

Program Outline:

**The Doctors' Rx
Program**

presented by

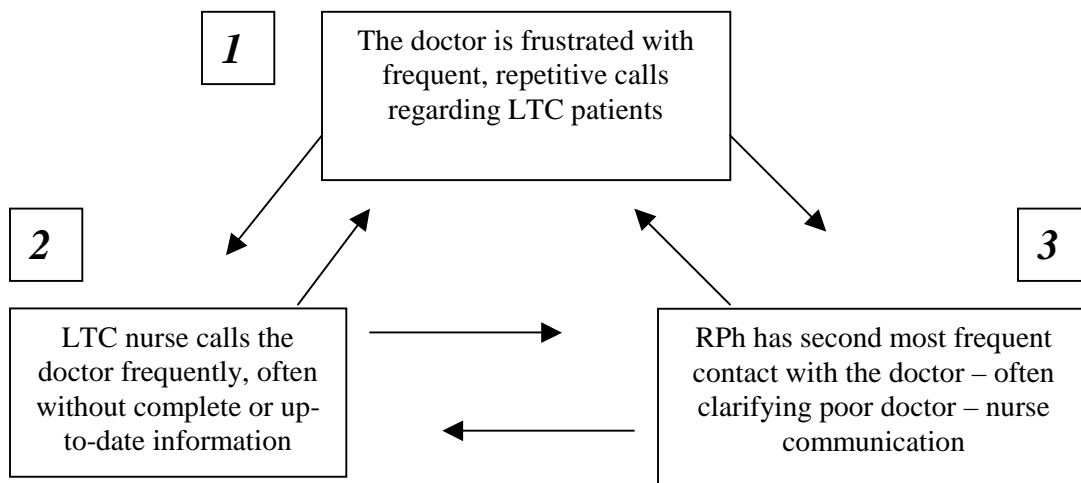
Stackpole & Associates

Background

Research has repeatedly shown that training programs meet the need to improve the working environment and relationships among doctors and other healthcare professionals working in the long term care (LTC) setting. Among doctors, nurses and pharmacists, there is evidence that this need is acute, specifically regarding *communications*, and that this need is not being addressed in a structured manner. The need for this is based on

- In the long term care (LTC) setting, 6% of the doctors care for 90% of the patients. These LTC specialists often care for hundreds of patients and employ nurse practitioners and physicians' assistants as 'physician extenders.'
- Doctors practicing in LTC are extremely frustrated with the communications dynamics with LTC providers (skilled nursing facilities), and pharmacists play a key role in this dynamic.
- Doctors' frustration and dissatisfaction with the communication dynamic in the long-term care setting is shared by the others groups involved, the LTC nurses and pharmacists.

The #1 problem is communication



The Solution:

The MD Rx Program measures doctors' behavior and perceptions first, then addresses communications problems by involving all three parties – the doctors, nurses and pharmacists – in a process of problem solving, training and coaching to re-engineer the communication dynamic.

The MD Rx Program presents opportunities for marketing messages to physicians by consultant pharmacists and pharmacy service providers. In the context of the improved attitudes among the affected physicians, these marketing messages will be more powerful than those delivered through traditional methods.

The Outcomes:

- Positively changing doctors' attitudes toward communications with SNFs affects relationships with LTC providers, consulting pharmacists and pharmacy service providers.
- Pharmacists are in a position to have an enormous impact on physicians' attitudes because of the frequency with which they have contact with physicians in the LTC setting.
- A well planned and implemented program of training and systems review will have a large, measurable effect on physicians' attitudes toward:
 - The long-term care providers;
 - The pharmacists, and;
 - The pharmacy service providers.

The Program Manager:

Stackpole & Associates is uniquely qualified to implement and manage the MD Rx Program. The company has over 10 years of experience working in long term care, designing and implementing ground-breaking research and training programs for SNF providers, pharmacy service providers, trade associations, state agencies and pharmaceutical companies. The firm specializes in designing and delivering market research as well as sales and customer service training to healthcare providers, and senior living organizations, throughout the United States. Stackpole & Associates guides clients through each phase of projects through the application of scientific marketing principles to create innovative and practical solutions to the challenges facing service-intensive organizations.

The goals of the Doctors' Rx Program are:

- Measurably improve the satisfaction of doctors, nurses and pharmacists with communications in the long-term care settings where they work
- Create positive associations to the pharmacy services provider as a result of this change
- Positively effect participating doctors' prescription patterns
- Improve resident care and its outcomes.

Program Outline

1. Baseline measurement of practice patterns, as well as the attitudes and perceptions of all three parties;
2. Review of existing 'transaction' communication procedures, and recruiting the support of doctors, nurses and pharmacists for positive change;
3. Training (1st of 2) of doctors, nurses and pharmacists (and others) regarding effective telephone, written and electronic communications;
4. Implementation of standard tools and protocols for transaction communications;
5. Training (2nd of 2) of doctors, nurses and pharmacists to review implementation and resolve final issues.
6. Evaluation of program outcomes through post-intervention measurements

Program Timetable

The estimated **Timetable** is:

MD Rx Program	1	2	3	4	5	6	7	8	9	10	11	12	13	14
<i>Estimated time in weeks</i>														
1. Baseline measures	■													
2. Review of procedures	■													
3. Training #1				⊕										
4. Implementation					■									
5. Measures #2												■		
6. Training #2													⊕	
7. Post program measures														■

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