

Whole-Person CMM at a Mental Health Clinic has Potential to Transform Young Lives

The Sandra Eskenazi Mental Health Center of Eskenazi Health, Indiana's first community mental health center, provides comprehensive inpatient and outpatient mental health services.

Their Sandra Eskenazi Mental Health Center PARC Clinic delivers CMM services to approximately 150 patients annually. The JWC Mental Health Center provides CMM services to roughly 500 patients annually. And the MHRC inpatient psychiatry unit provides CMM to about 30 patients per day, encompassing three treatment teams.

The PARC clinic provides care to first-episode schizophrenia and early psychosis patients (perhaps without a schizophrenia diagnosis yet); the average patient is about 21 years old. Patients can either self-refer to the clinic or are referred from other clinics and health care providers. The clinical pharmacist sees patients under a broad collaborative practice agreement (CPA) with clinic psychiatrists performing independent medication management.

The JWC mental health clinic provides care to adults with mental health disorders needing long-term interventions. In this clinic, the pharmacist operates under a CPA, overseeing transitions of care following inpatient hospitalization or new connections to care. This ensures the patient has an adequate supply of appropriate medications as a bridge to the first psychiatrist appointment. Patients are also evaluated for needed medication and metabolic monitoring, review of drug therapy regimens, dosing adjustments and the provision of medication refills.

Eskenazi Health also supports the expansion of clinical pharmacy services into new practice areas. By August 2020, Eskenazi Health will have a clinical psychiatric pharmacist providing CMM services in the Gender Health clinic, focusing on individualized, affirming treatment of transgender patients along with other care team members in family medicine and psychiatry.

The clinical psychiatric pharmacist practicing in the MHRC inpatient psychiatry service manages patients on three treatment teams (30 patients) on a daily basis. Collaborative care in this treatment setting is around a multidisciplinary team performing daily table and walk rounds with integrated interaction among the team members.

In addition, Eskenazi Health advocates for the importance of training future health care professionals, including medical, pharmacy and nursing students as well as psychiatry and pharmacy residents. There is also a post-graduate year two (PGY2) pharmacy resident in psychiatry who completes required and elective month-long and longitudinal rotations in psychiatric practice settings. Residency offers the opportunity to build skills under supervision, and pharmacy residencies at Eskenazi Health provide "soft skills," such as how to work on committees and within the administration. All of the past PGY2 psychiatric pharmacy resident graduates from Eskenazi Health/Purdue University are either board certified pharmacotherapy specialists or board-certified psychiatric pharmacists—often both. And most clinical pharmacists at Eskenazi are board certified in their area of practice.

AT A GLANCE

Eskenazi Health/Midtown Community Mental Health, Prevention and Recovery Center for Early Psychosis (PARC), Dr. James J Wright Mental Health Center (JWC), Postlethwait Mental Health Recovery Center (MHRC)

Person in charge: Carol Ott, Pharm.D., BCPP; David Butterfield, Pharm.D., BCPS, BCPP; Lindsey Anderson, Pharm.D., BCPS

Organization type: Mental health clinics within an integrated health system

Launched: 2009 (PARC)

Payment sources: Medicaid, Medicare, commercial

Funding sources: Patient assistance programs and grants, including the Eskenazi Health Foundation

Number of pharmacists: 1 (PARC), 1 (JWC), 1 (MHRC)

Number of sites: 3

Unique CMM patients served in last 12 months: About 150 (PARC), About 500 (JWC), About 30/day (MHRC)

Can patients self-refer? Yes

Notable findings:

- A CMM approach allows clinical pharmacists to meet a patient's mental and physical health needs.
- Collaboration with the mental health treatment team provides a "whole person" perspective and focus on individual patient needs and minimizing barriers to care.

Making a difference

Clinical pharmacists and residents at Eskenazi Health track a variety of data for the PARC and JWC clinics and outcomes for the MHRC clinic. Outcomes that are measured include assurance that patients can afford their medications, use of acute care services and transitions of care—which are an important part of the practice of Eskenazi’s clinical pharmacists. The MHRC clinical psychiatric pharmacist

notifies the outpatient clinical psychiatric pharmacist, at either PARC or JWC, when a patient is discharged. This provides these clinics with information regarding clinical status, medications at discharge, due dates for long-acting injections, insurance status, necessary laboratory monitoring and scheduled medication dose adjustments.

Success factors

Ott cited three factors contributing to the program’s success:

- 1. Climate of care at Eskenazi:** Across the organization, clinical pharmacists provide CMM and are integrated into nearly every treatment team. Many new clinical pharmacists have been added because of requests from treatment providers. Recent additions include ambulatory care clinical pharmacists, an opioid stewardship clinical pharmacist and a new clinical pharmacist outpatient position focused on the treatment of Hepatitis C.
- 2. Independent practice:** Broad CPAs allow clinical pharmacists in the outpatient treatment setting to make individualized drug therapy interventions without prior contact with the prescriber.
- 3. Access to data from EHRs in a streamlined way:** Eskenazi Health utilizes the EPIC EHR system, which allows access to broadly integrated medical records. Specific templates for clinical pharmacists have been built into the EHR with input from the pharmacy to provide medical information focused on integrated pharmaceutical care.

Lessons learned

- 1. Pharmacists are a jack of all trades.** Pharmacists are often required to step outside of “medication management.” Barriers to appropriate health care can take many forms, and CMM pharmacists need to be willing and able to “think outside the box”.
- 2. Patients can take control.** Motivational interviewing and shared decision-making is more important than pharmacists realize, and many lack experience with these tools which can be used to engage patients in their own care and give them responsibility for it. Patients with mental health disorders are as capable of making treatment decisions as other patients and should have that opportunity.
- 3. Individualized care matters.** It is important to have broad but specific knowledge of medications. That means being able to apply what you know to very individualized patient care issues.
- 4. CMM works.** The pharmacist can be successfully integrated into patient care teams to benefit both the treatment teams and the patient.
- 5. Multidisciplinary treatment teams.** The patient benefits when they are encouraged to be an active and engaged member of their treatment team. Multidisciplinary teams not only include various disciplines but also a variety of specialties. Family medicine, internal medicine, primary care, endocrinology, psychiatry, women’s health and others can all work together to provide evidence-based care that focuses on individual patient needs.



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