

# Quality Standards and Practice Principles for Senior Care Pharmacists

## Preamble

The purpose of this document is to complement the current practice and professional standards of the American Society of Consultant Pharmacists (ASCP) and to provide guidance to the members of ASCP and other pharmacists engaged in Senior Care Pharmacy practice.

Senior Care Pharmacists (SCPs) are health professionals who assist older adults in making the best use of medications to attain the highest level of health and quality of life.

These Quality Standards and Practice Principles publicly state the elements that form the fundamental basis of the roles and responsibilities of SCPs and guide them in their relationships with clients/patients who are often a vulnerable, frail population, as well as with their families and/or caregivers and other health professionals as well as society at large.

The individual served by the SCP may be identified as a patient, resident, or client, depending upon the setting and context of care. Throughout this document, the term "client" will be used, although it is recognized that other terms may be appropriate.

## Quality Standard 1 -- Identifying the Client/Patient

The primary client/patient is the individual who receives Senior Care Pharmacy clinical services.

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### Practice Principles

- A. In many settings, the initial request for Senior Care Pharmacy clinical services is not made by the client/patient, but may originate with persons, organizations, or payor sources involved in the individual's care.
- B. With consent by the client, other individuals, who have an impact on the client's care, may participate in the Senior Care Pharmacy clinical services and are therefore considered part of the "client system." The "client system" is defined in this document as encompassing all people directly involved in the routine assistance and management of the client's health care, including, but not limited to physicians and other healthcare or

service professionals; family members; paid caregivers; friends or neighbors; community agencies; third party agents with fiduciary responsibilities; care managers and others.

- C. Since medical records are sometimes incomplete or inaccessible in outpatient settings, it is desirable and important to identify and secure collateral health information sources within the client system at the time of the initial consultation.

## Quality Standard 2 -- Promoting Self-Efficacy

SCPs recognize and respect the client's/patient's right of self-efficacy and self-determination and encourage them to participate in decisions about their health and care as appropriate, within the context of their situation. Whenever possible, recommendations should include education to promote health and wellness, as well as management of chronic illness.

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### Practice Principles

1. The SCP involves the primary client/patient and/or designated decision maker to the greatest extent possible when developing recommendations for medication therapy management.
2. The SCP has a responsibility to identify the client's wishes and preferences so that this information can be incorporated into the pharmaceutical plan of care. The SCP also identifies and clearly communicates potential risks associated with treatment alternatives to the client and/or designated decision maker.
3. The SCP respects personal and cultural differences amongst clients/patients and incorporates them into treatment plans.

## Quality Standard 3 -- Client/Patient Right to Privacy: Protecting Personal Health Information

The client's/patient's rights to privacy and protection of private health information (PHI) are clearly outlined in the federal Health Insurance Portability and Accountability Act (HIPAA). These rights also extend to the client system. Potential limits of these guidelines are communicated with the patient/client or their appointed decision-maker. The SCP complies with all laws and regulations governing PHI to protect the privacy of all healthcare information.

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### Practice Principles

1. The SCP may be required to share private healthcare information (PHI) and knowledge of the client's physical and mental status with others in order to provide comprehensive and accurate recommendations for medication therapy management. The SCP obtains a written consent from the client to release information, and also explains how the client/patient can get access to their individually identifiable health information.

2. The SCP maintains confidentiality and considers all parties who have an impact on the client/patient's care when assessing and communicating findings and sharing client information with others.
3. All information in a client/patient record is confidential. When client records are stored electronically, measures are implemented to prevent inadvertent disclosure of PHI. Encryption is recommended for email communications and maintenance of client/patient records on computers or other portable media storage devices. Security of paper documents, including discarded prescription labels, is also important and appropriate safeguards should be maintained to prevent inadvertent disclosure or loss.
4. The SCP has a responsibility to comply with all applicable state and federal regulations regarding use of PHI. The SCP develops procedures to ensure that the client's rights to privacy and confidentiality are appropriately protected. in regards to use or storage of paper or electronic healthcare information.
5. In case of conflict between parties, the SCP's goal is to facilitate discussion and education between involved parties. The SCP seeks advice of peers or others when unable to resolve issues, maintaining confidentiality.
6. The SCP conducts all communications with the client and/or appointed decision-maker in private settings.
7. The SCP has a responsibility to become knowledgeable about the common signs of abuse or neglect of vulnerable individuals and must abide by the laws of the state in which they are practicing regarding the reporting of elder abuse, neglect and exploitation.
8. The obligation of confidentiality is waived in situations when the SCP has determined or possesses evidence to support that the client may endanger or harm him/herself or others.

#### Quality Standard 4 -- Definition of Role

Each SCP should define his/her scope of practice and role. SCPs have diverse educational backgrounds and skill sets. The SCP should conduct their clinical practice in accordance with his/her knowledge, skills, and training.

The Senior Care Pharmacist:

- Takes responsibility for the medication-related needs of their patient/client.
- Ensures that the medications are the most appropriate, the most effective available, the safest possible, and are used correctly.
- Identifies, resolves and prevents medication-related problems that may interfere with the goals of therapy.
- Seeks to improve quality of care and promote wellness.

The SCP promotes the concept of interdisciplinary care when appropriate.

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#### Practice Principles

1. The SCP provides an explanation of his/her role and responsibilities to clients and others in the client system. When possible, the SCP also facilitates a discussion of the client's needs and expectations.

2. The SCP only accepts cases for which he/she has the skills, knowledge, training, and time necessary to provide adequate and appropriate services. If the situation falls outside these parameters, the SCP makes timely recommendations to appropriate referral sources.
3. Health care professional interns, residents and fellows may be involved in the provision of services when appropriate, but always under the supervision of a licensed and qualified pharmacist mentor.

## Quality Standard 5 -- Continuing Education

The SCP participates in continuing education programs to maintain and improve their clinical knowledge base and skills, as well as other important aspects of professional development.

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### Practice Principles

1. Board Certification (e.g., Certified Geriatric Pharmacist, Board Certified Pharmacotherapy Specialist, etc) is strongly recommended for all SCPs. Pharmacists still in training should consider residency or fellowship training in geriatric pharmacotherapy and/or geriatric pharmacy practice.
2. SCPs should attend continuing education programs and professional conferences within and outside of their area of specialization to maintain their skills and acquire new practice competencies.

## Quality Standard 6 -- Pharmaceutical Care Plans

The Pharmaceutical Care Plan is developed primarily to help the client/patient achieve the established goals of therapy for each of his/her medical conditions, illnesses or functional impairments/disabilities. The Pharmaceutical Care Plan considers the older person's changing physical and cognitive status over time. Constructing care plans is done in collaboration with the client/patient, other health care practitioners providing care to the patient and as needed, other members of the client system. The Pharmaceutical Care Plan includes findings, recommendations, goals and appropriate interventions to resolve drug therapy problems to meet these goals, and to prevent new drug therapy problems from developing.

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### Practice Principles

1. Communication with the client/patient includes assessing the client's general and health literacy.
2. The SCP delivers the Pharmaceutical Care Plan and all forms of written and spoken communications to the client and members of the client system at the appropriate level of general and health literacy, considering language congruence, vision and hearing deficits, physical limitations (eg aphasia), and cognitive functioning. Where necessary, language translation services (formal or informal) or other communication tools are incorporated into the dialogue between the SCP, client and client system during assessment as

well as during communication of information and plans, with the appropriate safeguards and/or consents in place to protect confidential and health-related information.

3. The SCP contributes to the client's continuum of care by interacting with other disciplines when appropriate and strives to coordinate the Pharmaceutical Care Plan between all of the client's identified health care providers in a collaborative and interdisciplinary manner.

## Quality Standard 7 -- Quality Services

The SCP is actively involved in assessing the quality of services he/she provides, as well as client outcomes resulting from the SCP's delivered services.

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### Practice Principles

1. The SCP considers measuring and analyzing individual client and population data to determine outcomes of care within his/her practice. This may include evaluating the cost of providing services and the economic and clinical outcomes of the services provided.
2. The SCP considers participating in peer review activities to assess and improve quality of services.
3. Whenever possible, the SCP contributes to the body of knowledge in geriatric pharmacy through publications in the medical literature and presentations at professional meetings.

## Quality Standard 8 -- Fees for Service

Fees for service are developed and billed at fair market value and in an ethical manner, reflecting a full representation of services delivered.

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### Practice Principles

1. All fees for Senior Care Pharmacy services are clearly stated in written form and discussed with the person(s) or organization responsible for payment prior to the initiation of services; and may include: initial evaluation, follow-up visits, consultation with other health care providers, etc.
2. The SCP maintains integrity in their billing practices, abiding by all applicable Medicare, Medicaid and insurance standards, as well as all other ethical standards regarding costs and billing.

## Quality Standard 9 -- Professionalism

The SCP designs his/her practice around high standards of professionalism. The SCP's first responsibility is to the client/patient and provides services based on the client's best interests, even if it conflicts with the interests of the SCP or others in the client system.

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### Practice Principles

1. The SCP has the responsibility to proactively promote the value of the profession of Senior Care Pharmacy.
2. Product selection and recommendations presented by the SCP represent the best option(s) for the client, taking into account all resources, preferences and skills available to the client and client system and are free of any undue influences.
3. The SCP respects the diversity of all individuals and does not promote or sanction any form of discrimination based on race, age, religion, ability, marital status, sexual orientation, sex or gender identity.
4. The SCP does not exploit professional relationships with the client and/or members of the client system. The SCP avoids giving or receiving gifts from the client or client system.
5. Advertising and marketing of services is provided honestly and accurately, using references when appropriate.
6. The SCP provides full disclosure of business, professional or personal relationships, when appropriate, in the context of his/her practice.
7. In the case where services must be terminated, the SCP provides reasonable notice and provides a written plan for the client to facilitate transition of care and services.

### Quality Standard 10 -- Legal Responsibilities

The SCP practice is conducted ethically in accordance with all local, state, and federal laws and regulations and business requirements.

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### Practice Principles

1. The SCP has a responsibility to understand and comply with all laws and regulations regarding the practice of pharmacy in the states where their practice is delivered.
2. The SCP maintains a pharmacy license in good standing and meet all other legal requirements to service the senior care population.
3. The SCP appropriate professional liability and business insurance.

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