



Transition to Wellness: The Impact of Community Pharmacist Discharge Education on Readmission Rates for Patients with Chronic Obstructive Pulmonary Disease, Heart Failure, or Diabetes

Sarah Jones, PharmD^{1,2}; Christy Holland, PharmD²; Christina Nunemacher, PharmD²; Ashley Abode, PharmD²; Chelsea Phillips Renfro, PharmD¹; Macary Marciniak, PharmD¹

¹University of North Carolina at Chapel Hill, Chapel Hill, NC; ²Realo Discount Drugs, Jacksonville, NC



BACKGROUND

- In 2012, Centers for Medicare and Medicaid Services (CMS) introduced payment penalties for readmission for patients with certain medical conditions.
- Patients may be more likely to be readmitted if they lack follow-up care post-discharge or do not understand discharge instructions or medications.
- Involving pharmacists in a transition of care process has the potential to reduce readmission rates.
- Realo Discount Drugs and Onslow Memorial Hospital collaborated to develop a transitions of care program entitled Transition to Wellness.

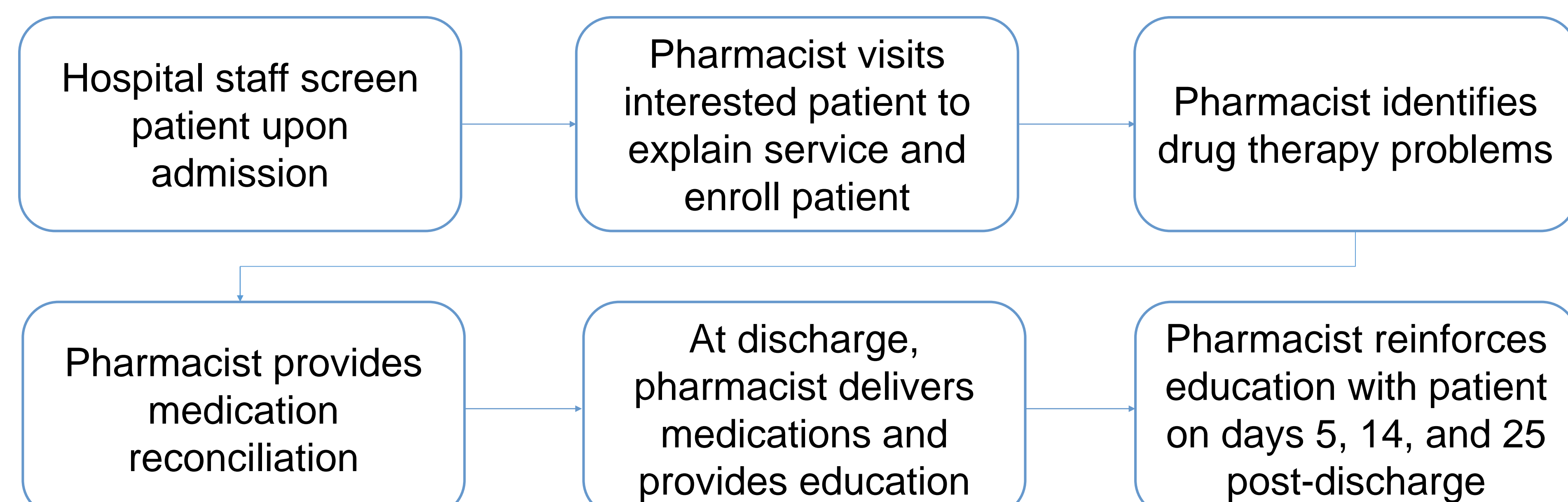
OBJECTIVES

- **Primary Objective:** Assess the impact of discharge education and follow-up by community pharmacists on 30-day readmission rates.
- **Secondary Objective:** Evaluate the number of drug therapy problems (DTPs) identified by community pharmacists.

METHODS

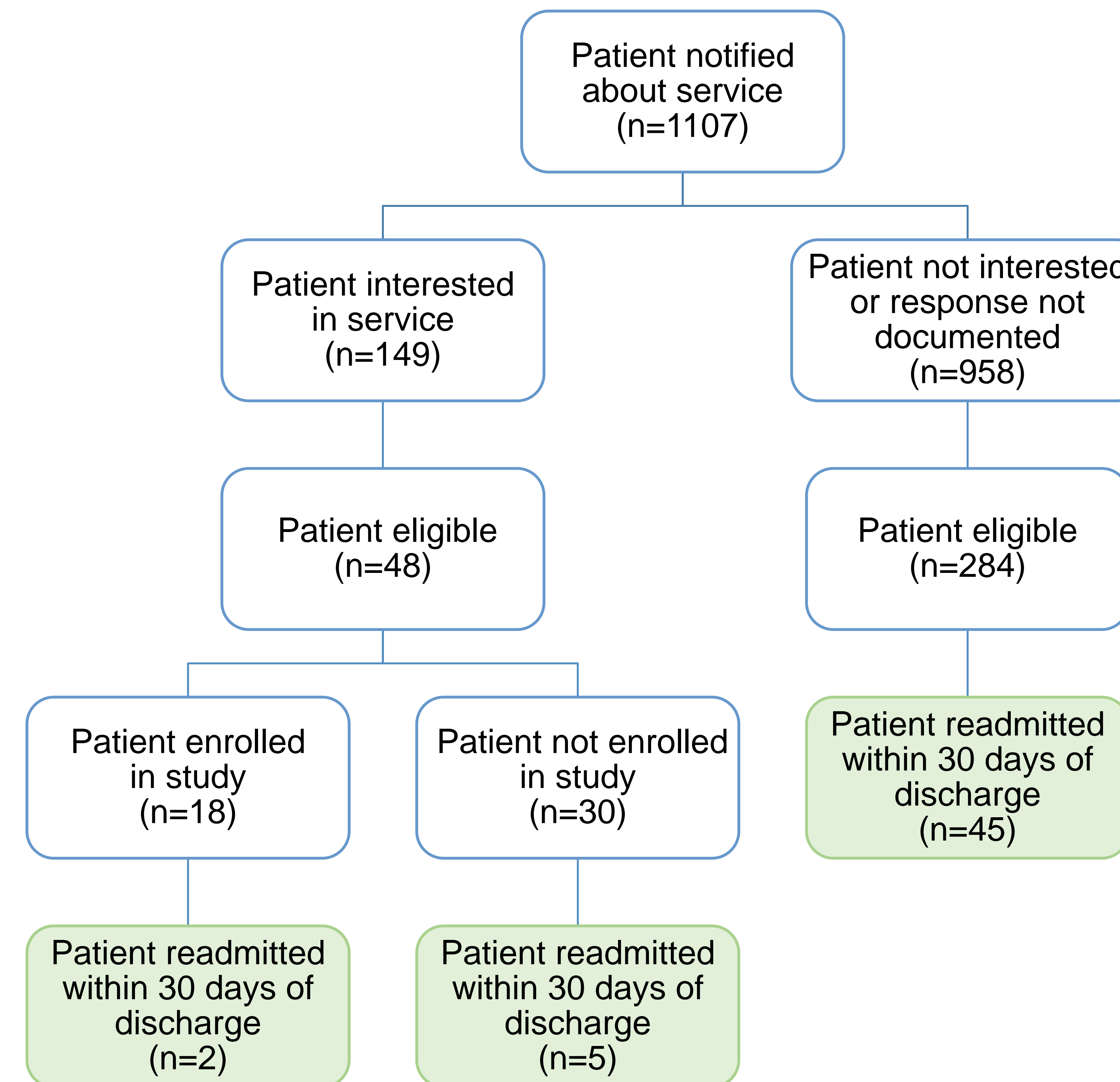
- **Study Design:** Prospective study conducted in conjunction with a rural hospital in eastern North Carolina and an independent community pharmacy
- **Study Timeframe:** October 5, 2016 to February 26, 2017
- **Inclusion Criteria:**
 - Patient ≥18 years
 - Admitted with a primary diagnosis of COPD, heart failure or diabetes
 - Discharged from the hospital to home
- **Exclusion Criteria:**
 - Discharged to nursing facility or other facility
 - Does not speak English
 - Decisionally impaired or does not have a healthcare power of attorney to provide consent

Transition to Wellness Service



RESULTS

Enrollment and Readmissions



Patient Demographics (n=18)	N (%)
Age in years, mean (range)	53 (43-77)
Gender	
Female	13 (72%)
Male	5 (28%)
Medical Condition	
COPD	10 (56%)
Heart Failure	9 (50%)
Diabetes	6 (33%)
Number of medications, mean (range)	
Prior to admission	8 (0-16)
At discharge	11 (4-23)

Drug Therapy Problems (DTPs)	
Type of DTP	Number
Indication	
Duplicate therapy	4
Adherence	
Patient forgets to take	2
Patient prefers not to take	1
Other Discrepancies	
No prescription given	28
Medication to be continued was omitted	4
New medication required prior authorization	1
Addition of unintended discharge medication	1
Dose discrepancies on discharge orders	1
Total Number of DTPs Found	42

DISCUSSION

- A large number of patients (86%) were eligible for the study but were not interested. Pharmacists are continuing to provide education to hospital staff to increase understanding of the service and improve marketing to potential patients.
- The most common DTP identified was no prescription given to patient for medications they were to continue after discharge. There is a common misconception among hospitalist if the patient was on a medication prior to admission the patient already has the medication at home.

CONCLUSIONS

- Transition to Wellness is a unique service developed by Realo Discount Drugs in partnership with a local hospital.
- Community pharmacists may serve a valuable role in preventing readmissions through patient education and resolution of identified drug therapy problems.

The authors would like to thank the APhA Foundation for their support of this project. This service is also supported by a grant from the Community Pharmacy Foundation.