# EDUCATION GRANT SPOTLIGHT...





### Barbara Farrell, B.Sc.Phm., ACPR, Pharm.D., FCSHP

Clinical and Research Coordinator, Pharmacy Department, Bruyère Continuing Care; Scientist, Bruyère Research Institute and CT Lamont Centre for Primary Care Research; Assistant Professor, Department of Family Medicine, University of Ottawa; Adjunct Assistant Professor, School of Pharmacy, University of Waterloo

## "Applying Evidence-Based Medicine to the Elderly, Frail and Complex"

Barbara Farrell and co-applicant Candra Cotton received a CSHP Foundation Education Grant (Thematic Conference Development) of \$5,055 in 2014.

#### Q: What was your education project about? How did the concept/idea come about?

**A:** This project brought pharmacists, physicians and nurse practitioners together to learn collaboratively from experts in evidence-based decision making, Dr. James McCormack and Dr. Michael Allan of the Therapeutics Education Collaboration, about how evidence could be extrapolated (or not) to elderly, frail and complex patients. An evening workshop was followed the next day by site visits with small group discussions centred on particular patient cases. The idea for the expert site visit came about following successful expert site visits over the last decade. Such site visits, in which colleagues could discuss actual patient cases with experts in an inter-professional format, have been lauded as being more impactful than sending individuals to conferences and having them report findings back to their teams.

#### Q: What was the purpose of your educational project?

**A:** Specific objectives were that participants would be able to 1) confidently extrapolate drug therapy evidence from younger, healthier patients to elderly, frail and complex patients; 2) utilize strategies for safely stopping medications(based on evidence) to reduce pill burden and polypharmacy, and to decrease the risk of adverse effects; and 3) adopt new skills for working collaboratively with other clinicians and patients in the drug therapy decision-making process.

#### Q: What impact did your project have on your organization, department and/or pharmacist practice?

A: There were attendees from the inpatient units (rehab, complex continuing care) and two affiliated Family Health Teams, including the chair of the Department of Family Medicine at the University of Ottawa. All found the speakers to be excellent and the conversations stimulating. This event facilitated ongoing efforts to maximize interprofessional collaboration and to further the pharmacy department's relationship with the Department of Family Medicine. Involving health care professionals working in different environments within the organization facilitated communication about medication-related care, a common understanding of goals and consistent approaches to medication-related care for the elderly, frail and complex population.

#### Q: How will your education project impact patient care?

**A:** Workshop discussions focused on therapeutics in the frail elderly. Discussions during the Monday small group sessions allowed for input about individual patient situations. For several cases, this resulted in confirmation of current plans or alterations to medication-related care for those patients.

#### Q: Why is the CSHP Foundation important for pharmacist education?

**A:** The CSHP Foundation provides education support for pharmacists in a variety of ways. I worked with a junior colleague on the grant application process in a mentoring role; this allowed her to gain skills in grant application. The grant itself provided pharmacists with an opportunity they would not otherwise have had – to have workshop and one-on-one time with evidence-based care experts. By having the experts visit and opening up the session to other healthcare professionals we were able to support inter-professional education that served to facilitate collaborative relationship building.

The role of the hospital pharmacist is changing; research and education will support the change.