INNOVATIVE MULTIDISCIPLINARY MANAGEMENT OF HOME PARENTERAL NUTRITION PATIENTS

CarepathRx Pharmacy Services and Chartwell Pennsylvania, LP Home Infusion and Specialty Pharmacy
Johanna Bezjak, PharmD, BCNSP, Stephanie Pancheri, RPh, Kayla Szabo, PharmD, BCNSP, Rebecca Tokarski, PharmD, BCNSP, David Benedict, PharmD, BCPS

BACKGROUND

• The need for experienced nutrition teams throughout transitions of care from acute to post-discharge settings is critical to optimizing home parenteral nutrition (HPN).

• Nutrition support pharmacist roles commonly described in the literature are representative of hospital or institution-based settings.

• An innovative shared service was developed between clinical pharmacy specialists from a health-system based home infusion and specialty pharmacy and a hospital-based Digestive Disorder Center (DDC) to manage adult HPN patients.

• This partnership introduced a unique clinic-embedded role for home infusion pharmacists.

METHODS

April 2019
• DDC identified need for additional hospital-based clinic support for HPN management.

August 2019
• Permanence of clinic-embedded BCNSP was established. Additional BCNSP were recruited and onboarded to support the shared service.

September 2022
• CPA effective September 1

Standard Care MD, RD, RN

Innovative Care MD, RN, RD + Home Infusion PharmD

Collab. Practice Agreement

PURPOSE

• This quality improvement project describes the transition of an innovative shared clinical service to an outpatient Collaborative Practice Agreement (CPA) for HPN patients.

RESULTS

• The transition from Standard Care to Innovative Care highlighted the skillsets a pharmacist brings to a nutrition team. Both provider and pharmacy teams were receptive to establishing a Collaborative Practice Agreement based on demonstrated success of this model.

• A CPA document was drafted by the pharmacy team in accordance with State Board of Pharmacy Code and Regulations.

• Legal and administrative staff from both organizations reviewed and vetted the contact. A final draft was shared with all stakeholders.

• A meeting between the providers and pharmacists was conducted to review and approve the final version. Subsequently all parties accepted and signed the CPA, effective September 1, 2022.

CONCLUSION

• The role of home infusion pharmacists was expanded to support writing of HPN formula, clinical interventions, and outpatient care management.

• Subspecialized care needs combined with physician champions can create opportunities to expand clinical pharmacy programs, notably in home-based settings.

• Pharmacists represented in this collaborative practice agreement have background in traditional infusion pharmacy, PGY1 residency training, and achieved BPS nutrition support certification. This holistic experience bridges knowledge gaps in the complexity of this patient population and transitions of care.

REFERENCES


DISCLOSURES

Authors of this presentation have the following to disclose concerning possible financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation: Johanna Bezjak: nothing to disclose; Stephanie Pancheri: nothing to disclose; Kayla Szabo: nothing to disclose; Rebecca Tokarski: nothing to disclose; David Benedict: nothing to disclose.