transparency
  – Report design and usability
  – Consumer involvement
  – Design accounts for cultural differences and literacy levels
  – Accessible through various media
PQA Demonstration Projects

• 4 demonstration projects testing
  – 15 performance measures
  – analyzing the data and reporting to pharmacies
• Refer to session 9 for review on pharmacy quality measures

Impact On Practice?

☐ Will they stimulate improvement in pharmacy practice?
☐ Will they increase competition based on quality of care provided?
☐ Will providers and consumers view the information as credible? measurement issues, data availability, data issue
☐ Will it be feasible to produce report cards? Will providers, payers, or consumers use them?
☐ Will it have negative impact on practice? (e.g., won’t care for sickest; avoid noncompliant patients)

In-Class Activity: Pharmacy Report Card

<table>
<thead>
<tr>
<th>Process Measure</th>
<th>Smith Pharmacy</th>
<th>ABC Chain Pharmacy Store 472</th>
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<td>ACE-ARB Medication Adherence (1)</td>
<td>54%</td>
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<td>Total rate of dosing for oral antihyperglycemics (3)</td>
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Summary

• Health care report cards are widely used to monitor performance and stimulate improvement in performance
• In the future, it is likely that pharmacy report cards will be provided to pharmacies and the public

Activity

• How might you incorporate EPIQ into YOUR curriculum?
• What challenges do you foresee in implementation?

Implementing Your Own Pharmacy QI Program

Terri L. Warholak
PhD, RPh
Objectives

- At the end of this session, the participant will be able to:
  1. Utilize the QI process: A community pharmacy example
     a. Background
     b. Methods
     c. Results
     d. Conclusions
Utilize the QI process

A Community Pharmacy Example: Project PANDA

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Preceptor: Dr. Donna Colato, Pharm D.
Email: Megan.Corrigan@mwumail midwestern.edu

Melissa Badowski, PharmD Student
Team Blonde

References:
1. Rolland P. Occurrence of dispensing errors and efforts to reduce the incidence, nature and causes of dispensing errors in community pharmacies. Pharmacoepidemiology and Drug Safety. 2004.

The program was well received and concluded that although the program was helpful and did not take an excess amount of time, they felt that the patients were not aware of because a search in the Walgreens computer system is performed by pharmacy staff in order to be more compliant with the stamping. Therefore, there was a large quantity of there was a lack of motivation among the entire pharmacy staff. The staff did not always comply with the investigators’ requests involving stamping all prescriptions. The limitations in this research program included limits within the pharmacy and limits dealing with the collection of data. Since this was not a required program, there was a lack of complete information due to the fact that controlled prescriptions and refills were not examined. Therefore, there was a large quantity of there was a lack of motivation among the entire pharmacy staff. The staff did not always comply with the investigators’ requests involving stamping all prescriptions. The limitations in this research program included limits within the pharmacy and limits dealing with the collection of data. Since this was not a required program, received the wrong prescription. Also, the research program was well received by other sectors of the pharmacy field. The district manager, pharmacy manager, and patient, and, ultimately, optimizing patient outcomes.
Utilize the QI process:
Background

- It is vital to obtain correct patient information
- If demographic information is either inaccurate or missing, detrimental results may occur.
- Computerize prescriptions

Utilize the QI process:
Background

- Decrease the number of demographic errors made in Rx entry and Rx pick-up by implementing a procedure that ensures that the correct information is in the computer system at one pharmacy

Utilize the QI process: Methods

• Design Changes
  - Reduce reliance on memory
  - Simplify
  - Standardize
  - Use constraints/forcing functions
  - Use protocols/checklists wisely
  - Improve access to information
  - Decrease reliance on vigilance
  - Reduce handoffs
  - Decrease multiple entry
  - Automate carefully
  - Differentiate: look-alike or sound-alikes

• For more information see:
Utilize the QI process: Methods

- **PANDA** is a mnemonic device to remind the pharmacy staff to gather essential information about each patient.
  - P - phone number
  - A - allergies
  - N - name
  - D - date of birth
  - A - address

- In order to execute the idea, the investigators developed a stamp of the mnemonic

Utilize the QI process: Results

- **PANDA** was implemented over 4 weeks
- 2,158 new prescriptions evaluated
- Of the 2,158 prescriptions, 1,119 were stamped

Utilize the QI process: Results

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<td>77%</td>
<td>71.20%</td>
<td>69.60%</td>
<td>75.50%</td>
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<td>Pharmacist B</td>
<td>46.90%</td>
<td>44.10%</td>
<td>42.90%</td>
<td>46.60%</td>
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<td>Pharmacist C</td>
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Utilize the QI process: Results

- Pharmacy staff completed a questionnaire
- Results:
  - The program was helpful and did not take an excessive amount of time

Utilize the QI process: Conclusions

- Implications could potentially include:
  - improved care
  - more accurate demographic data collection
  - increased assurance of the correct prescription reaching the correct patient and
  - optimizing patient outcomes

Summary

The QI process is a scientific method involving background, methods, results, and conclusions and recommendations.

The QI process can be implemented in your pharmacy to resolve quality problems and ensure safety in the patient medication use process.
Activity

- Session 17 activity
- Example project evaluation

Questions and Evaluation