

Referral Guide: Clinical Pharmacist

What they do, how they can help with your patients

Summary:

Primary Care Network (PCN) Pharmacists provide Comprehensive Medication Management (CMM) services to patients. In collaboration with other health care professionals and in the context of shared decision-making with the patient, we assess the patient's medications (prescription, non-prescription, supplements) to determine if each medication is necessary, effective, safe, and feasible for the patient to take. We also assess the safety of all drugs taken together to manage interactions, with the aim to minimize adverse effects and complexity wherever possible.

This Referral Guide describes typical cases, but there may be additional services and examples where PCN Pharmacists can provide care to your patients. Please contact a PCN Pharmacist to inquire whether your patient could benefit from a referral.

Reason for referral	Examples
Medication Management Services	• Direct patient care with the goal of optimizing drug therapy and associated health outcomes • Assess whether drug therapy is necessary, effective, and safe and <i>address unmet needs (i.e. adherence, cost, other barriers)</i> • Ensure medications are appropriate across multiple conditions and review for possible medications contributing to symptoms (or medication causes) • Assess supplements and traditional or alternative medicines, e.g. for potential interactions with other medication therapy • Provide support and education to improve overall health. • Provide care plans to support shared decision-making
Chronic Disease Management	• Medication and dose optimization, including ensuring medications are appropriately renally dosed • Assist with goal setting and problem solving to support management of chronic diseases • Provide support and education to improve overall health. • Address barriers to adherence • Provide care plans that reflect patient values • Facilitate and coordinate referrals to other VCH programs (i.e. Diabetic Programs)
Polypharmacy Risk Reduction	• Reduce pill burden and regimen complexity • Eliminate unnecessary medication usage • Monitor for adverse events following discontinuation of a

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	medication
Deprescribing	• Reassess ongoing need and benefit of medications • Offer guidance through medication tapers • Provide culturally safe care to assist with addressing the barriers to discontinuation of medications
Medication Reconciliation	• Ensure that medications are appropriately initiated or discontinued following hospital discharge or at other transitions of care • Assess ability to take medications as prescribed; advocate for support like blister-packing, daily dispense, or home care if needed
Care coordination	• Provide culturally safe care to assist with addressing the barriers related to cost of medication and subsequent adherence • Provide information regarding Provincial health benefits programs (e.g. education about PharmaCare plans) • Referral to appropriate Health Care Professional for assistance with registration • Assist with Special Authority applications if appropriate, following pharmacist assessment • Review for more affordable alternatives to medications
Recent attachment to a new provider	• Arrange and coordinate required services and resources • Facilitate required interventions and referrals • Support continued client engagement in care • Assist client and team to create a care plan
Patient education regarding medications, devices of supplements	• Encourage patient involvement and education in management of new or changing diagnosis and chronic disease management • Advocacy in accessing resources (e.g. continuous glucose monitoring devices) • Referrals to other IPT members and community resources • Device teaching (inhalers, injections, patches, etc.)

PCN Pharmacist Exclusion Criteria (in addition to overarching PCN Program exclusion criteria):

- Referrals for medication assessment of a condition in the absence of a formal diagnosis of that condition are inappropriate. Pharmacists may be able to diagnose and prescribe for minor ailments, so a diagnosis of a medical condition outside of that scope must be done by the appropriate health care professional.

- E.g. A referral to discuss antidepressants with a patient who has not been diagnosed with depression.
- List of conditions that pharmacists can make a diagnosis and prescribe medications for, under the Minor Ailments and Contraception Service (MACS):
<https://www.bcpharmacists.org/ppmac>
- While pharmacists are able to submit PharmaCare Special Authority forms, we would only do so if we are also able to assess the appropriateness of the medication.
- Pharmacists cannot register patients for PharmaCare Plans (including plan W (First Nations Health Benefits)), though we can offer support with information about BC PharmaCare and drug coverage.

Pharmacist Discharge Criteria

- All identified drug-therapy problems have been resolved or a plan is in place for Primary Care Provider to monitor and manage medications.
- Care plan is in place for patient to self-manage and monitor chronic diseases with Primary Care Provider.
- Patient can be re-referred back to PCN pharmacist if there is a change in condition or new issue requiring comprehensive medication review.