**Evaluating Older Adult Perceptions of Community Pharmacists and Provided Services as an Aid to Emergency Department Transitions of Care**

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**Objectives**

To understand how older adults, transitioning home from the acute care setting, perceive the role of community pharmacists and pharmacy services in this transition. The secondary objective is to describe the community pharmacist-provided services utilized by patients during this transition.

**Methods**

**Design**
- Design: Prospective, qualitative study
- Sample population: English-speaking adults ages 65 years and older discharged from the acute care setting with at least one prescription
- Measurement: Semi-structured phone interviews (15-30 minutes) 3-5 days post-discharge
- Recruitment: Recruitment for the study will continue until forty patients are enrolled or saturation of themes is reached
- Analysis: Thematic analysis of transcribed interviews

**Study endpoints**
- Post-discharge prescription fill rate (including barriers and facilitators to filling medication as prescribed)
- Community Pharmacist provided support that aided in transition of care (including counseling; resolving issues related to indication, safety, efficacy, adherence or cost; communication with prescriber on behalf of patient; etc.)
- Community Pharmacy provided services that aided in transition of care (i.e. MTM, medication reconciliation, delivery, etc.)
- Patient expectations of the community pharmacist in the transition of care as a member of the overall health care team

**Results**

Unfortunately, due to initial IRB challenges our research was delayed. In addition, shortly after recruitment began, COVID-19 shut down all research projects in the study setting. Only a handful of patients were eligible and none had returned the initial phone call.

**Conclusion**

Transitions of care services continue to be identified as a key player in preventing hospital re-admissions and ED revisits. Similar to the research project that preceded this, the overall make-up of the research team suggests that collaborations between community pharmacies and acute care facilities may be possible and could provide much needed support across the transition of care from setting to setting. However, due to the inability to carry out the project because of the pandemic, there is no data from this study to suggest new roles or support cited roles of the community pharmacist in the transition of care specifically from the acute care setting. Future studies are still needed to 1) better clarify patient needs and patient understanding of their needs, and 2) identify how to best engage patients in the transitions of care process to close the gap.