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Implementation and Evaluation of a Post-discharge Clinical Patient Follow-up Service in an outpatient pharmacy setting

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Background
- Transitioning between inpatient and community settings is prone to medication errors.
- To improve continuity of care and patient retention, integrated outpatient pharmacies at two large medical centers invite patients to continue filling their outpatient medications with their pharmacy after discharge.
- Despite offering services such as free delivery and improved care attributed to integration with the health system, patient retention rates remain low, averaging 0.63%.
- Currently these integrated outpatient pharmacies do not have a defined process to provide an extra level of pharmacy care or follow up with patients who expressed intent to continue using them after discharge.

Purpose
- Develop and implement a workflow to increase patient engagement post discharge aiming to increase retention rates in patients discharging from an inpatient setting at two large medical centers
- Ensure quality and continuity of care post-discharge

Objectives

Primary outcome:
- Retention rate of patients post implementation of workflow

Secondary outcome:
- Financial impact of implemented workflow

Methods

Study design:
- Prospective
- 8-week period
- Periods: Pre-implementation: 10/1/21 – 12/13/21
- Post-implementation: 1/23/22 – 3/25/22

Retention is defined as patient actively filling at the end of the respective study periods (pre/post)

Inclusion criteria:
- Patients who are enrolled in the meds-to-beds concierge program

Exclusion criteria:
- Patients who are not applicable to enroll
- Patients who are not eligible to offer enrollment
- Patients who are enrolled at discharge
- Patients who are enrolled in the meds-to-beds program

Purpose: Ensure quality and continuity of care post discharge

Purpose: To improve continuity of care and patient retention

Purpose: To provide an extra level of pharmacy care

Primary Outcome:
- % Patient Retention Pre- and Post-Implementation

Secondary Outcome:
- Financial Impact: Profit margin

Study was carried out with a specific subset of patients at two large medical centers which can limit external validity.

Limitations:
- Pharmacist-driven determination of eligibility to offer enrollment is subjective.
- The definition of retention in this study; a more equal measure of retention would be to assess if patient is still filling with outpatient pharmacy at an equal number of days post discharge.
- The impact of providing education to pharmacists is unknown over time.
- Study was carried out with a specific subset of patients at two large medical centers which can limit external validity.

Conclusion
- Increased patient engagement post discharge and education for pharmacists and pharmacy technicians to encourage patient enrollment has increased patient retention at an outpatient pharmacy.
- These services were implemented at two large medical centers for patients who have enrolled in the meds-to-meds program, further studies are needed to assess current outcome indicators.

References