

Hospital and other Healthcare Facility Pharmacist Practice Assessment Criteria

The following chart outlines the practice criteria used by Practice Advisors (PAs) when conducting an individual Hospital or other Healthcare Facility (e.g. Family Health Team, Long term care, etc.) pharmacist practice assessment. PAs focus on four key areas (domains) taken from the [NAPRA Standards of Practice](#) that have been identified as having the greatest potential impact on patient and public safety. Through a combination of observation, discussion and retrospective review of documentation, PAs evaluate the processes that pharmacists routinely apply to each of these areas with respect to the work up of a new patient, new medication orders, provision of ongoing care, drug information, patient education and medication reconciliation.

For each key area (domain), specific performance indicators – which describe the **minimum practice requirements** for all pharmacists - are identified from the Standards of Practice. The guidance section illustrates how pharmacists would apply the standard in practice and provides examples of activities that support each standard. Pharmacists can use the guidance section to better understand and self-evaluate their current practice processes, procedures and behaviours to ensure they are meeting the required standard.

Domain: Patient Assessment	
PERFORMANCE INDICATOR(S)	GUIDANCE
<ul style="list-style-type: none"> ➤ Gathers relevant information through dialogue with the patient and/or their advocate ➤ Gathers relevant information through review of the patient profile ➤ Uses relevant information to identify drug therapy problems and/or issues that have the potential to affect the optimization of health outcomes (patient issues, patient specific needs) 	<u>Work Up of Newly Admitted/Rostered patient</u> <ul style="list-style-type: none"> <input type="checkbox"/> I gather relevant information from appropriate sources (patient chart, admission notes, consults, labs/tests, BPMH) to assess appropriateness of therapy. <input type="checkbox"/> I gather relevant information about the patient's medical history from appropriate sources including healthcare providers and/or patient if appropriate, to determine allergies, medical conditions, medication indications, diagnosis and other relevant patient information to assess appropriateness of therapy. <input type="checkbox"/> I use relevant information gathered and an evidence-based approach to identify drug therapy problems.
	<u>New Medication Orders</u> <ul style="list-style-type: none"> <input type="checkbox"/> I review relevant patient specific information from appropriate sources (patient chart, progress notes, consults, labs, and test etc.) to assess appropriateness of therapy. <input type="checkbox"/> I gather patient specific information (allergies, medical conditions, medications, diagnosis etc.) to assess appropriateness of therapy. <input type="checkbox"/> I use relevant information gathered and an evidence-based approach to identify drug therapy problems.
	<u>Provision of Ongoing Care</u> <ul style="list-style-type: none"> <input type="checkbox"/> I gather relevant information from appropriate sources (patient chart, progress notes, consults, labs/tests, etc.) to assess appropriateness of current therapy and decisions made.

Domain: Patient Assessment - continued

PERFORMANCE INDICATOR(S)	GUIDANCE
<ul style="list-style-type: none"> ➤ Gathers relevant information through dialogue with the patient and/or their advocate ➤ Gathers relevant information through review of the patient profile ➤ Uses relevant information to identify drug therapy problems and/or issues that have the potential to affect the optimization of health outcomes (patient issues, patient specific needs) 	<p><u>Drug Information</u></p> <p><input type="checkbox"/> I ensure information gathered is relevant (patient, patient chart, healthcare team etc.) to the information requested or education required by the TEAM to optimize patient care.</p>
	<p><u>Patient Education</u></p> <p><input type="checkbox"/> I ensure information gathered is relevant (patient, patient chart, healthcare team etc.) to the patient information requested or education required to optimize the patient's health outcomes.</p>
	<p><u>Medication Reconciliation</u></p> <p><input type="checkbox"/> I review the BPMH information collected to ensure it is from at least two different sources, and accurately reflects how patients take their medication. I confirm the list is complete list (i.e.Rx, OTC, vitamins, NHP, topicals, oral, inhaled parenteral, recreational, samples, naloxone etc.).</p> <p><input type="checkbox"/> I compare the BPMH to the current list of orders to confirm completeness and accuracy of orders (e.g. meds reordered, no duplications, same dose, meds stop and not reordered etc.) on admission /transfer/discharge.</p> <p><input type="checkbox"/> I identify clinically relevant medication discrepancies ordered on admission/transfer/discharge.</p>

Domain: Decision Making

PERFORMANCE INDICATOR(S)	GUIDANCE
<ul style="list-style-type: none"> ➤ Makes decisions to optimize patient outcome ➤ Implements decisions ➤ Monitors outcome of decision to ensure it continues to be best option for patient 	<p><u>Work up of newly admitted/rostered patient</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> I identify drug therapy problems to optimize patient outcomes (e.g. add a drug, stop a drug, increase dose, decrease dose, ADR, non-adherence, consider alternate therapy) <input type="checkbox"/> I provide evidence-based recommendations to the prescriber/Team to optimize medication therapy and desired patient outcomes. <input type="checkbox"/> I monitor my interventions and follow-up to provide further recommendations as needed, based on patient outcomes in collaboration with the healthcare team.
	<p><u>New Medication Orders</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> I identify drug therapy problems to optimize patient outcomes (e.g. add a drug, stop a drug, increase dose, decrease dose, ADR, non-adherence, consider alternate therapy) <input type="checkbox"/> I provide evidence-based recommendations to the prescriber/Team to optimize medication therapy and desired patient outcomes. <input type="checkbox"/> I monitor my interventions and follow-up to provide further recommendations as needed, based on patient outcomes in collaboration with the healthcare team.
	<p><u>Provision of ongoing Care</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> I identify drug therapy problems to optimize patient outcomes (e.g. add a drug, stop a drug, increase dose, decrease dose, ADR, non-adherence, consider alternate therapy) <input type="checkbox"/> I provide evidence-based recommendations to the prescriber/Team to optimize medication therapy and desired patient outcomes. <input type="checkbox"/> I monitor my interventions and follow-up to provide further recommendations as needed, based on patient outcomes in collaboration with the healthcare team.
	<p><u>Drug Information</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> I provide evidence-based information/recommendations to the prescriber/Team to optimize medication therapy and desired patient outcomes.
	<p><u>Patient Education</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> I provide evidence-based information education to patient to optimize their medication therapy and/or desired patient outcomes.

Domain: Decision Making - continued

PERFORMANCE INDICATOR(S)	GUIDANCE
<ul style="list-style-type: none"> ➤ Makes decisions to optimize patient outcome ➤ Implements decisions ➤ Monitors outcome of decision to ensure it continues to be best option for patient 	<p><u>Medication Reconciliation</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> I use clinically relevant information to address medication discrepancies by reviewing the BPMH, medications on admission/transfer/discharge, and patient factors (subjective and objective). <input type="checkbox"/> I consider alternatives to optimize patient outcomes (e.g. add a drug, stop a drug, increase dose, decrease dose, ADR, non-adherence, consider alternative therapy)

- Makes decisions to optimize patient outcome
- Implements decisions
- Monitors outcome of decision to ensure it continues to be best option for patient

Medication Reconciliation

- ☐ I use clinically relevant information to address medication discrepancies by reviewing the BPMH, medications on admission/transfer/discharge, and patient factors (subjective and objective).
- ☐ I consider alternatives to optimize patient outcomes (e.g. add a drug, stop a drug, increase dose, decrease dose, ADR, non-adherence, consider alternative therapy)

Domain: Documentation

PERFORMANCE INDICATOR(S)	GUIDANCE
<ul style="list-style-type: none"> ➤ Documents information gathered in patient profile/chart ➤ Documents decisions made, rationale and follow-up ➤ Documents communication with patients/healthcare team 	<u>Work up of newly admitted/rostered patient</u> <ul style="list-style-type: none"> <input type="checkbox"/> I document relevant patient information used to identify drug therapy problems in the patient chart. <input type="checkbox"/> I document decisions made including recommendations to the healthcare team to address the drug therapy problem(s), including rationale, in the patient chart.
	<u>New Medication Orders</u> <ul style="list-style-type: none"> <input type="checkbox"/> I document relevant patient information used to identify drug therapy problems in the patient chart. <input type="checkbox"/> I document decisions made including recommendations to the healthcare team to address the drug therapy problem(s), including rationale, in the patient chart.
	<u>Provision of ongoing Care</u> <ul style="list-style-type: none"> <input type="checkbox"/> I document ongoing patient monitoring and follow-up to ensure the healthcare team is aware of patient progress in a timely manner. <input type="checkbox"/> I document adverse drug reactions (ADR's)/ medication incidents/ near misses as per standards of practice. <input type="checkbox"/> I ensure that information needed for continuity of care is documented in a manner that is timely, readily retrievable and easily accessible by other pharmacy team members (i.e. documentation is completed and saved in a standardized fashion).
	<u>Drug Information</u> <ul style="list-style-type: none"> <input type="checkbox"/> I document drug information provided to the healthcare team as appropriate in the patient chart including outcome of the discussion.
	<u>Patient Education</u> <ul style="list-style-type: none"> <input type="checkbox"/> I document information provided to patients in the patient chart, including patient assessment, patient information provided and outcome of patient discussion.
	<u>Medication Reconciliation</u> <ul style="list-style-type: none"> <input type="checkbox"/> I document the BPMH including completed list of all medications (i.e. Rx, OTC, vitamins, NHP, topicals, oral, inhaled parenteral, recreational, samples, naloxone), sources used to complete the BPMH and patient allergies. <input type="checkbox"/> I document the Medication Reconciliation on admission, transfer and/or discharge, including clinically relevant discrepancies identified and action taken to address the discrepancies. <input type="checkbox"/> I document communication with the patient and healthcare team where appropriate.

Domain: Communication & Education

PERFORMANCE INDICATOR(S)	GUIDANCE
<ul style="list-style-type: none"> ➤ Communicates verbally and non-verbally in a manner that is appropriate for the audience. ➤ Communicates in writing in a manner appropriate for the audience ➤ Provides information to audience within scope ➤ Ensures audience understanding 	<p><u>Work up of newly admitted/rostered patient</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> I communicate verbally in a manner that is appropriate to the audience (e.g. healthcare professional, patient and/or caregiver) including appropriate level of complexity as well as fluency, grammar, vocabulary, tone, volume and modulation of voice, rate of speech, pronunciation etc. <input type="checkbox"/> I communicate non-verbally in a manner that engages the audience (e.g. healthcare professional vs patient or caregiver) including good eye contact, open posture, gestures, smile or concern demonstrated as appropriate, use of silence. I am aware of when the audience is not engaged/listening or appears confused. <input type="checkbox"/> I use open-ended questions to help elicit relevant and accurate information when speaking with the team. <input type="checkbox"/> I use open-ended questions to help elicit relevant and accurate information when speaking with patients. <input type="checkbox"/> I use open-ended questions to assess prior knowledge of patient and/or patient understanding. <input type="checkbox"/> I ask open ended questions when interviewing patients/caregiver to engage and ensure an interactive dialogue. <input type="checkbox"/> I use active listening skills to identify the healthcare team needs. <input type="checkbox"/> I use active listening skills to identify my patient's needs. <input type="checkbox"/> I demonstrate and respond to feelings and needs. I encourage patients to share their concerns and what they know about their medication. I summarize both facts and feelings to ensure the patient feels heard and understood. <input type="checkbox"/> I organize the patient interview to engage patients (e.g. logical sequence of questions, flexible, open ended questions, clarify information provided as need, avoid confusing the patient). (E.g. Invites, listen, summarize). <input type="checkbox"/> I ensure written communication in the patient chart follows a recognized format (SOAP, DAP, FARM etc.) and is relevant, professional and organized. <input type="checkbox"/> I ensure written communication for patients is relevant, professional and organized. <input type="checkbox"/> I provide complete and appropriate information (to patient and/or healthcare provider). <input type="checkbox"/> I ensure audience understanding

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Domain: Communication & Education - continued

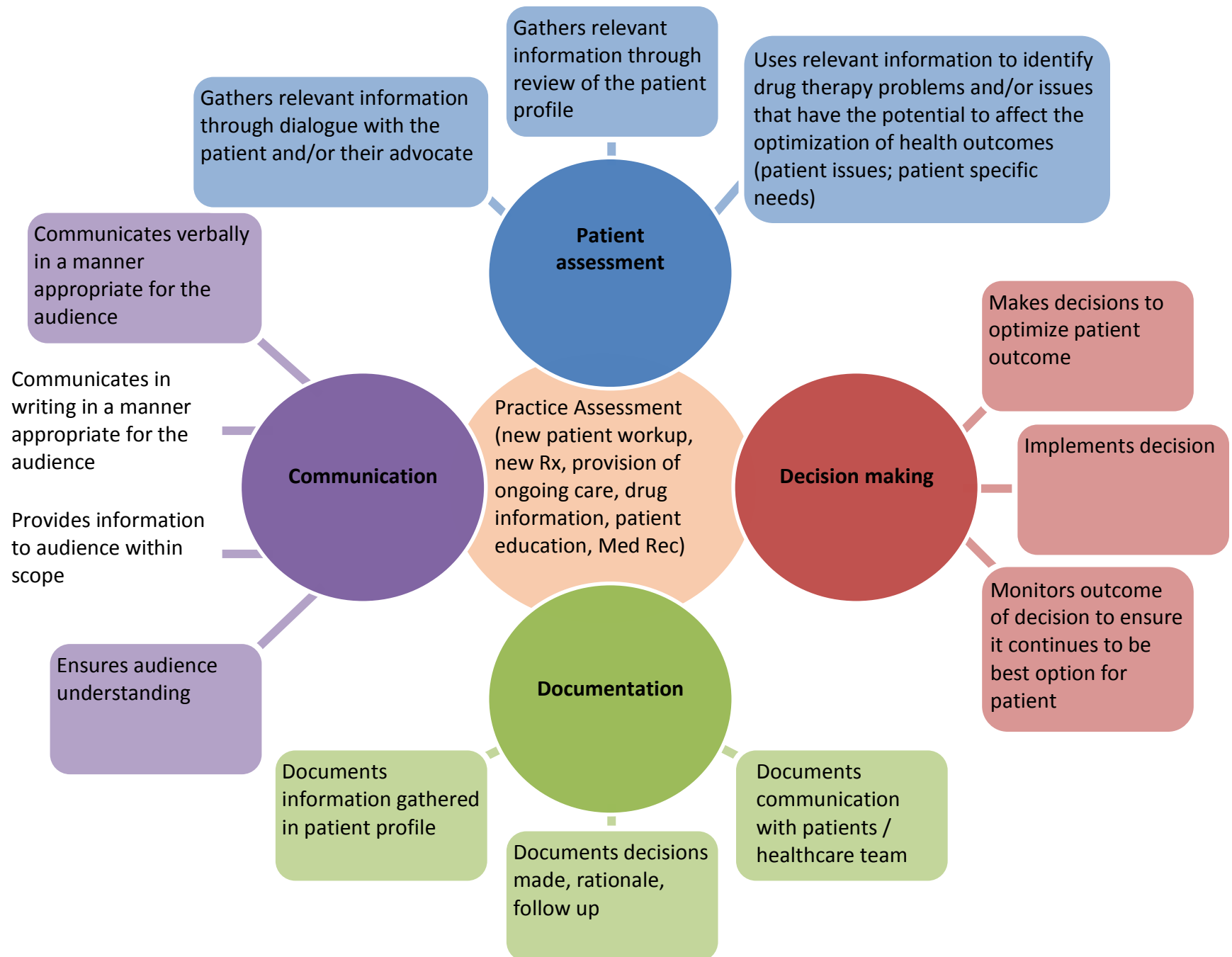
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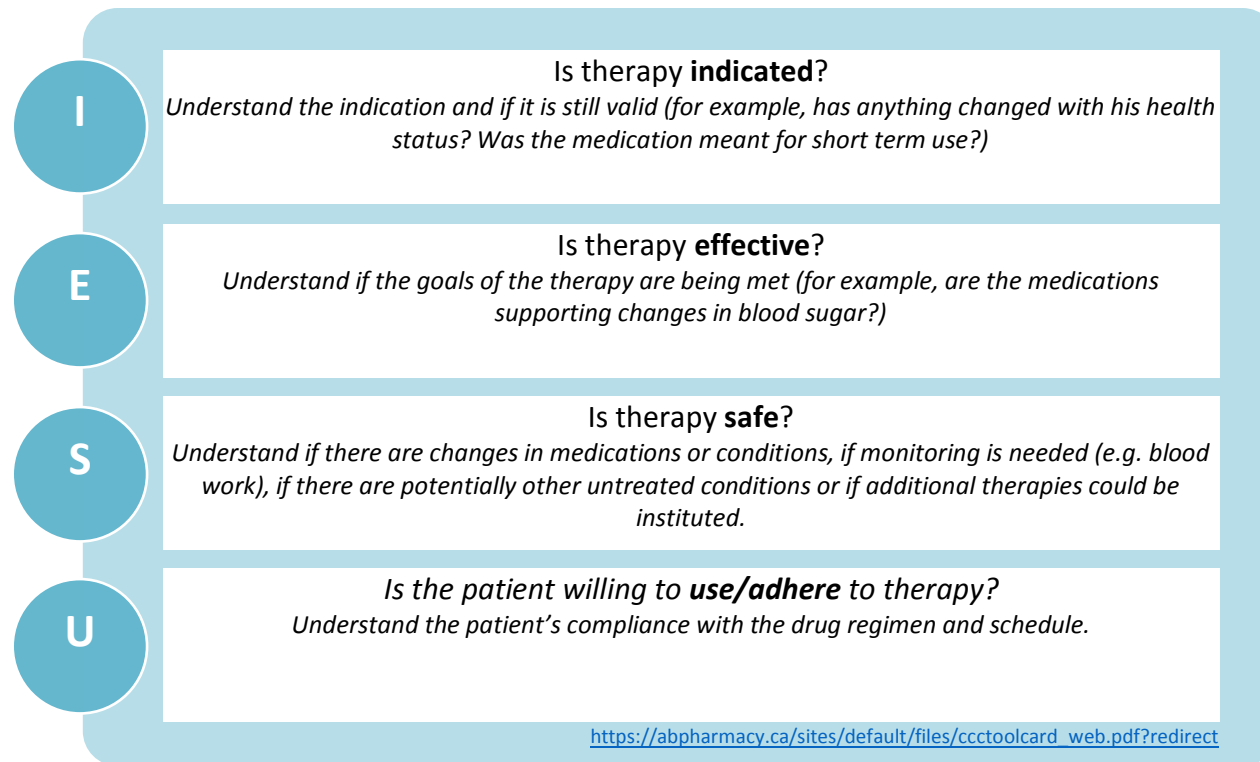
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<http://www.ocpinfo.com/library/practice-related/download/PracticeAssessmentCriteria.pdf>



Tips and Tools for Patient Assessment and Documentation:



Patient Assessment and Documentation Pearls:

<https://abpharmacy.ca/sites/default/files/VitalToCCC.pdf>

CONNECT WITH PATIENTS

Engaging with patients at every encounter can create an opportunity for patients to collaborate in their care.

CONFIRM AND DOCUMENT INDICATION

Confirming the indication can support your patients and their assessment and monitoring.

Don't make assumptions. If you or the patient are not sure about the indication, seek clarification from the prescriber or other sources.

Document the indication electronically to facilitate monitoring and future assessments.

Tips:

- Find the best location to document patient information in your software.
- Write the indication on the prescription prior to scanning.

MONITOR PATIENTS

Reconnecting with patients can help you find out how their medications are working and what you can do to continue supporting them.

For every prescription that is dispensed, pharmacists must ask whether the prescription is therapeutically appropriate

Tip: use IESU process to ask yourself if you are making any assumptions

This includes gathering relevant information through dialogue with the patient, and creating, adjusting or reviewing the patient profile. Note that patient profiles need to be maintained; a patient's health is not static and their profile should be reviewed on a regular basis.