Development of a Medication Therapy Management Falls Risk Reduction (MTM FRR) Clinic Staffed by an ASCP Student Chapter

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Objective

To describe the creation and development of a Medication Therapy Management Falls Risk Reduction (MTM FRR) clinic that utilizes student-conducted MTM to identify and address the risk for falls associated with medication use in the elderly population.

Methods

Setting: In the fall of 2013, University at Buffalo School of Pharmacy and Pharmaceutical Sciences (UB SPPS) worked with the Agency for Healthcare Research and Quality (AHRQ) to implement an MTM FRR clinic. The clinic was designed in collaboration with several community partner agencies such as AWSRHN (American West 30th Street Residential Home), the University at Buffalo School of Nursing, and the University at Buffalo Adult Day Services to meet the needs of multiple aging populations.

Development: Upon review of the feedback from the first year of the clinics, two areas were identified that required evolution. The AHRQ tool had deficits, such that it was developed for hospital use, it lacked important FRIDs, and it was difficult to stratify that risk well. Secondly, the ability to communicate falls risk findings to providers was lacking. To address these issues, the clinics were changed to incorporate the MTM format and a more discriminating clinical decision support tool was created. The UB SPPS had begun to provide all P3 students with the American Pharmacists Association Medication Therapy Management certificate in 2014, therefore the MTM clinic format fit well with what students were trained to do and it allowed them to accumulate the necessary experience to fulfill the MTM certificate requirements. In 2015, a Medication Risk Analysis Tool for Seniors (MFRAT) was developed to stratify the risk of falls associated with medication use in the elderly population. The original clinics utilized a "brown-bag" format and provided participating community-dwelling seniors with a list of Fall Risk Increasing Drugs (FRIDs) and a fall risk score based upon the work of Beasley and Patatanian which was also adopted by the Agency for Healthcare Research and Quality (AHRQ).

Results

Sites: Nine MTM events were held at 7 different sites (Figure 1) with 6 events held in underserved rural areas. The number of participants at each site ranged from 1 to 14 with a mean of 6.7. The participating pharmacies and practitioners were trained to do and it allowed them to accumulate the necessary experience to fulfill the MTM certificate requirements. In 2015, a Medication Risk Analysis Tool for Seniors (MFRAT) was developed to stratify the risk of falls associated with medication use in the elderly population. The prototype MaRCS also easily allowed one pharmacist to effectively supervise multiple students trained in MTM delivery.

Participant findings: Twenty-three student pharmacists participated and completed a mean of 2.2 MTMs with 2 students completing all 5 required MTMs for their APhA Certificate. The prototype MaRCS also easily allowed one pharmacist to effectively supervise multiple students trained in MTM delivery.

Discussion/Conclusions

Discussion: Through the MTM FRR clinics, senior participants gained knowledge about their falls risk based on the number and types of medications they take and were given strategies to reduce that risk. They were also provided with information to identify FRIDs and guidance to address the associated risks via the personalized MAP. Since many of the MTM events took place in rural areas, students were able to provide valuable health care services to communities of underserved patients. Not only did the participants benefit from these clinics, but the students were also able to gain valuable experience in identifying FRIDs and conducting FRIDs reviews necessary to complete the APhA "Delivering Medication Therapy Management Services" certificate program. The MFRAT provided an association between the known falls risk factor, "number of medications", and the tool generated falls risk grade.

Conclusions: MTM FRR clinics staffed by student pharmacists are an effective strategy to provide needed medication falls risk information to seniors across various settings. Using the tools described, one pharmacist was able to effectively supervise multiple students trained in MTM delivery.

References


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