COMPLETED GRANT SYNOPSIS

Integrating a Pharmacy Technician into Medication Therapy Management Workflow

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Objectives

1. To develop and evaluate a process for integrating a pharmacy technician into MTM workflow to assist with scheduling and follow-up in a community-based ambulatory care setting.
2. Increase the number of patients seen each week by pharmacists by 10%

Methods

Design	• Cross-sectional, quality improvement study • This project aims to create an integrated practice model utilizing a pharmacy technician to track, call, and schedule patients after they have been discharged from the pharmacist's care. This will ensure patients are seen by a pharmacist as soon as possible after a new drug therapy problem has occurred instead of waiting until the patient reaches out for help from either their physician or pharmacist. The pharmacy technician will use templates developed by the pharmacist team to assess for medication side effects, patient concerns with their medication, adherence issues and patient self-monitoring of their chronic medical conditions. Based on patient response, the technician will schedule the patient with the pharmacist if needed. • The pharmacy technician will also contact patients to schedule initial visits after referral from their insurance company and will call to reschedule patients that have no showed to their appointments • Qualitative data was collected on a weekly basis using PDSA cycles to refine the technician calling scripts and overall process. • Quantitative data was collected continuously and included: time spent per call, call success rate, appointment scheduling rate and appointment follow through rate
Study endpoints	• At the end of the study, the goal was to have a usable calling script for the pharmacy technician to use to contact patients and assess the patient's need for an additional appointment with the pharmacist.

Results

- The pharmacy technician had 4 hours of dedicated time per week to commit to calling patients for the project.
- The pharmacists involved in this study contract with a local clinic to provide MTM services inside the clinic. Patients are referred by their provider(s) to this service. The pharmacists document in the clinic Electronic Health Record (EHR). One of the initial steps in this study involved getting the technician access to the EHR and uploading the calling scripts to the EHR so the technician could document in the same system as the pharmacists.
- Throughout the study, the pharmacy technician made 529 calls to 374 patients. She was able to reach 223 of those patients (59.6%) by phone. Of the 223 patients that she was able to reach 107 of them (48%) were scheduled or rescheduled for an appointment
- The average time spent per call was 1.75 minutes and the average total time spent to call and document these encounters was 3.09 minutes.

- Of the 107 patients that were scheduled for an appointment by the pharmacy technician, only 9 of these patient's no showed for their follow up appointment which results in a show rate of 92.2%.
- The other goal besides integrating the technician into the workflow was to increase the number of patients the pharmacist sees per week. Before the technician was integrated into the workflow, the pharmacist saw on average 20 patients per week. By the end of the study, the pharmacist was seeing on average 24 patients for an increase of 20%.
- During the study, three main changes were made using the qualitative data. These included note content and format, development and maintenance of the patient list and call structure. These changes are reflected in the attached note templates.

Conclusion

With nearly half of all patients contacted requesting or eligible candidates for an MTM visit, follow-up from a pharmacy technician is fulfilling a need within the clinic system. Additionally, most patients that were rescheduled with a pharmacist presented to their appointment, which may indicate their initial visit was a positive experience for the patient or that they saw value in the service. Some of the patients contacted were determined to be at goal for their health condition and follow-up with a pharmacist was unnecessary. Even though these interactions did not generate additional visits for the pharmacist, ensuring that patient is at goal and documenting it in the EHR improves continuity of care.

The objective of this study was to describe the process of integrating a pharmacy technician into MTM workflow. By developing a role in which a pharmacy technician can fully utilize their skillset and leverage their relationships with patients, pharmacies can recruit and follow-up with patients while reserving pharmacist time for direct patient care.