

The Sweet and Short to Complex Diabetes Care

The Impact of a Pharmacist on a Multidisciplinary Team

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CSHP 2015 Goal my story most aligns with:

Goal 2 – Increase the extent to which pharmacists help individual non-hospitalized patients achieve the best use of medications.

Objective highlighted:

Objective 2.1 – In 70% of ambulatory and specialized care clinics providing clinic care, pharmacists will manage medication therapy for clinic patients with complex and high-risk medication regimens, in collaboration with other members of the healthcare team.

Objective 2.2 – In 95% of ambulatory and specialized care clinics, pharmacists will counsel clinic patients with complex and high-risk medication regimens.

Imagine a diabetic patient with unstable glycemic control, frequent hospital admissions, financially challenged, food insecurity, living in a rural area where access to primary care is over an hour away, and decided to self-discontinue all their chronic medications because they felt they have been curbed-sided by the healthcare system.

These are common patients issues in the new program the Centre for Complex Diabetes Care (CCDC) in Peterborough, Ontario. The CCDC is an outpatient clinic located in Peterborough Regional Health Centre with a focus on complex diabetic patients. In order to meet these complex needs, a multifaceted approach was

adopted with a team comprising of a Nurse, Nurse Practitioner, Social Worker, Dietician, and a Pharmacist.

Goal 2 of CSHP 2015 is in alignment with the intention of having a Pharmacist on the team. Many patients have extensive medication therapy and it is the responsibility of the Pharmacist to manage drug therapy, monitor for adverse effects, provide consultations to community partners regarding medications, and empower patients through education and counselling.



Caption: Calvin Poon (Pharmacist) standing outside the reception area in the CCDC

A comprehensive medication review is conducted on 100% of our patients following their initial referral. Some of the most commonly recognized drug therapy problems include: optimization of diabetic pharmacotherapy, identification and resolution of drug side effects, and application for drug coverage for financially challenged patients. Findings are discussed with the team and a multidisciplinary strategy is coordinated.

100% of our patients receive ongoing counselling on the optimal use of their medications, such as insulin use technique and appropriate timing of medication administration. This is often conducted through a team-based approach where the skillsets of a Pharmacist is leveraged synergistically with other disciplines (i.e. having a Dietician discuss dietary changes to manage constipation and a Pharmacist recommending over-the-counter options).

The CCDC is into its second year since its inception and the program is rapidly expanding. The presence of a Pharmacist on the team enables an anchor for the team and patients with respect to pharmacotherapy management.