

Pharmacy study expects to lower hospital readmissions

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UC Researchers study a way to reduce hospital readmissions through one on one medication management with a pharmacist. Credit: University of Cincinnati. Dan Davenport

Getting discharged from the hospital and then having to go right back in again can be emotionally draining for a patient and their family. It can also cause financial strain for all involved ... the patient, the hospital system and the insurers—including Medicaid and Medicare, which are taxpayer funded.



With Medicare, for example, nearly one in five <u>patients</u> discharged from a hospital—approximately 2.6 million seniors—are readmitted within 30 days, at a cost of over \$26 billion annually.

Researchers at the University of Cincinnati's James L. Winkle College of Pharmacy, however, estimate that readmissions could be lowered by as much as 20 percent if, after a <u>hospital stay</u>, high-risk patients received counseling and medication management by a pharmacist in a community pharmacy.

"Patients with certain diseases take many different kinds of medications, and when their medications are well managed, then being readmitted should be mostly preventable," associate professor Pamela Heaton, PhD, says of the college's participation in a new study which aims to pair 1,000 patients who are at high risk for readmission with a community pharmacist.

The study, funded by a \$600,000 grant from the National Association of Chain Drug Stores (NACDS) Foundation, is a partnership among Cincinnati's Health Collaborative, the Kroger Co. and the college. It is based on a 2013 pilot study conducted by assistant professor Heidi Luder, PharmD.

Luder and Heaton are co-investigators on the larger, NACDS-sponsored study.

In the pilot, Luder says, patients who saw the pharmacist were less likely to be readmitted than patients who did not participate.

This study, she says, "is a huge opportunity to expand the successful pilot program to several different hospitals and several different pharmacies across the Cincinnati area. We hope that this larger study will be able to impact more patients on a larger scale and improve the quality of



healthcare in Cincinnati."

The Health Collaborative will involve the <u>health care technology</u> partner HealthBridge to build and implement the technology necessary to allow the hospitals to communicate patient information to the pharmacists.

The study will focus on patients with complex disease states—heart failure, COPD, pneumonia, myocardial infarction (heart attack) or diabetes—when discharged from select hospitals in the UC Health and Mercy Health Partners systems. Patients who volunteer to be in the study will then be contacted by a Kroger pharmacist and seen at one of 45 Kroger pharmacies in the Cincinnati-Dayton market.

The role of the college will be to train the pharmacists on the counseling protocol and to analyze the outcomes, says Heaton, adding: "Historically, hospitals and pharmacies haven't had an efficient, accurate way to communicate after the patient is discharged, and it's during this transition when a lot of miscommunication happens. We want to be there ... we want to show that with these complex cases the community pharmacist can help lower readmissions."

The pharmacist will do a variety of things to improve care such as reviewing medications for contraindications, drug interactions, side effects, non-adherence, duplications, and a variety of other common problems, says Luder, whose faculty position is co-funded by the college and the Kroger Co.

Luder, who is also a community <u>pharmacist</u>, says that she sees first-hand how overwhelmed patients are following discharge from the hospital: "Often medications are discontinued, added or changed during their hospital stay and patients don't fully understand the directions they receive upon discharge. It's very helpful to review discharge instructions with patients a few days after discharge at the community pharmacy to



help them understand all the changes that were made."

Provided by University of Cincinnati Academic Health Center

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