Joint Commission of Pharmacy Practitioners

The Joint Commission of Pharmacy Practitioners (JCPP) was established in 1977 and serves as a forum on matters of common interest and concern to national organizations of pharmacy practitioners and invited liaison members. JCPP Members are: the Academy of Managed Care Pharmacy, the American Association of Colleges of Pharmacy, the American College of Apothecaries, the American College of Clinical Pharmacy, the Accreditation Council for Pharmacy Education, the American Pharmacists Association, the American Society of Consultant Pharmacists, the American Society of Health-System Pharmacists, the National Association of Boards of Pharmacy, the National Alliance of State Pharmacy Associations, and the National Community Pharmacists Association.

Organizations participating on the Pharmacists’ Patient Care Process Workgroup include:

- Academy of Managed Care Pharmacy
- Accreditation Council for Pharmacy Education
- American Association of Colleges of Pharmacy
- American College of Clinical Pharmacy
- American Pharmacists Association
- American Society of Consultant Pharmacists
- American Society of Health-System Pharmacists
- Food Marketing Institute
- National Association of Chain Drug Stores
- National Alliance of State Pharmacy Associations
- National Community Pharmacists Association
Pharmacists’ Patient Care Process

The goal of high quality, cost-effective and accessible health care for patients is achieved through team-based patient-centered care. Pharmacists are essential members of the health care team. The profession of pharmacy is continuing its evolution from a principal focus on medication product distribution to expanded clinically-oriented patient care services. As a result of this professional evolution, the importance of, and need for, a consistent process of care in the delivery of patient care services has been increasingly recognized by the profession at large.

Pharmacists have unique training and expertise in the appropriate use of medications and provide a wide array of patient care services in many different practice settings. These services reduce adverse drug events, improve patient safety, and optimize medication use and health outcomes. Pharmacists contribute to improving patients’ health by providing patient care services as authorized under their scope of practice and facilitated by collaborative practice agreements. The foundation for the pharmacist’s patient care process is embedded within the pharmaceutical care model developed by Hepler and Strand in the 1990s. However, there is variability in how this process is taught and practiced. To promote consistency across the profession, national pharmacy associations used a consensus-based approach to articulate the patient care process for pharmacists to use as a framework for delivering patient care in any practice setting.

The pharmacists’ patient care process described in this document was developed by examining a number of key source documents on pharmaceutical care and medication therapy management. Patient care process components in each of these resources were catalogued and compared to create the following process that encompasses a contemporary and comprehensive approach to patient-centered care that is delivered in collaboration with other members of the health care team.

Pharmacists’ Patient Care Process

Pharmacists use a patient-centered approach in collaboration with other providers on the health care team to optimize patient health and medication outcomes. An essential first step is the establishment of a patient–pharmacist relationship that supports engagement and effective communication with patients, families, and caregivers throughout the process. In addition, at the core of the process, pharmacists continually collaborate, document, and communicate with physicians, other pharmacists, and other health care professionals in the provision of safe, effective, and coordinated care. This process is enhanced through the use of interoperable information technology systems that facilitate efficient and effective communication among all individuals involved in patient care. (Figure 1).

Using principles of evidence-based practice, pharmacists:

A. Collect
The pharmacist assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient. Information may be gathered and verified from multiple sources including existing patient records, the patient, and other health care professionals. This process includes collecting:

- A current medication list and medication use history for prescription and nonprescription medications, herbal products, and other dietary supplements
- Relevant health data that may include medical history, health and wellness information, biometric test results, and physical assessment findings
- Patient lifestyle habits, preferences and beliefs, health and functional goals, and socioeconomic factors that affect access to medications and other aspects of care

Figure 1: Pharmacists’ patient care process
B. Assess
The pharmacist assesses the information collected and analyzes the clinical effects of the patient’s therapy in the context of the patient’s overall health goals in order to identify and prioritize problems and achieve optimal care. This process includes assessing:

• Each medication for appropriateness, effectiveness, safety, and patient adherence
• Health and functional status, risk factors, health data, cultural factors, health literacy, and access to medications or other aspects of care
• Immunization status and the need for preventive care and other health care services, where appropriate

C. Plan
The pharmacist develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence-based and cost-effective. This process includes establishing a care plan that:

• Addresses medication-related problems and optimizes medication therapy
• Sets goals of therapy for achieving clinical outcomes in the context of the patient’s overall health care goals and access to care
• Engages the patient through education, empowerment, and self-management
• Supports care continuity, including follow-up and transitions of care as appropriate

D. Implement
The pharmacist implements the care plan in collaboration with other health care professionals and the patient or caregiver. During the process of implementing the care plan, the pharmacist:

• Addresses medication- and health-related problems and engages in preventive care strategies, including vaccine administration
• Initiates, modifies, discontinues, or administers medication therapy as authorized
• Provides education and self-management training to the patient or caregiver
• Contributes to coordination of care, including the referral or transition of the patient to another health care professional
• Schedules follow-up care as needed to achieve goals of therapy

E. Follow-up: Monitor and Evaluate
The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed. This process includes the continuous monitoring and evaluation of:

• Medication appropriateness, effectiveness, and safety and patient adherence through available health data, biometric test results, and patient feedback
• Clinical endpoints that contribute to the patient’s overall health
• Outcomes of care, including progress toward or the achievement of goals of therapy