

UNIVERSITY OF WISCONSIN HOSPITAL AND CLINICS
DEPARTMENT OF PHARMACY
SCOPE OF PATIENT CARE SERVICES FY 2014
October 1st, 2014

Department Name: Department of Pharmacy

Department Director: Steve Rough, MS, RPh

I. Scope of Services

Types of Patients Served:

The Department of Pharmacy provides medication therapy patient care services for patients of all age groups and levels of acuity within the UW Health System. All services are conducted in accordance with accepted ethical and professional standards of practice and meet all legal requirements.

Major Conditions/Most Frequent Diagnoses Treated:

Pharmacists provide patient care services to all patients requiring medication therapy, regardless of diagnosis or acuity.

Typical Services, Treatments, Procedures, and Activities Performed:

As part of daily activities, pharmacists routinely assess pertinent patient information, such as demographic data, vital signs, laboratory values, medication regimens, medication compliance, and health insurance coverage. Pharmacists collaborate with all members of the healthcare team, patients, and their caregivers to provide value-based, patient-centered care. Pharmacy technicians, pharmacist assistants, and pharmacy students assist in the delivery of pharmaceutical care under the direct supervision of a pharmacist. Established policies, procedures, protocols, therapeutic guidelines, and standards of pharmacy practice are followed as part of the pharmaceutical care services process.

Pharmacist patient care services are provided to all patients in the UW Health System who receive medications. Pharmacists provide collaborative and interdisciplinary care in a cost-effective, evidence-based manner to improve patient outcomes. Standards of practice established by the American Society of Health-Systems Pharmacists, the Pharmacy Society of Wisconsin, The Joint Commission, the Wisconsin Board of Pharmacy, the United States Pharmacopeia, and the Food and Drug Administration serve as a guide for establishing pharmacy services. The processes by which these services are provided are as follows:

1. Upon admission, a pharmacist reviews each patient's medical record and ascertains an accurate admission medication history through interviewing the patient or caregiver, or consulting other resources as necessary to obtain accurate, up-to-date information. This process allows the pharmacist to document active prescription, nonprescription, and herbal medications, assess medication adherence, determine recent medication use, understand the past medical history and history of present illness, review all allergies, identify actual or potential adverse drug reactions, and assist with identifying and resolving issues related to alcohol or tobacco use and immunization status. Pertinent patient-specific information that may affect current or future drug therapy is documented, such as age and creatinine clearance for renal function assessment. Pharmacists reconcile inpatient medication

orders with the patient's pre-hospitalization medication regimen to improve accuracy and quality at transitions of care. This medication history is used by the pharmacist and other providers to reconcile medication orders throughout the continuum of care.

2. All new medication orders are reviewed for appropriateness by a pharmacist to determine the presence of medication therapy problems in a patient's current medication therapy, including, for example, any of the following:
 - a. Medication used with no medical indication;
 - b. Patient has medical conditions for which there is no medication prescribed;
 - c. Medication prescribed inappropriately for a particular medical condition;
 - d. Immunization regimen is incomplete;
 - e. Current medication therapy regimen is inappropriate (dose, dosage form, duration, schedule, route of administration, method of administration);
 - f. There is therapeutic duplication;
 - g. Patient allergies pose risk with current medication selection;
 - h. There are adverse drug- or device-related events requiring intervention or potential for such events;
 - i. There are clinically significant drug-drug, drug-disease, drug-nutrient, or drug-laboratory test interactions or potential for such interactions;
 - j. Medical therapy has been interfered with by social, recreational, nonprescription, or nontraditional drug use by the patient or others;
 - k. There are needed laboratory or other assessments to ensure safe and effective medication therapy that have not been ordered or assessed;
 - l. Patient is not receiving full benefit of prescribed medication therapy;
 - m. Medication therapy cost prohibits effective use by the patient;
 - n. Patient lacks understanding of medication therapy;
 - o. Patient not adhering to medication regimen.
3. Pharmaceutical needs of the patient are reassessed on an as-needed basis as the patient's condition changes. Ongoing assessment of the individual patient's needs through patient interviews, participation on medical rounds, review of the electronic medical record, daily review of medication profiles and laboratory data, and consultation with team members ensures optimum medication therapy is prescribed. In addition, pharmacists coordinate the ordering, timing, and evaluation of serum drug concentrations, adjust doses for altered renal function, intermittent dialysis, and continuous renal replacement therapy, convert routes of medication administration, modify therapy to standardized doses as needed, and provide recommendations for pharmacokinetic follow-up for appropriate drugs.
4. Pharmacists direct appropriate medication use and administration through the development and maintenance of guidelines, protocols, and other references for clinical personnel.
5. Pharmacists initiate (prescribe) drug therapy regimens as authorized by protocols, including the ordering of laboratory tests to monitor drug therapy for safety and efficacy. Pharmacists also adjust medication start times to reflect appropriate continuity of care based upon medication history information obtained from the patient or other sources.
6. Patient progress and recommendations regarding medication use are communicated to the primary provider and documented in pharmacy monitoring notes and in progress notes in the permanent medical record.
7. Pharmacists play a key role in the development and implementation of discharge plans of care for patients. Responsibilities include educating patients and/or caregivers, facilitating safe transitions of care, assisting with reimbursement issues, providing medication adherence aids, and documenting all activities in the medical record. Pharmacists, through physician delegated prescriptive authority; provide prescriptions and medications to patients and/or caregivers at the time of discharge when

- appropriate. Pharmacists reconcile discharge medication orders with the patient's inpatient and pre-hospitalization home medication regimens to assure safe transitions of care and appropriateness of medication use to reduce the risk of readmissions due to inappropriate medication use or follow up.
8. Pharmacists control the drug distribution systems to ensure that the right medication and dose are administered via the right route to the right patient at the right time, and maintain the safety and efficiency of the medication use system.
 9. Pharmacists assist in the monitoring, prevention, reporting and coordination of performance improvement activities across the continuum of care. Pharmacists especially provide oversight for adverse drug events, drug interactions, and medication errors.
 10. Pharmacists assist with patient-centered transitions across the continuum of care to ensure continuity of care is maintained, consistent with public health initiatives and organizational goals. Pharmacists provide ambulatory care in an array of specialty and primary care locations, promoting the exchange of pertinent patient information across the health care network.
 11. Pharmacists develop, maintain, monitor, and enforce medication use policies, guidelines, and formulary restrictions in order to decrease variability, improve quality, and decrease cost. Patient population assessments are accomplished through medication use evaluation studies and reviewing compliance with established therapeutic and clinical guidelines. These evaluations are used to improve organizational performance through collaborative performance improvement initiatives. All medication-related information distributed within the health system is reviewed by the Pharmacy Department to ensure accuracy of information and consistency with restrictions, guidelines and standards of practice.
 12. Pharmacists assist in the development, implementation, and maintenance of decision support software systems aimed at decreasing overall healthcare costs and improving the quality of care provided to patients. These services assist with enforcing standards of care, institutional guideline adherence, and regulatory compliance.
 13. Pharmacists assist in optimizing the use of automation and information technology to further enable the development of the professional role of the pharmacist and the clinical services they provide by promoting the efficient use of healthcare resources.
 14. Pharmacists provide reliable drug information to physicians, nurses, patients, caregivers, and other members of the health care team to promote the safe, effective, efficient, and patient-centered use of medication therapy.
 15. Pharmacists help to educate future caregivers by precepting pharmacy students and pharmacy residents, and are involved with continuing education through the provision of in-services for pharmacists and other healthcare professionals. Pharmacists also take an active role in providing medication therapy teaching to medical residents and other professional students in interdisciplinary care settings.
 16. Pharmacists serve on department- and organization-wide committees to promote patient-centered, value-based care.
 17. Pharmacists manage all medication-related information and system functionality within the hospital's electronic medical record.
 18. The pharmacy department's Pharmaceutical Research Center provides research support, protocol review, protocol activation, protocol closeout, drug development tracking, budgeting recommendations, and accountability for all applicable regulatory requirements for conducting medication-related research.
 19. Pharmacy staff members coordinate the storage, preparation and distribution of all medications, including sterile products, and ensure full compliance with national standards of practice.
 20. Pharmacy staff members have received national recognition for processes developed to monitor medication shortages and collaborate with physicians to determine appropriate alternative therapies. Combined management of the electronic medical record allows rapid dissemination of drug shortage management strategies to providers and allied health professionals across the health system.
 21. The pharmacy department periodically conducts patient and internal customer satisfaction surveys to

determine customer expectations and to identify performance improvement initiatives. The results of those surveys are used to improve pharmacy services by aligning services with patient needs and expectations.

22. The director of pharmacy is responsible for strategic planning, oversight of operations, financial management, and personnel management, serving as a liaison between the organization and the School of Pharmacy.

Sites Where Services are Provided:

University of Wisconsin Hospital and Clinics

- Inpatient acute care
- Comprehensive Cancer Center
- Ambulatory primary care and specialty clinics
- Perioperative care areas
- Emergency Department
- Infusion Center

American Family Childrens Hospital

UW Medical Foundation primary care and specialty clinics

UW Department of Family Medicine primary care clinics

Unity Health Plan Participating Pharmacies

University Community Clinics

Don and Marilyn Anderson HospiceCare Facility

Home infusion services provided by Chartwell Wisconsin

Wisconsin Dialysis

Johnson Creek Cancer Center

Contract Long Term Care Pharmacy Services

Contract Hospital Pharmacy Management Services (Divine Savior Healthcare in Portage, WI)

Digestive Health Center

East Side Campus

Hours of Operations:

Inpatient Areas: 24 hours a day, 7 days a week, 365 days a year

Clinic and Ambulatory Practice Areas: Hours vary according to clinic and patient needs.

II. Staff Requirements

Type of practitioners/staffing providing care:

Licensed Pharmacists (Levels 1-4)*

Board Certified Specialists

Pharmacy Residents*

Pharmacy Interns*

Certified Pharmacy Technicians

Pharmacist Assistants

Pharmacy Students

Pharmacy Technicians

*All pharmacists are required to be licensed biennially by the state of Wisconsin. All pharmacy interns are required to have completed the second year of training in an accredited school of pharmacy.

Pharmacists, Pharmacy Interns and Pharmacy Residents are certified in basic life support and pharmacists and pharmacy residents are certified in advanced cardiac life support. Pharmacy technicians complete a comprehensive training course consistent with the goals and objectives set forth by the American Society of Health-System Pharmacists, from which the program seeks accreditation.

Method used to determine appropriate staffing levels:

The statistics and workload data for inpatient, retail, and diversified services are analyzed monthly and quarterly. Statistics such as number of admissions, discharges, transfers, patient days, total medication orders and doses prepared are compiled. These numbers are then multiplied by internally-established time standards for these tasks to obtain total workload in minutes. This information is compared to data during the same time periods from previous years, and analyzed in terms of the current year's allocated budget. Managers analyze information from these data to determine trends and make both short- and long-term staffing adjustments. These trends are followed for several months in order to identify the need for permanent adjustments. If increased workload indicates the need for increased staff, these data are used to help justify a new position to administration. If data show a decrease in workload volume, adjustments including a decrease in staff positions are made. If increased/decreased workload indicates staffing adjustments for limited periods of time (day to day), stepwise methods are used in the interim to accommodate those needs.

Identify the current number and mix of staff:

(See attached Staffing Plan and Pharmacy Workload Statistics)

III. Maintaining staff Competence

Pharmacists and pharmacy technicians are required to have annual performance appraisals and routine competency assessments. All staff having regular clinical contact with patients are assessed on age-specific care (pediatric, adolescent, adult and geriatric). The assessment could be in a written, demonstrated, observed or verbal form. The required competency for pharmacists and pharmacy technicians depends primarily on their work areas. These include, but are not limited to, the following:

- Examples of annual and/or new employees assessments
 - Pharmaceutical care for pediatrics and adolescents
 - Pharmaceutical care for adults
 - Pharmaceutical care for geriatrics
 - Patient counseling
 - Stat References
 - E-Mail
 - Preceptor competency through the school of pharmacy
 - Food/Drug interaction
 - Electrolyte monitoring
 - Pharmacokinetics and laboratory assessment
 - Medication order entry
 - Automix compounder (central pharmacy only)
 - Aseptic technique (central pharmacy and ambulatory areas with biosafety cabinets only)
 - Drug interactions
 - Reimbursement
 - Error prone abbreviations

- HIPAA
- Service recovery
- Medication occurrence reporting
- Self-Administration sheets and medication charts
- Dietary supplements
- Medication ordering system and safe order writing practices
- Chemotherapy preparation
- Medication use policy samples
- Pharmaceutical waste disposal procedures

During the academic year, pharmacist in-services are conducted twice a month. Technician and Pharmacist Assistant inservices are conducted monthly. The inservices are part of the department's on-going efforts to educate staff and further enhance performance and improve staff competencies. These inservices are in addition to the annual competency assessments. The educational needs of the department are assessed through a variety of means, including: Mission Statement

- Quality Assessment and Improvement Initiatives
- Strategic Planning (Goals & Objectives)
- New, Emerging, or Trial Products and/or Technologies
- Medication Safety Plan
- Management of Information
- Changes in Practice
- Regulatory Compliance

Feedback and requests for future topics are regularly solicited from pharmacy staff via e-mail, surveys, inservice evaluation forms, and in person.

Department personnel who attend educational conferences are strongly encouraged to share pertinent information from the conferences with other staff members at inservices. Additional teleconferences, videoconferences, and speakers are scheduled for pharmacy staff on occasion. Other internal and external continuing education opportunities are communicated to staff members.

A travel budget for educational meetings and conferences allows staff to pursue areas of interest, keep up with new/current pharmacy trends and network with other professionals.

IV. Department Goals - FY 2014

The department's mission statement and goals and objectives for FY 2014 are complimentary to the hospital's goals and are attached to this report.

(See attached Department's Mission Statement and Goals and Objective FY14)

V. Contract Services

The Pharmacy Department does NOT use contract services for staff providing patient care. The department does contract with outside pharmacies for high-risk compounding.

VII. Attachments

1. Organization chart of the pharmacy department
2. Mission and Vision Statement of the pharmacy department
3. Pharmacy Staffing Plan
4. Pharmacy Goals and Objectives
5. Medication Use Policies, Protocols and Guidelines available on the intranet