



Patient Safety & Clinical Pharmacy Services Collaborative (PSPC)

PSPC Aim:

“Committed to saving and enhancing thousands of lives a year by achieving optimal health outcomes and eliminating adverse drug events through increased clinical pharmacy services for the patients we serve.”

WHAT? The Patient Safety & Clinical Pharmacy Services Collaborative (PSPC) is a new breakthrough effort to improve the quality of health care across America by integrating evidence-based clinical pharmacy services into the care and management of patients with chronic diseases. The Collaborative is a program of the Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

The Collaborative is an *action learning system* designed to rapidly improve patient outcomes and patient safety. Using this method adopted from the Institute for Healthcare Improvement, leading evidence-based practices are spread to teams of HRSA-funded providers and their community-based safety-net partners who serve large numbers of patients with multiple chronic conditions such as diabetes, obesity, and hypertension.

WHO? Driving the work of the PSPC are the 68 participating teams representing 210 organizations of community-based health care providers who are actively learning leading practices. Team members represent community health centers, poison control centers, hospitals, schools/colleges of pharmacy, Ryan White HIV/AIDS program grantees, primary care associations, state health departments and rural health clinics.

The Leadership Coordinating Council of the PSPC partners with HRSA and community-based teams to advance the goals of the Collaborative. The LCC is comprised of national leaders from professional organizations spanning multiple disciplines and key stakeholders who assist with publicizing the Collaborative and encouraging additional organizations to become involved. LCC members include representatives from agencies across HHS, such as FDA, CDC, NIH, AHRQ, AoA, IHS, and CMS, all of whom bring invaluable support to the effort.

HOW? PSPC uses a fast-paced, iterative improvement method designed to support the teams in testing and spreading leading practices found to significantly improve health outcomes and patient safety through the integration of clinical pharmacy services, improving these practices, and disseminating them widely through the collaborative learning system. Through an intensive series of Learning Sessions and Action Periods, PSPC teams learn the leading practices from expert national faculty and from each other as teams progress. During the Action Periods, which occur between each Learning Session, PSPC teams test, refine, adapt, and implement changes within their healthcare organizations. A national dashboard will help teams track monthly progress on multiple improvement measures, which include health outcome measures, clinical pharmacy services, and adverse drug events.

WHY? For patients with multiple chronic disease conditions taking multiple prescriptions, the lack of coordinated care across healthcare providers – primary care physicians, specialists, pharmacies, and emergency departments – has created an opportunity to make significant improvements in the safety and quality of care delivered. One result caused by this dynamic is that adverse drug events continue to be a leading cause of death and injury in the United States even though well-documented methods are available that could prevent their occurrence.

WHEN? The PSPC is in its first year and has convened three Learning Sessions – in August and December 2008, and May 2009 – during which teams learned how to make rapid improvements and shared information on successful practices, e.g., what changes are working and why. Learning Session 4 will be held the week of September 14, 2009. HRSA staff are exploring sites located outside of Washington, D.C. and location details will be provided when they become available.

THE FUTURE: Learning Session 4 will be the final conference for the first wave of PSPC teams. It will also serve as Learning Session 1 for PSPC 2.0, in which additional teams will enroll to continue the rapid spread of the leading practices found to most effectively improve patient safety and health outcomes. The goal is to build on lessons learned during the first year and expand PSPC 2.0 to a larger scale with even greater impact. PSPC 2.0 will begin in Fall 2009 and run through Fall 2010.

The Participation Package for PSPC 2.0 is now available! Please visit the website below to access the Participation Package and other enrollment materials. **The Participation Package and Team Organization Information Form must be completed and submitted to HRSA by July 31, 2009.**

INFO: www.hrsa.gov/patientsafety