

Introduction

- Documentation of clinical interventions is pivotal to
 - facilitate communication and continuity of care
 - track and trend key performance indicators (KPIs)
 - satisfy accreditation standards
- Tools developed to comply with emerging standards
- Process and product were inconsistent & inefficient
- Objective:** develop effective tool for staff to document interventions and outcomes

Methods

- Goals
 - elevate value and quality of care for patient
 - enhance engagement for end-users (ease of use)
 - improve output for leadership (KPIs)
- Stepwise Process
 - assessed 1) process, 2) gaps, 3) and barriers
 - compiled and compared documentation tools
 - developed categories from standardized framework
 - crosswalk to identify redundancies and deficiencies
 - created SmartForm in Epic with cascading logic
 - embedded self-service tool to support KPIs

Interventions → Actions → Outcomes*

Interventions	Count
Med appropriateness/therapy selection	328
Side effect mitigation/prevention	105
Adherence/persistence	84
Medication access	73
Order screening/monitoring	43
ADR	32
Addressing critical lab	28
Healthcare access	23
Cost-effective therapy selection	19
DDI	18
Contraindications (age, allergies, disease)	10
Duplicate therapy	10
Immunization screening	6
SDOH barriers	4
Total	783

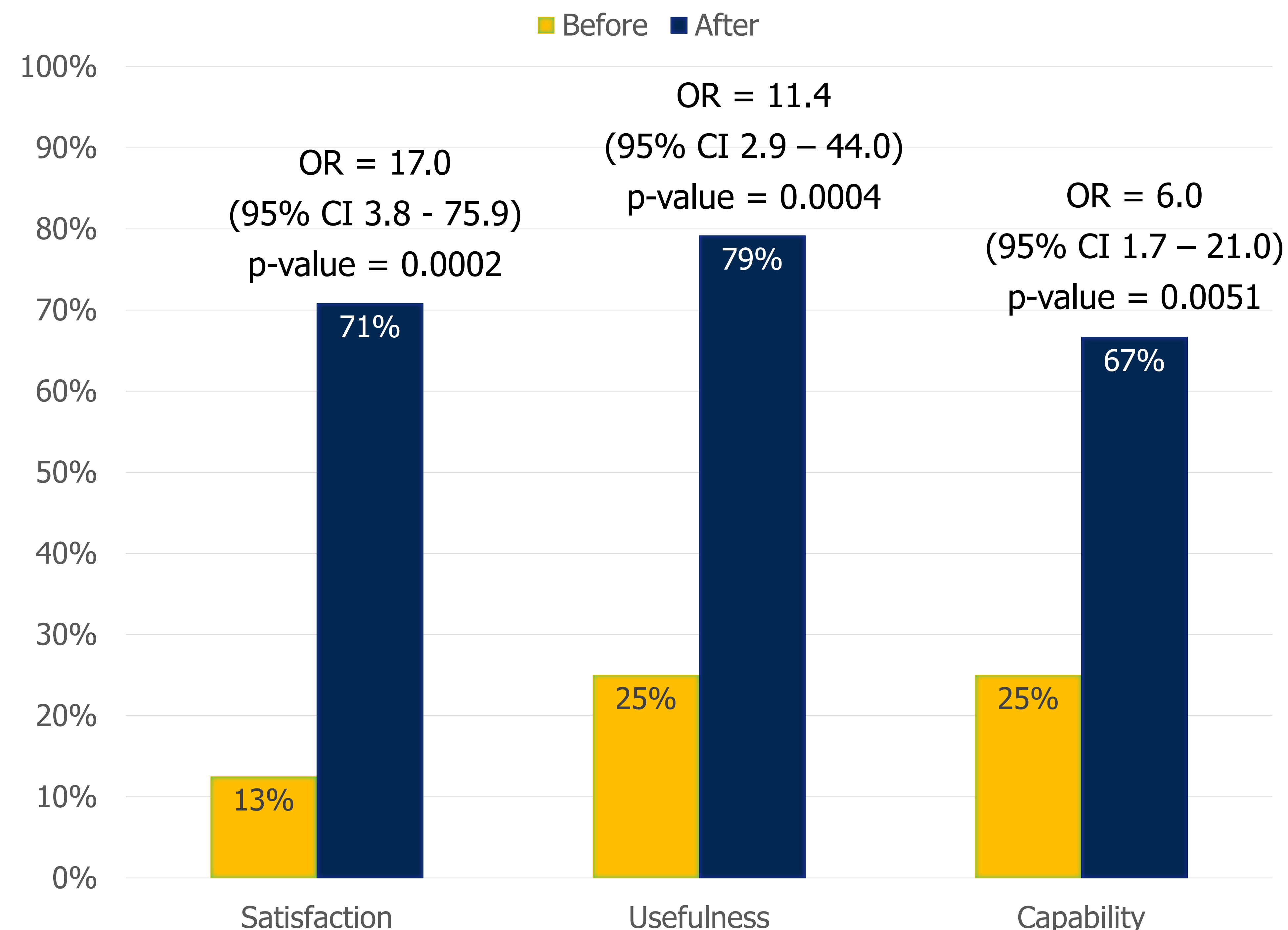
Actions	Count
Education	212
Dose adjustment	171
Initiate therapy or supportive care	124
Change therapy	86
Coordination of care	80
Place order(s)	55
Hold/delay therapy	31
Coordinate access	30
Discontinue therapy	22
Schedule follow-up visit	15
Contact insurance	14
Financial assistance enrollment	8
Refer to physician	5
Referral to allied health providers	5
Adherence aid (app, pill box/pouch)	5
Total	863

Outcomes	Count
Optimized therapy	296
Improved side effect management	72
Improved access to specialty drug	59
Prevented adverse event	45
Improved adherence	45
Prevented therapy disruption	26
Improved access to healthcare	23
Patient reached therapeutic goal	14
Patient placed on GDMT	8
Reduced drug waste	6
Prevented hospitalization	4
Reduced financial waste	4
Prevented ED visit	3
Total	605

*FY2024 Q4 (Q1-3: 517 interventions → average of 172 per quarter)

Survey Findings (n = 24)

RESPONDANTS RESPONDING FAVORABLY



Discussion

- Key findings
 - staff engagement increased (↑↑↑) — 350% more interventions than average (172) for previous 3 quarters
 - staff satisfaction improved (↑↑↑) — 17x more likely to share a favorable response
 - usefulness (11x) and capability (6x) may offset increased interaction with documentation tool
- Implications
 - collaboration (clinicians, IT analyst, leadership)
 - standardization of documentation practices
 - integration of interventions, outcomes, and KPIs
 - integration of user-friendly smart forms
- Next steps
 - develop feedback loops in documentation processes to ensure value and engagement
 - ongoing staff training and process development
 - explore impact of improved intervention model on patient care and KPIs

Conclusions

- Collaborative effort
 - advanced process and practice for mix of stakeholders
 - aligned documentation with accreditation requirements
 - increased staff engagement
- Future focus
 - focus on continuous maintenance, quality assurance, and exploring the impact of the improved intervention tracking process on patient care.

References

- Pharmacy Quality Alliance. PQA Medication Therapy Problem Categories Framework. August 2017. Available upon request at: <https://www.pqaalliance.org/pqa-measures>

Pharmacist Interventions

Intervention Details
Medication(s) related to intervention
Recipient of the intervention

Time spent on intervention (minutes)
Medication Management/Optimization

Interventions

Med appropriateness/therapy selection	Duplicate therapy	Medication access	Adherence/persistence
Side effect mitigation prevention	ADR	Order screening/monitoring	
Cost-effective therapy selection	DDI	Immunization screening	
	Contraindications (age, allergies, disease)	SDOH barriers	
		Healthcare access	

Action Taken

Education	Reach out to provider/ coordination of care	Education	Education
Initiate therapy or supportive care	Change therapy	Financial assistance enrollment	Financial assistance enrollment
Change therapy	Hold/delay therapy	Refer to physician	Refer to physician
Dose adjustment	Discontinue therapy	Reach out to provider/ coordination of care	Place order(s)
Hold/delay therapy		Place order(s)	Change therapy
Discontinue therapy		Change therapy	Hold/delay therapy
		Hold/delay therapy	Schedule follow-up visit
		Schedule follow-up visit	

Outcome

Optimized therapy	Patient reached therapeutic goal	Optimized therapy	Patient reached therapeutic goal
Patient reached therapeutic goal	Patient paced on GDMT	Patient paced on GDMT	Prevented adverse event (significant patient harm)
Patient paced on GDMT	Prevented adverse event (significant patient harm)	Prevented adverse event (significant patient harm)	Improved side effect management
Prevented adverse event (significant patient harm)	Improved side effect management	Improved side effect management	Reduced drug waste
		Reduced drug waste	Improved access to specialty drug
		Improved access to specialty drug	

Patient or caregiver who was in agreement with plan
 Insurance
 Provider who accepted recommendation and is in agreement with plan
 Pharmacy