



**Marilyn Stebbins, PharmD**

**Professor & Vice-Chair of Clinical Innovation, Department of Clinical Pharmacy,  
University of California, San Francisco**

Marilyn Stebbins completed her Pharm.D. at UC San Francisco School of Pharmacy in 1988. After the completion of her Pharmacy Practice Residency at the UC Davis Medical Center she spent 7 years developing and implementing pharmacist-run clinics at the VA Outpatient Clinic in Sacramento. As faculty in the School of Pharmacy since 1996, Dr. Stebbins' work has focused on developing innovative practice models in the physician group practice setting. Since the passage of the Affordable Care Act and the need for more community-based providers, her goal has been to extend her work in the physician group setting and to develop innovative team-based practice models in the ambulatory and community pharmacy setting as well as in transitions of care. Her current research interests are in comprehensive medication management and the role of the pharmacist on the care team in all care settings.



University of California  
San Francisco

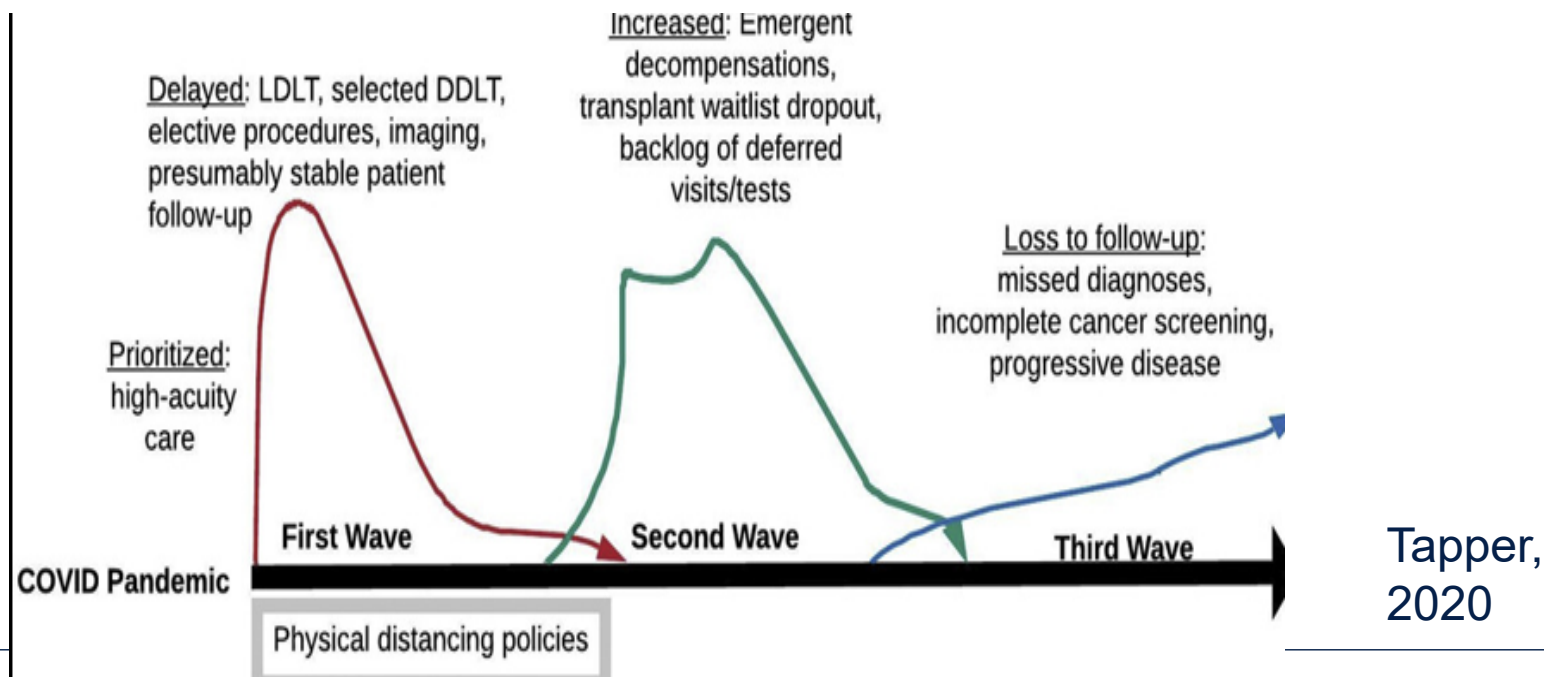
# Pharmacist on the Care Team:

## *A Focus on Interprofessional Telehealth*

Marilyn Stebbins, PharmD  
Professor of Clinical Pharmacy  
Vice Chair of Clinical Innovation  
UCSF School of Pharmacy

# “Second Wave” of pandemic

- Not just concern for second wave of Covid-19 cases
- Second wave of patients who have delayed care, have uncontrolled chronic diseases, and complications



# CoVID-19 Effects on Professional Students

- Rotations cancelled
- No patient care learnings during SIP
  - Lack of PPE
  - Lack of clinical sites
- Students eager to help in any way possible
- Clinics rolling out video visits and telehealth and discovering that patients are fearful of engaging healthcare during the pandemic.

# Learning Objectives

By the end of the rotation, students will:

- Engage in **inter-professional communication and collaboration** and practice specific communication skills (e.g., ISBAR)
- Perform medication reconciliation, identify medication interactions and side effects, provide medication counseling, identify strategies to improve adherence
- Review social determinants of health including access to technology and their impact on chronic disease in the context of a global pandemic
- Administer health screenings for depression, inter-personal violence, tobacco use
- Provide telephone outreach to vulnerable patient populations and coordinate PCP follow-up and provide counseling regarding COVID-19 prevention

# Zoom

- Decide on a meeting room and use the same throughout rotation
- Call patient from zoom using the “Invite” by phone option
  - Possible problem:
  - Patient may mistake call for scam, so you may have to call by phone first through Doximity Dialer and inform them that your team will be calling in 1 minutes to prepare you for visit.
    - Often the visit occurred via the phone as the patient wanted to begin the encounter right away and not engage the video.

# Student Workflow – Pre-visit BPMH/Screen

- **Start of Day 1:00-1:30**
- Pharmacy and Medical student meet via zoom with preceptors (Medicine and Pharmacy)
- Determine which patients to contact (choose 1-2 providers)
- Discuss any challenges/obstacles with preceptor
- Discuss topic in inter-professional education, chronic disease management

# Student Workflow - Outreach

- **Patient encounters 1:30-3:30**
- “We are checking in on you during this time to make sure you are OK and let you know that we would like to have a video visit follow up”
- What to do during call
  - Provide COVID 19 basics - <https://coronavirus.ucsf.edu/patients#>
  - Assess medication access and adherence
  - Assess barriers to management of chronic diseases
  - Acute medical issues. Consider - Depression/Anxiety, Food insecurity, Home safety/IPV
  - Address barriers to telehealth



# Student Workflow - Outreach

- **GOAL for all outreach: Arrange follow up visit**
- Document telephone encounter
  - “MS3 and P3 performed telephone outreach to this patient to provide basic information around prevention of COVID-19, assess medical needs during shelter in place. Issues requiring close follow up with PCP include:
    - Depression Screening
    - Medication Reconciliation
    - Interpartner violence screening
    - Please schedule follow up video visit for this patient with Dr. Huang or any provider in the next 1 week”
- CC chart to PCP and admin pool for scheduling

# Student Workflow

- **End of session Huddle 3:30-4:00**
- Students meet on zoom with faculty
  - Discuss cases
    - Highlight challenges, lessons learned
  - Return to learning points/didactic topic for reinforcement
  - Plan for following day

# Zoom Interprofessionalism



# Learnings from initial Pilot

- Although schools have simulated IPE activities through their curricula it did not actually highlight the skillsets of each professions
- Unclear what practicing at the top of their license meant until working interprofessionally
- New approach when working together on clinical teams in the hospitals
- Try to incorporate real patient scenarios earlier in the curriculum instead of simulations.
- Interprofessional telehealth is possible and can be made seamless to the patient.

# Quotes

- Telehealth is so important and I think this elective is a strong introduction to it.” (Pharmacy Student 2)
- “Usually we are responsible for the history and physical and meds are just one part of that; This helped me see the medications in the larger picture. It helps knowing what information is important to convey to my pharmacy colleagues.” (Medical Student)
- “This model (of care) helped me think about how we could work together in a team-based model, how we could work together to co-manage patients and achieve a goal.” (Pharmacy Student1)
- “This elective provided me with a true IPE experience where both professions were growing from our work and interactions from one another, something I felt that lacked during our first two years.” (Pharmacy Student 2)