

Incorporating Common Educational Approaches to Help Pharmacists Improve Therapeutic Outcomes

Jeffrey A. Bates, PharmD, BCGP, FMPA
Associate Dean/Associate Professor
Cordillville University
School of Pharmacy
June 2017

Learning Objectives:

At the end of this activity, participants will be able to:

- ▶ Recognize **four learning styles** commonly seen in the American population
- ▶ Associate **specific tools** to help patients better achieve health outcomes
- ▶ Review varied **educational approaches** for specific, commonly seen pharmaceutical products

Impact of Non-Adherence:

- ▶ About 1/3 of All Rx's are Never Filled by Patients
- ▶ About 50% of All Rx's are Not Continued by Patients
 - ▶ Especially after 6 months of Therapy
 - ▶ Hypertension = 51% Non-Adherence
 - ▶ Statins = Up to 50% in 1st Year
- ▶ Non-Adherence → **-50% of Treatment Failures**
- ▶ **Cost per Year: \$390 Billion!**

Wadh J, McDonald K, Shojania K, et al. Quality improvement strategies for hypertension management: a systematic review. Medical Care 2009;44:646-67. Viswanathan M, Golin CE, Jones CD, Adams M, Bazzoli SA, Wilson PG, et al. Interventions to improve adherence to self-administered medications for chronic diseases in the United States: a systematic review. Ann Intern Med 2012; 157(11):787-795. Chaudhry 2011. N Engl J Med. Year 2009. J Manag Care Pharm. Script Your Future press release, November 2, 2011; accessed here: http://scriptyourfuture.org/wp-content/themes/ecommerce/release.pdf. http://scriptyourfuture.org/wp-content/themes/ecommerce/release.pdf. Osterberg 2005. NEJM. Ho 2009. Circulation Ho 2009. Circulation. Edmondson 2013. Br J of Health Psychology. George & Shalansky 2006. Br J Clin Pharm

The Large Gulf Between a Written Prescription and the Intended Treatment for the Patient

Patients are vulnerable to gaps or discontinuation at many points during treatment.

Source: NACDP

Outcomes Improve as Adherence to Prescribed Medicines Increases

Non-adherent diabetes patients were 2.5 times as likely to be hospitalized as those who followed their prescribed treatment.

Hospitalization Rate among Diabetes Patients by Level of Adherence to Oral Antihyperglycemic Medication*

* Adherent patients defined as patients with a "medication possession ratio" (i.e. the sum of the days of supply of prescriptions filled divided by the number of days in the year of 365 days).

Source: DT, Lacand GP, PhD

Provider Factors Influencing Patient Non-Adherence:

- ▶ Communication skills
- ▶ Knowledge of health literacy issues
- ▶ Lack of empathy
- ▶ Lack of positive reinforcement
- ▶ Number of comorbid conditions
- ▶ Number of medications needed per day
- ▶ Types or components of medication
- ▶ Amount of prescribed medications or duration of prescription

Haynes RB, Ackloo E, Sahota N, McDonald HP, Yao X. Interventions for enhancing medication adherence. Cochrane Database Syst Rev 2008;(2):CD005011

Effective Communication:

Key to Assuring Excellent Health Outcomes!




Effectiveness

Communication

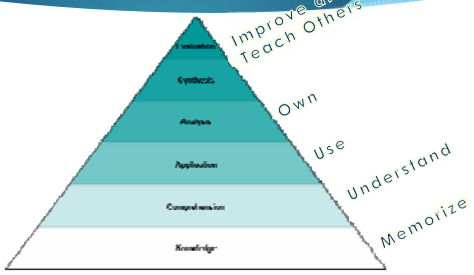
Rabinavongsa 2012 Arch Intern Med. | Brimley 2006 J Manag Care Pharm 12(3):299-305; Martin 2011 Am J Health Promot 26(6):372-378
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Bloom's Taxonomy

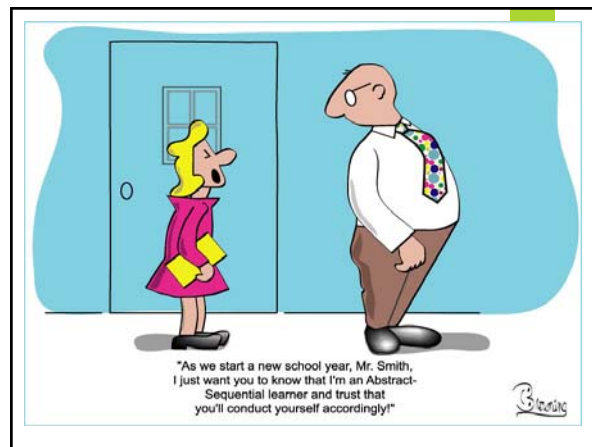


Bloom's Taxonomy of learning. Adapted from Bloom, B.S. (Ed.) (1956) Taxonomy of educational objectives: The classification of educational goals. Handbook I, cognitive domain. New York, Toronto: Longmans, Green.

Bloom's Taxonomy



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How Can This Approach Help?

- ▶ **Patient Understanding**
 - ▶ Recognize how each patient may learn differently
 - ▶ More effective **outcome results**
 - ▶ Pharmacist's Responsibility!!
 - ▶ Provider Status
 - ▶ Prevent Adverse Events
- ▶ **Pharmacist's Effectiveness**
 - ▶ Better understand our patient mix
 - ▶ How we can better tailor counseling approaches
 - ▶ Sequential vs Global
 - ▶ Incorporate more active-learning
 - ▶ Effective member of healthcare team

Eliciting an Emotional Response:

- ▶ **Fastest Learning When:**
 - ▶ **Inspire**
 - ▶ Demonstrate Admirable Qualities
 - ▶ **Infuriate**
 - ▶ Incite an Argument → Synthesis
 - ▶ **Scare**
 - ▶ Consequences
 - ▶ **Provide Experience**
 - ▶ Re-live it

Heath C, Heath D. 2007 Made to Stick: Why some ideas survive and others die. Random House

Repetition:

Most Require Exposure
4 to 6 Times
Before "hardwiring" occurs

Heath C., Heath D., 2007 Made to Stick: Why some ideas survive and others die. Random House

Focus on Learning Styles:

Visual Auditory Read/Write Kinesthetic

← Learning Styles →

http://www.enk-learn.com/learnstyle/index.asp (VARK - A Guide to Learning Styles)

Focus on Learning Styles Visual Learners Tools:

Pictures	Flow Charts	Diagrams	Graphs	Flash Cards
Symbols	Underlining		Highlighters	
Multi-Colored Pens				

Focus on Learning Styles Visual Learners Tools:

Creating Their Own Images
Reproduce them from memory

Condensing Notes
Review notes they create

Replacing Words With Symbols

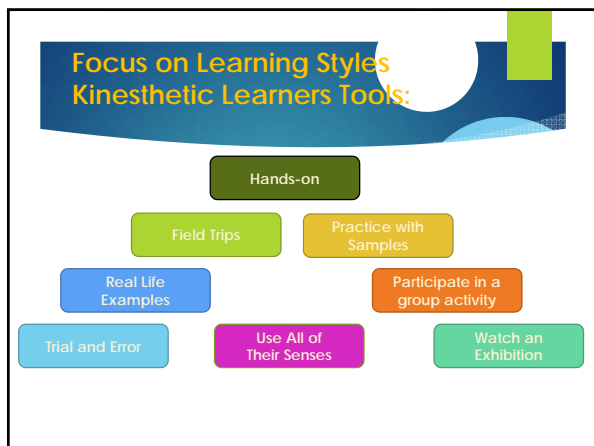
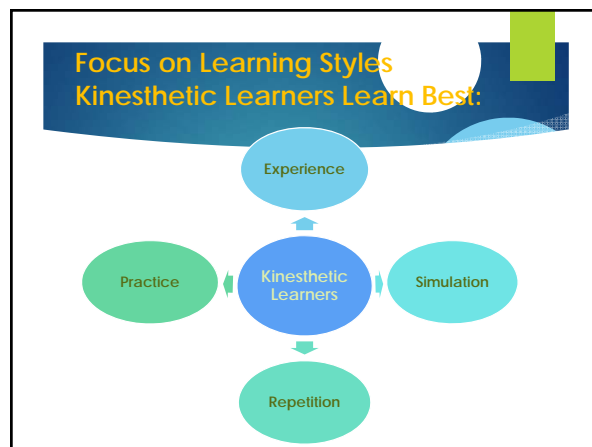
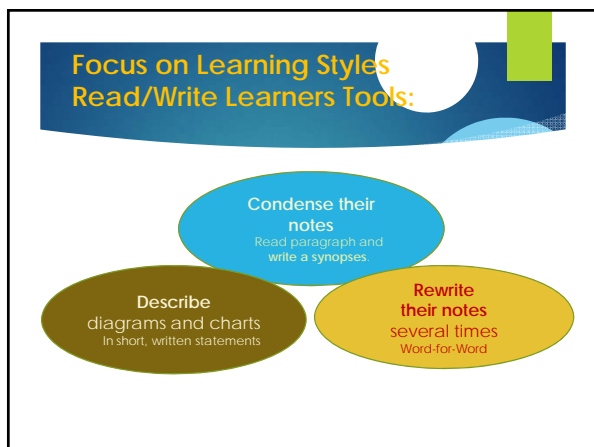
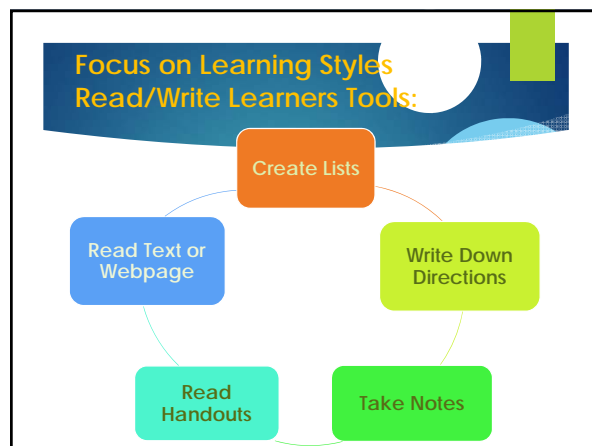
Focus on Learning Styles Visual Learners Tools → Caution!

- ▶ They...
 - ▶ Watch a Movie
 - ▶ View a PowerPoint Presentation
 - ▶ Review Someone Else's Notes

(The entire list is circled in red with a diagonal slash through it, indicating caution.)

Focus on Learning Styles Auditory Learners Tools:

Attend Class or Group Discussions		
Explain Ideas Out Loud	Listen to Recordings	
Retell Stories	Hear Self Speak	Webinars/Tutorials




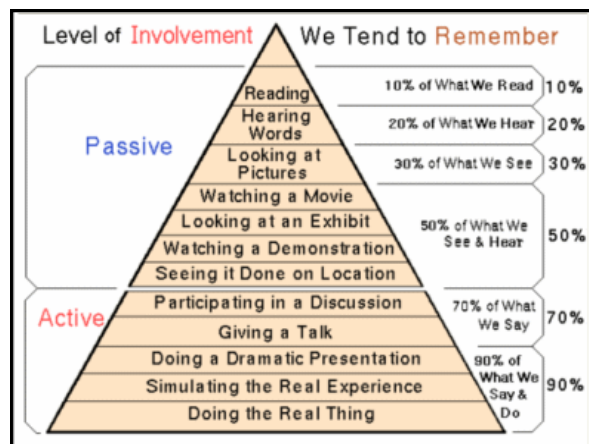
Focus on Learning Styles Global vs Sequential:

- ▶ **Global (Why?)**
 - ▶ Need "big picture" first
 - ▶ Easily confused by lack of context
- ▶ **Sequential (How?)**
 - ▶ Need "step-by-step" presentation
 - ▶ Easily confused by missing steps

Focus on Learning Styles
Global vs Sequential:

SHOW AND TELL

- ▶ **Active**
 - ▶ Need to participate for best learning
 - ▶ Difficulty relating without participation
- ▶ **Reflective**
 - ▶ Need to think through situation
 - ▶ Often linking to similar experiences

Application:

“Patient Counseling” on Bass Guitar

“Patient Counseling” for Bass Guitar

- ▶ **Step 1:** Please play the note on the top string at the 3rd fret (G). Then play the note on the second string at the 2nd fret (B). Then play the note on the second string at the 5th fret (D). Then play the note on the second string at the 2nd fret (B). Then play the note on the top string at the 3rd fret (G). Repeat this musical phrase again.
- ▶ **Step 2:** Now play the note on second string at the 3rd fret (C). Then play the note on the third string at the 2nd fret (E). Then play the note on the third string at the 5th fret (G). Then play the note on the third string at the 2nd fret (E). Then play the note on the second string at the 3rd fret (C). Repeat this musical phrase again.
- ▶ **Step 3:** Finally, play the note on the second string at the 5th fret (D). Then play the note on the third string at the 4th fret (F#). Then play the note on the third string at the 7th fret (A). Then play the note on the third string at the 4th fret (F#). Then play the note on the second string at the 5th fret (D).
- ▶ Go back to step 2 and just play it once.
- ▶ End by playing step 1 once but add a last note by playing the second string at the 5th fret.
- ▶ Repeat if you'd like. Good luck!

Application:

- ▶ **Teaching Bass Guitar vs Patient Counseling**
 - ▶ How do we **currently counsel** most of our patients?
 - ▶ Albuterol Inhaler
 - ▶ Advair Inhaler
 - ▶ Glucometer
 - ▶ Is this the **best way**?
 - ▶ For ALL of our Patients?
 - ▶ For ANY of our Patients?
 - ▶ For the Pharmacist?

Summary:

- ▶ **Pharmacists Must Lead the Way in Improving Patient Outcomes**
- ▶ **Understanding HOW We Learn:**
 - ▶ Improves Effectiveness of Communication
 - ▶ **Tailor Patient Learning Opportunities**
 - ▶ **Assure Optimal Effectiveness in Therapeutic Approaches**

Challenge:

Reflect on Your Usual Approaches to Coaching Patients

How Effective are These Approaches?

How Could These Improve?

What Two Changes Could You Implement Right Away?

Learning Styles Assessment:

Please complete provided learning styles assessment