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COMMENTARY

The Pharmacists' Patient Care Process and More

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The development and approval of the Pharmacists' Patient Care Process ("the Process") by the Joint Commission of Pharmacy Practitioners and incorporation of the Process into the 2016 Accreditation Council for Pharmacy Education Standards has the potential to lead to important changes in the practice of pharmacy, and to the enhanced acknowledgment, acceptance, and reimbursement for pharmacy and pharmacist services.[1,2] Colleges and schools of pharmacy can play a critical role in developing student abilities related to the Process within their pharmacy curriculum, leading to the full development and implementation of this Process by students, trainees and practitioners. The Process does not stand alone and should be considered as one foundation of patient care that is supported, supplemented, and complemented by other abilities.

A standardized, progressive, systematic approach across the curriculum is the best approach to effectively develop student abilities. The Process includes the development of abilities to Collect, Assess, Plan, Implement, and Follow-Up (Monitor and Evaluate), but also to then repeat the Process for each patient.[1] Each of those abilities is related to other knowledge, skills, and behaviors. Many, if not all, of these components require students to have sophisticated knowledge of drugs, diseases and disorders, and laboratory and other clinical studies in addition to informatics, critical thinking, and problem-solving skills. Professionalism, communication, education, interaction, cultural competence, and interprofessional abilities also are needed for successful implementation of the Process. Additionally, motivation, initiation, valuing, awareness, compliance, and other behaviors and attitudes of the affective domain are also key to effective implementation of the Process.

Development of the Process in students should include the development of a pharmacist-specific work-up as outlined in the foundations of prior patient care processes developed for pharmacists.[3-7] Students should develop a standardized approach to assessing, prioritizing, and resolving drug-related problems such as untreated conditions, appropriate drug selection, duplication of therapy, use of drugs without a condition or indication, over- or under-dosing, adverse effects or toxicity, allergic reactions, drug interactions, adherence, availability and access, cost, and outcomes expectations. Students also should be looking for the beneficial outcomes of drug therapy and pharmacy services with respect to patient understanding, disease and disorder prevention, and medication-associated efficacy and safety.

Finally, it is important to recognize that the Process includes the need for documentation. Recognizing that one answer will not meet everyone's needs, I strongly recommend that pharmacy students be taught and develop abilities to use at least a basic subjective, objective, assessment, and plan (SOAP) note format. It may be even more beneficial to consider the development of abilities to create full work-up SOAP notes in addition to specialty, targeted, or follow-up SOAP notes. The intent of the Process is not to replace the SOAP note, but rather to provide a process to enable students to have a systematic, pharmacist-specific process to affect patient care, including the ability to document their information, assessments, recommendations, referrals, and other actions.

In summary, we need to think beyond the Pharmacists' Patient Care Process as a new, single entity that will impact our curricula. Instead, we should be considering how to develop the Process as one of many inter-related foundations for the delivery of effective, evidence-based and outcomes-focused patient care by a pharmacist for today and the future.

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