

Patient Adherence Challenging the CME Community



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Prepared By

IPMA
Practice-changing CME

UNIVERSITY OF
Cincinnati

UNIVERSITY
of VIRGINIA
HEALTH SYSTEM

Healthcare
Performance
CONSULTING

“Increasing the effectiveness of adherence interventions might have a far greater impact on the health of the population than any improvement in specific medical treatments.”

RB Haynes, Cochrane

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ACGME/ABMS Competencies

- Patient care
- Medical knowledge
- Practice-based learning & improvement
- Interpersonal and communication skills
- Professionalism
- Systems-based practice

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Overview

- *Integrated needs assessment surrounding adherence*
- *Funded by Pfizer*
- *Literature Analysis*
- *Interviews*
- *Focus Groups*
- *Qualitative assessment of current vs desired behaviors*
- *Barriers and readiness to change*
- *Meta-analysis of adherence*
- *So what...*
- *Curriculum on Adherence*

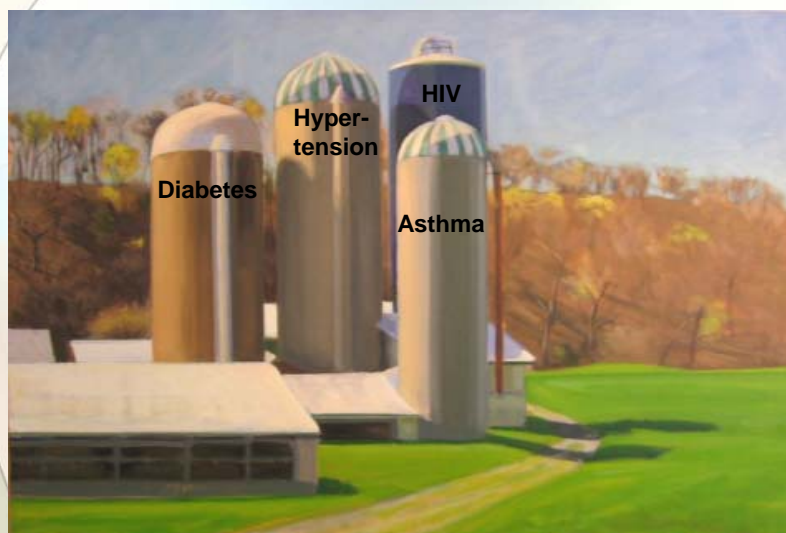
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Why Patient Adherence?

- Patient Adherence is a serious healthcare issue
- Not owned by any of the clinical areas
- Not a good stand alone CME topic
- Can drive up the cost of healthcare
- Can negatively impact patient outcomes
- Can foster new paradigm where CME providers are integrally involved in the development of content and educational design of CME activities

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Chronic Disease Areas Studied



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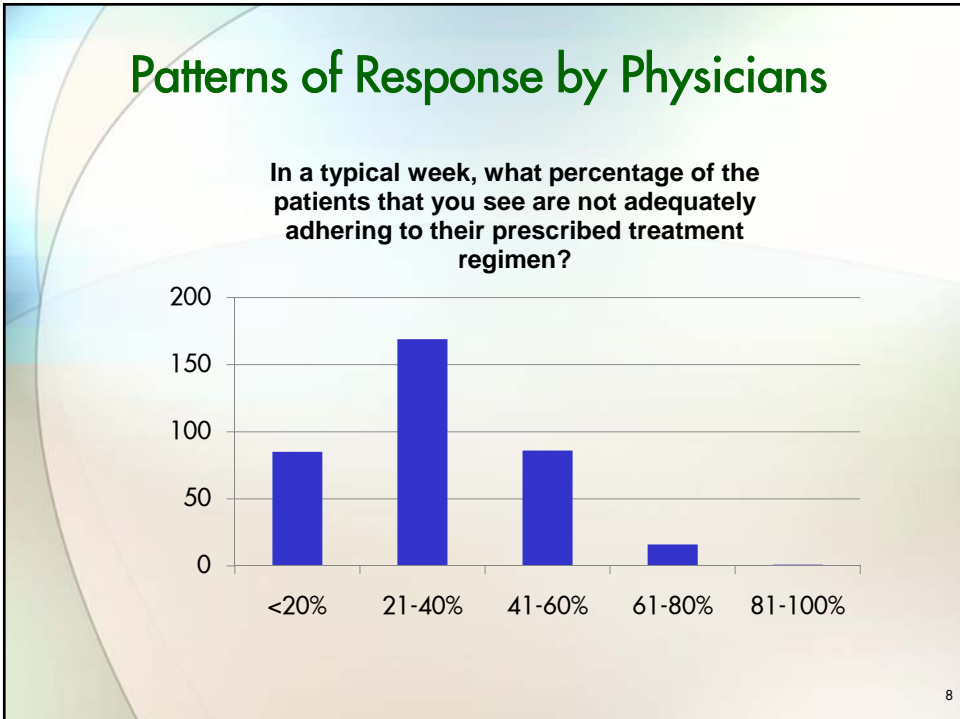
Literature

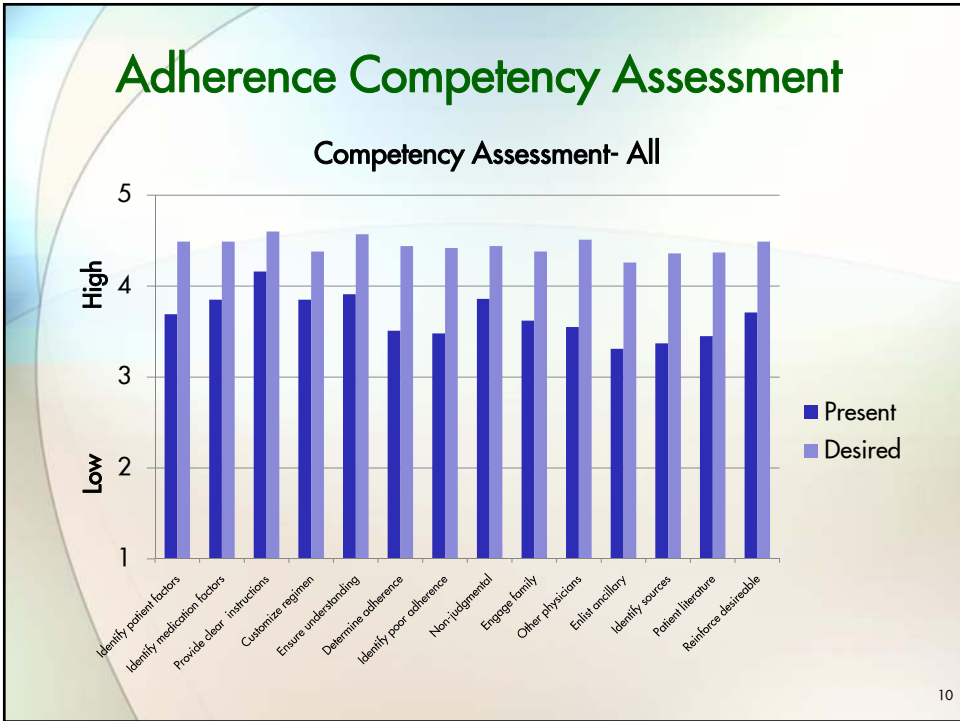
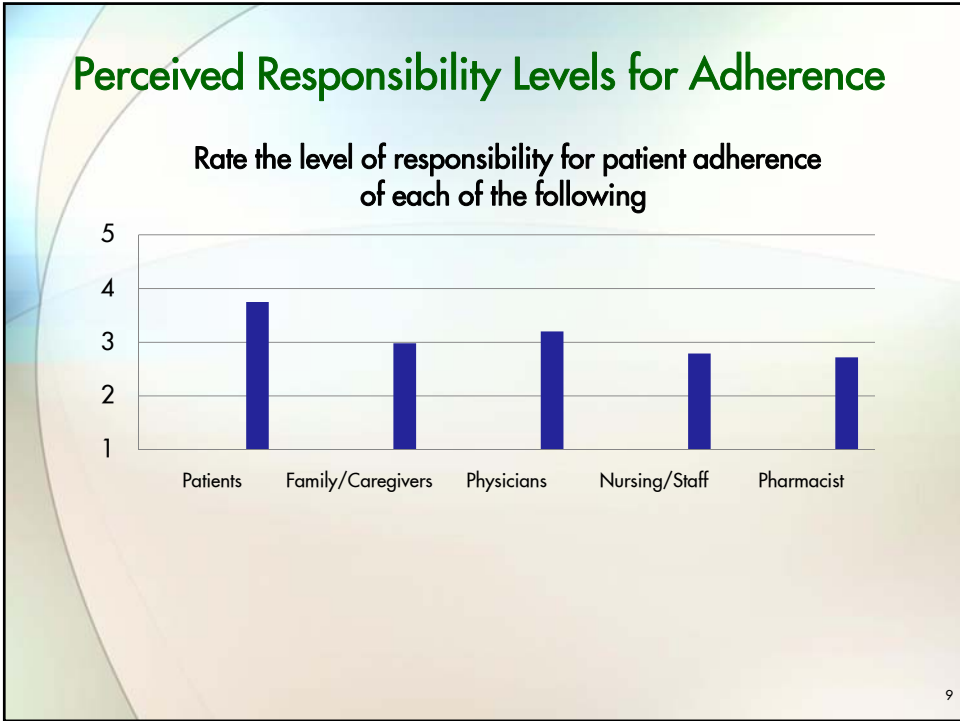
- Communication, understanding of both disease and benefit/risk of treatment
- Poor understanding of the proper
- Adapting current life situation to complex medication regimens

- Health system
- Inadequate knowledge of drug costs
- Inadequate understanding of formulary insurance
- Frustration in job setting

- Access to clinic appointments or resources
- Perceived poor treatment by staff
- Limited access to appropriate medication
- Changing and limited access to formularies
- High medication costs

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Key Competency Gaps (Perceived Needs)

- *High perceived needs*
 - Identify poor adherence in their patients
 - enlist ancillary healthcare providers to help patients comply
 - Identify resources that will help patients comply
- *Low perceived needs*
 - provide simple, clear instructions
 - Customize the regimen to improve adherence
 - Ensure understanding of instructions

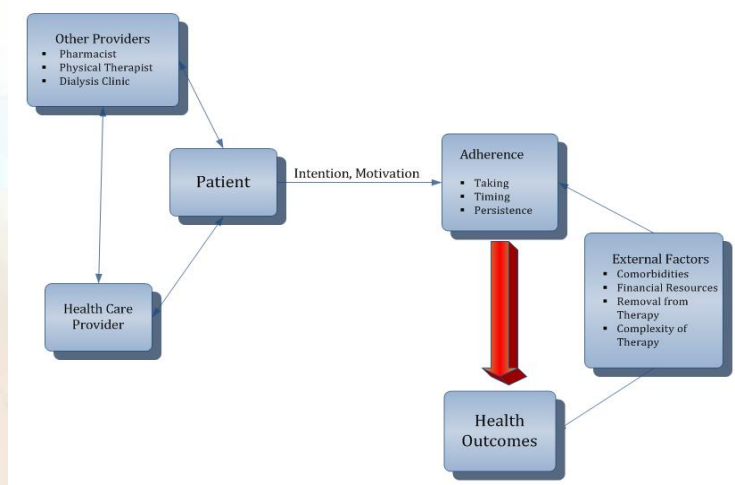
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Importance to the CME Community

- Adherence topics fit nicely into ALL ACGME/ABMS Competency Areas
- Gives CME providers an opportunity to develop education that goes beyond medical knowledge
- Adherence can address ACCME Criteria 16-22
- Content can assist CME providers to create Level 5 outcomes data
- Creates the need for CME providers to identify and embrace this professional gap and help to incorporate it into educational activities

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Model for Patient Adherence



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Aggregate Physician Barriers to Adherence in CME

- Not interested in talking about this topic
- Perceive adherence as a patient problem
- Don't believe that they are experts in Patient Adherence
- Requires the inclusion of multi-disciplinary experts from nursing, pharmacy etc,
- Don't perceive that they have enough time to change behavior re: adherence
- Already think that they are doing a good job

Strategies for Incorporating Adherence into CME activities- Educational Planning

- CME providers need to be at the table to encourage discussion of adherence
- CME providers need to identify the gaps and relate them to the clinical area (it fits in all of them)
- Creates an opportunity to discuss health care team strategies for effective patient management and improved outcomes
- Ask questions about what practices the experts utilize in their settings to facilitate patient understanding and appropriate compliance with recommended therapies
- Utilize the attached guide to questions about Adherence

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Your Educational Design

How would you integrate patient adherence into your educational strategies and activities?

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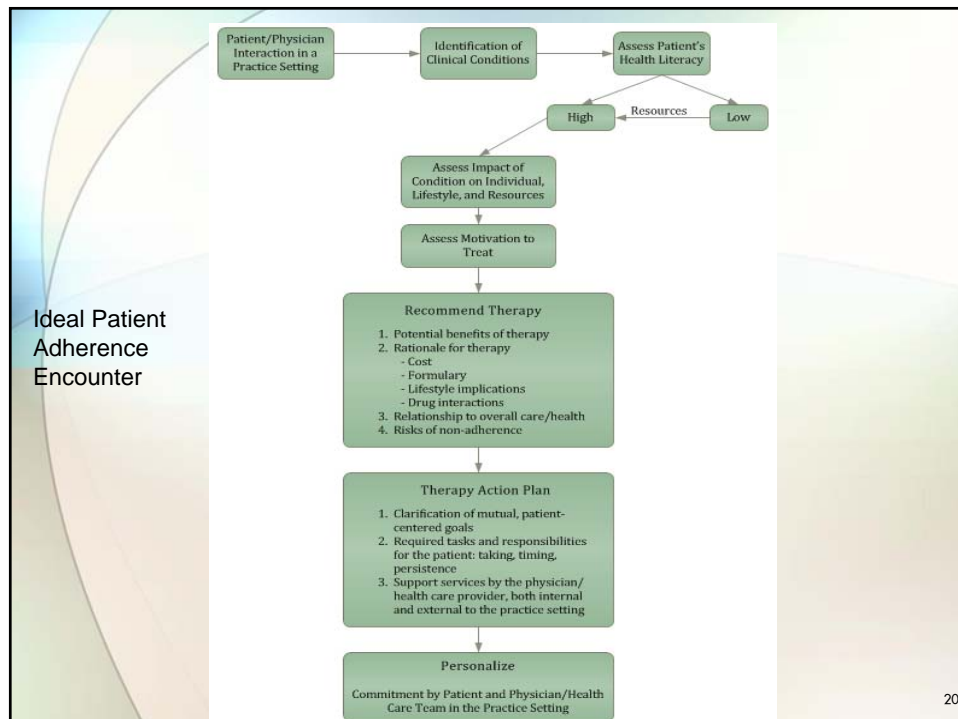
Educational Design- What does Adherence CME include- What to do?

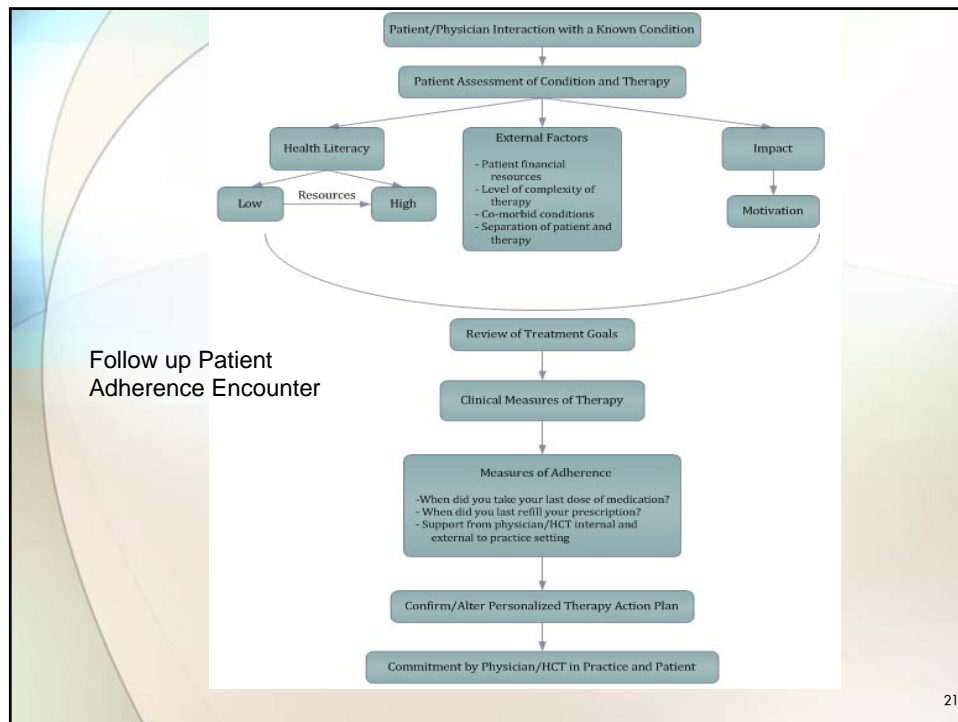
- Use multidisciplinary panels – highlight roles of healthcare team members in adherence
- Case Studies- add one or two questions in each case to encourage inclusion of patient adherence
- Help experts discuss strategies where they utilize their staff/healthcare to educate and reinforce understanding and overcoming barriers to patient adherence

Guide to Integration of Patient Adherence

Sample Questions to Guide CME Discussions

- Before the patient leaves the office, what does the patient/family need to know about the new therapy that you have prescribed?
- Who is responsible for communicating the plan of care and critical messages that are affected by patient adherence?
- How do you document the communication of these messages?
- Is there a mechanism for follow up with the patient either at the next visit or in the interim between visits?
- What information do you want to know when the patient returns to your office/setting for follow up?





Summary

- Incorporate competency based education
- Same rules apply- needs assessment is the first step
- Your experts might not be your experts anymore
- Systems thinking is key

www.ipmameded.org - under the needs assessment tab

Next Steps– An Invitation

- Participate in an dissemination and implementation project in Patient Adherence
 - Nine organizations needed to implement pilot projects in patient adherence CME projects
- OR
- Start small– ask experts to discuss strategies for improved patient adherence in CME- in panels, cases etc.
 - Talk to your hospitals, healthcare settings about examples where patient adherence works/doesn't work– incorporate in education