

Transitions of Care Pharmacists 10 Principles



The National Transitions of Care Coalition (NTOCC) convened a Transitions of Care Pharmacy Task Force that is committed to education, resources, tools, developing public and professional awareness, and partnership with like-minded organizations to acknowledge the essential role that pharmacists have – in operating at the top of their license – in transitions of care and care coordination.

We the Task Force members have committed to the following principles:

- I. We advocate that pharmacists have a crucial role and impact in improving transitions of care for patients, their identified family caregivers, and providers within the healthcare continuum.
- II. We advocate for pharmacists to be an integral member of the interdisciplinary care team at each level of care transition and coordination.
- III. We acknowledge that while no one discipline is wholly responsible for care transition and coordination, we advocate that a larger involvement by pharmacists beyond medication reconciliation will help realize an improved standard of care, including Medication Management Services *and overall quality of care as well as patient satisfaction and safety
- IV. We believe that pharmacists are an integral part of quality health care delivery and thus play an essential role in helping to improve health care communication – a core element of quality transitions of care, between patients, their identified family caregivers, and providers.

- V. We advocate that pharmacists practice Medication Management Services (see definition), inclusive of:
- Assessment of the patient to determine their clinical status
 - Prioritize patient problems, medication related needs including medication access and barriers
 - Assessment of social determinants of health that could interfere with patient access to medications and following the medication plan
 - Patient advocacy in support of their medication care plan to optimize therapies and achieve patient and caregiver specific outcomes
 - Active engagement and education for patients, identified family caregivers, providers, and other members of the interdisciplinary care team
 - Coordinate and ensure that pertinent patient information is transferred between care settings
 - Ensuring medication continuity, immediate and sustained, medication access (i.e. insurance coverage, financial assistance, appropriate packaging, prior authorizations, compliance)
 - Follow-up care, including
 - Post-transition monitoring of the patient and identified family caregiver
 - Warm hand-off to next-level pharmacist between care settings
 - Accept accountability for the highest attainable quality of care in collaboration with the interdisciplinary care team to enhance clinical care and improve patient safety and satisfaction.
- VI. We support a financial reimbursement model for pharmacists which would recognize the unique and valuable role and expertise the pharmacist brings to each care transition through their assessment, management, monitoring, and advocacy to improve patient quality, safety and satisfaction.
- VII. We believe that patient contact and interaction (i.e., face to face, telephonic, or through virtual visits) are essential components necessary

for pharmacists to provide quality medication management services that enhance transitions and care coordination.

- VIII. We advocate for the concept that pharmacists in all practice settings (i.e., acute care, post-acute, outpatient, community-based, palliative & hospice care) are *essential* to the delivery of the Quintuple Aim, improving the patient experience of care, improving provider experience, improving the health of populations, advancing health equity and reducing the total cost of care.

- IX. We encourage interested pharmacists to consider specialization in transitions of care as an advanced practice initiative.

- X. We conclude that the pharmacists' demonstration of their clinical expertise, commitment to a code of ethics, and dedicated interactions professionally and collegially with others warrants additional engagement of pharmacists in care transitions and acknowledgement of their crucial role on the interdisciplinary care team.