

#### © Pharmaceutical Society of Australia Ltd., 2019

This Guide contain material that has been provided by the Pharmaceutical Society of Australia (PSA), and may contain material provided by the Commonwealth and third parties. Copyright in material provided by the Commonwealth or third parties belongs to them. PSA owns the copyright in this Guide as a whole and all material in the Guide that has been developed by PSA. In relation to PSA-owned material, no part may be reproduced by any process except in accordance with the provisions of the Copyright Act 1968 (Cth), or the written permission of PSA. Requests and inquiries regarding permission to use PSA material should be addressed to: Pharmaceutical Society of Australia, PO Box 42, Deakin West ACT 2600. Where you would like to use material that has been provided by the Commonwealth or third parties, contact them directly.

### **Contents**

Introduction	4
Phases of change implementation in pharmacy practice	5
My Health Record pharmacy implementation checklist	6
Appendix 1—Team meeting template	7
Appendix 2—My Health Record pharmacy success measures	8
Appendix 3—My Health Record pharmacy training resources and training plan template	9
Appendix 4—My Health Record pharmacy case studies and scenarios	10
Appendix 5—My Health Record pharmacy team communication and feedback template	12
Appendix 6—My Health Record pharmacy sustainability checklist	13
Change Implementation Guide authors and contributors	14
Acknowledgements	14
References	14



### Introduction

Implementing a change within your pharmacy can be a challenging task.

You have different team members with differing priorities, motivations, skill sets and views.

Training yourself and your team on the technical aspects of My Health Record is a challenge. However, ensuring that everyone has the same awareness, knowledge and commitment can be an even bigger hurdle.

For more information on the use of My Health Record, see the latest version of the Pharmaceutical Society of Australia's (PSA's) My Health Record Guidelines for Pharmacists.

The aim of this My Health Record Pharmacy Team Implementation Guide is to bring your team together, to enable them to collaborate, communicate and successfully

use My Health Record for the benefit of your patients and your pharmacy. This document aims to be a pragmatic guide to implementation, providing you with strategies and template examples that you may choose to use during your implementation of My Health Record.

This document was compiled using evidence from pharmacy practice implementation research<sup>1</sup>, from the feedback of pharmacists who are using My Health Record and from the most effective strategies used by change facilitators in pharmacy practice.<sup>2</sup>

Once you have decided to implement My Health Record in your pharmacy, go through the implementation checklist to take your teams through the change process in the most efficient and effective way.

# The phases of change implementation in pharmacy practice

The Framework for the Implementation of Services in Pharmacy¹ assists with implementing and evaluating professional services in pharmacy practice. This framework has formed the basis of many pharmacy change projects in Australia and Spain. A crucial part of the framework refers to the phases through which pharmacy teams can go when implementing a new service or innovation in pharmacy practice.

Some pharmacy teams may find the adoption of innovations such as My Health Record a simple change to their day's work. Others may find it a more daunting task, especially when there are large teams, different opinions, and different technical abilities and communication skills.

Whereas some team members may have the confidence to talk to patients about the benefits of having a My Health Record, other team members may not be aware of what the My Health Record system is, and may be caught off guard when asked about it by a patient.

This is why it is crucial to prepare your team by taking them through the following phases of implementation of My Health Record. In the implementation checklist (see page 6), the majority of activities lie in the Planning Phase, because preparing the team for change is the most crucial step in ensuring that the change is both accepted and successfully implemented.

This process is about building clarity, capability and confidence within the pharmacy, to make innovations such as My Health Record truly stick.

### **Phases of Implementation**

- The Planning Phase aims to prepare the pharmacy team for implementation of My Health Record.
- The Testing Phase creates a safe, controlled environment where teams can start testing their knowledge and the new workflow to accommodate use of My Health Record.
- The Operation Phase commences when all pharmacists have set up their access to My Health Record and the service is being implemented in the pharmacy.
- The Sustainability Phase involves integration and continued use of My Health Record, when all staff can answer any patient questions and pharmacists are optimising the use of the platform for the benefit of patients.

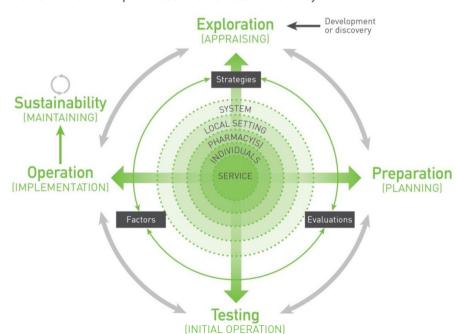


Figure 1. Framework for the Implementation of Services in Pharmacy<sup>1</sup>

## My Health Record pharmacy implementation checklist

Taking your pharmacy team through the change process from planning to sustainability of My Health Record (MHR)

### My Health Record pharmacy implementation checklist

PLANNING PHASE					
Access MHR pharmacy information Reason: To provide owners and pharmacists with knowledge of access to, and set-up of, MHR Useful resources: My Health Record in community pharmacy and My Health Record: what's in it for me, and my patients? for pharmacy-related MHR information	Register and set up MHR access Reason: To ensure that the pharmacy is registered, and pharmacists and other authorised pharmacy staff have access to MHR Useful resources: Access My Health Record using your clinical information system for set-up and access  Determine MHR success	Develop a robust security and access policy  Reason: To determine and document an overall plan, including who can access MHR within the pharmacy team and levels of access  Useful resources: MHR security and access policy template from PSA's Digital Health Hub	4 Conduct an 'MHR introduction' team meeting Reason: To create awareness of MHR implementation, address any concerns and involve the team in planning Useful resources: Appendix 1  - Team meeting template		
Champions  Reason: To support the team through the implementation process  Useful resources: Appendix 1 – Team meeting template	Reason: To provide the team with examples of success measures that create alignment and motivation towards a common MHR goal Useful resources: Appendix 2 – MHR pharmacy success measures	needs Reason: To ensure that each team member is trained on the software and soft-skills required to implement MHR successfully Useful resources: Appendix 3 – Training plan template	with training resources Reason: To ensure that team training needs are met, and each individual takes the time to upskill and fill knowledge gaps Useful resources: Appendix 3 and MHR resources for healthcare professionals for training resources		
		L			
TESTING PHASE					
1 Test knowledge during team training workshop  Reason: To ensure that everyone can apply the training in practice  Useful resources: Appendix 4 – MHR case studies and scenarios  2 Team role play  Reason: To test knowledge and workflow as if teams are speaking with customers  Useful resources: Appendix 4 – MHR case studies and scenarios  3 Create a communication and feedback loop  Reason: To ensure that all possible concern are addressed before full operation  Useful resources: Appendix 5 – Communication and feedback template					
	ı	<b>V</b>			
Decide on date for rollout of MHR  Reason: To ensure that all pharmacists have set up their profile within the dispensing software to enable uploading  Useful resources: Appendix 1 – Team meeting template  2 Track rollout feedback weekly, for the first 3 months  Reason: To ensure that confidence is building and concerns are met  Useful resources: Appendix 5 – Communication and feedback template					
•					
SUSTAINABILITY PHASE					
Tick off the sustainability checklist  Reason: To ensure that all staff are confident with MHR and pharmacists can easily discern when to refer to patient records  Useful resources: Appendix 6 – MHR sustainability checklist					

## **Appendix 1 - Team meeting template**

A pre-planned, structured, facilitated team meeting can create awareness, address any concerns and involve the team in planning implementation of My Health Record.

<u></u>		
ng template		
<ul> <li>Reason: To create awareness of the need for My Health Record and start creating buy-in from the team</li> <li>Resource:</li> <li>My Health Record: what's in it for me, and my patients?</li> <li>My Health Record: what's in it for me, my staff and my patients?</li> <li>Tip: Print this presentation for those who could not attend the meeting</li> </ul>		
<b>Reason:</b> To place teams in a positive frame of mind and start involving team members in the discussion		
Resource: Community pharmacy frequently asked questions		
<b>Reason:</b> To pre-empt concerns in a safe environment and provide a platform to discuss these openly and honestly		
<b>Tip:</b> Ask each person to write their concerns on post-it notes, in case people are hesitant to share		
<b>Reason:</b> To build a team of problem solvers and involve team members in creating solutions		
<b>Reason:</b> To ensure that all team members know that many resources are available to help them on this learning curve <b>Resource:</b> Appendix 3		
Reason: To become MHR advocates and provide support for the rest of the team when required  Tip: Allow individuals to put their hands up to volunteer. If they don't, as an owner or manager, put your hand up and ask who would like to support you		
<b>Reason:</b> To enable staff to become active consumers and develop empathy for patients, and to enable testing		
Reason: Because every pharmacy has a unique structure, you and your team need to determine ways to adapt workflow and processes  Strategy: One pharmacist suggested that laminated cards could be placed in a basket if any of the five key patient identifiers are missing		
<b>Reason:</b> Teams require benchmarking and recognition of progress. By agreeing on a success measure, teams will be more accountable for implementation of MHR. <b>Resource:</b> Appendix 2		

# Appendix 2 - My Health Record pharmacy success measures

Set success measures with your team to determine at what stage the pharmacy team is considered 'confident' in discussing and implementing My Health Record.

This type of measurement is subjective and difficult to quantify; the aim is to create aligned measures towards an overall common goal.

#### Success measure example 1

Success can be measured in relation to adequately addressed patient questions.

- 0-40% of questions are adequately addressed = low confidence
- 40-80% of questions are adequately addressed = moderate confidence
- 80–100% of questions are adequately addressed = high confidence

**Tip:** Teams may choose to keep a tally of questions asked and adequately addressed near the dispensary, which they can add to every time a patient asks a question regarding My Health Record.

#### Success measure example 2

Success can be measured in relation to the number of pharmacists who are confident in technical use of the software.

- 0-40% of pharmacists are highly confident in using the software = low confidence
- 40-80% of pharmacists are highly confident in using the software = moderate confidence
- 80–100% of pharmacists are highly confident in using the software = high confidence

**Tip:** To determine if there is an increase in confidence, ask each pharmacist to rate their level of technical capability and confidence when using My Health Record before the planning and training, and then re-evaluate this in the weekly checkins

#### Success measure example 3

Success can be measured in relation to individual team members' confidence levels.

- 0-40% of staff members are highly confident speaking about My Health Record = low confidence
- 40-80% of staff members are highly confident speaking about My Health Record = moderate confidence
- 80–100% of staff members are highly confident speaking about My Health Record = high confidence

**Tip:** To determine if there was an increase in confidence, ask each person to rate their level of knowledge of My Health Record and confidence in relaying this knowledge before the planning and training, and then re-evaluate this in the weekly check-ins.

"Research shows that goal-setting is one of the most effective change facilitation strategies.<sup>2</sup> It breaks down the big vision into incremental, achievable, aligned measures towards success".

Lydia Moussa, Founder of The Change Hub and PhD in organisational change implementation

# Appendix 3—My Health Record pharmacy training resources and training plan template

#### Training resources for My Health Record

- Pharmacy-related fact sheets and guides and pharmacy-related frequently asked questions
- Patient-related questions, information and case studies
- A webinar that outlines the features and benefits of My Health Record in pharmacy practices
- Continuing professional development e-learning training modules (once you have signed up to My Health Record online training)
- Software demonstrations and simulated training environment for Fred Dispense software—aim to teach you how the digital health features work in this software
- Support and training in how to use the My Health Record system in your software from your Primary Health Network
- Software vendors—will have a number of training guides and instructional videos available to support use of the software
- As mentioned in the team meeting template in **Appendix 1**, encourage team members to set up their own My Health Record to experience using it from a consumer's perspective.

My Health Record pharmacy training plan examples							
Name	Role	Attended meeting	All concerns addressed	Has MHR access (for Pharmacists)	Has received software training	Has received soft-skills training	Confidence with MHR application
Example 1							
Jennifer	MHR Champion 1 (Pharmacist)	Yes	Yes - during meeting and one-on-one with owner	No- awaiting HPI-I	Yes	Yes – one role play conducted	Medium - requires more soft-skills training
Example 2							
Michael	Pharmacy assistant	No - given presentation handout	Yes - one- on-one with MHR Champion	Not applicable	Not applicable	Yes- three role plays conducted	High - Knows how to deal with any patient question

"The only thing worse than training your employees and having them leave, is not training them and having them stay"

**Henry Force** 

# Appendix 4 - My Health Record pharmacy case studies and scenarios

#### The sceptical patient



**Scenario:** A patient comes into the pharmacy, and the pharmacist realises that one of their key identifiers is missing.

**Pharmacist:** Mrs Jones, it seems that your date of birth is not on our system. What is your date of birth, please?

Mrs Jones: Why do you need to know my date of birth?

**Pharmacist:** Well, this benefits you in a number of ways. First, it ensures accuracy of our records and that we have the right person. We are also connected to My Health Record and, to update the records, we need to input your date of birth. Please rest assured that we have a strict privacy policy that ensures that we only use this information to benefit you.

#### The hesitant pharmacist



**Scenario:** The pharmacist is unsure when to access My Health Record and is afraid of patients' reactions if she asks a sensitive question, so she simply doesn't access it.

**Strategy:** Reiterate that My Health Record provides a more complete picture of patients' health through timely access to their key health information. This enables safer care and assists pharmacists in making better clinical decisions. Outline the **benefits to the patient and the pharmacist** of using My Health Record.

**Note:** Ensure that the hesitance does not come from a lack of technical training. If it does, please refer to these **training resources.** 

#### The confronted pharmacy assistant



Patient: I hear that you can see all my medical history if you have My Health Record in your pharmacy.

**Pharmacy assistant:** Actually sir, only the pharmacists and authorised staff have access to your My Health Record, and we have a very strict privacy and access policy that determines who can access patient information and for what reasons. The system also tracks who accesses information, and we can generate a report to find out when information was accessed and by whom.

#### The unsure patient



**Scenario:** Patient comes to the dispensary asking for a painkiller for his headache.

**Pharmacist:** Hi sir, I just wanted to check if you have any allergies.

Patient: Yes, I do! I had a reaction to a painkiller once, but can't remember what it was called.

**Pharmacist:** Do you have a My Health Record?

Patient: Yes, I do.

**Pharmacist**: Great, I'll check to see if this is on your record.

Pharmacist finds out that the patient is allergic to non-steroidal anti-inflammatory drugs, so recommends paracetamol for his headache instead of ibuprofen.

#### The curious patient



Patient: I've heard about My Health Record, but don't know how it would benefit me and my family.

**Pharmacy assistant:** Well, it is a personal choice that you will need to make. The case studies that we've seen show that it has been beneficial in many situations. For example, it could save someone's life in an emergency situation if the person can't communicate their pre-existing conditions to the doctors. They can quickly look up the person's records and determine the best way to treat them. One case study of that sort was a patient with type 1 diabetes who was taken to hospital and couldn't speak, so they looked up her My Health Record and were able to find out what medications she was on and the most effective way to treat her.

Another case could be as simple as having all your information in one place, especially if you go to different doctors, specialists and pharmacies—My Health Record consolidates all your records in one place, so you can keep track.

I know lots of people worry about privacy, but the patient is the one who controls the access, and there are very strict privacy and access policies for all healthcare professionals.

#### The 'paper trail' patient



**Patient:** I've just been discharged from hospital and I just can't keep track of all my paperwork. I have X-rays, referral letters, discharge notes, prescriptions, and frankly I have no more room on my fridge!

**Pharmacy technician:** Well, have you tried putting all that onto your My Health Record? It allows your doctors, specialists, radiologists and even pharmacists to store all those documents for you digitally in the one place, so that you can stop carrying it all around and trying to keep track of it all.

You can assign who has access to your documents; you can make updates to your details; and you can take back all that room on your fridge for the things that you really want to see, like pictures of the kids.

#### The worried mum



**Scenario:** A mum comes into your pharmacy, really upset. You ask her what's wrong, and she says that her 1-year-old has just been diagnosed with multiple allergies, including allergies to certain antibiotics. The problem is that the list is so long and she's afraid she's not going to remember it. She also asks for a bracelet that she can permanently put on her 1-year-old in case there's an emergency situation and she's not close by.

#### What is your recommendation?

**Option 1:** Recommend a bracelet, which may be uncomfortable for the child, may come off and will still not have enough space to list all the allergies.

**Option 2:** Recommend that she puts all her child's notes onto My Health Record and assign herself and other family members as emergency contacts. Whichever hospital the child goes to, they will be able to quickly contact her for access, and check the child's uploaded records for allergies and existing medical conditions.

#### The 'in-control' patient



**Scenario:** A patient questions why their dispensing records are being uploaded to My Health Record if they have never asked you to do so.

**Pharmacist:** This is a very important point. When you activate your My Health Record, pharmacists have your consent to upload records, so that they can provide you with optimum care. As a patient, you have the ability to discuss your dispensing record upload and withdraw consent at any time.

# **Appendix 5 - My Health Record pharmacy team communication and feedback template**

The aim of this communication and feedback template is to ensure that every team member is aware of the implementation plan of My Health Record and that everyone receives the same message. This type of thorough communication ensures that the entire team are aligned towards implementing the same objectives.

My Health Record communication template			
Available communication forums	Example messages sent on this forum		
Weekly face-to-face meeting	A meeting organised for (insert date). Attendees: John, Mariam, Saleh, Diana, David		
Communication book	Mariam has printed out the presentation from the meeting and pasted in communication book		
Weekly pharmacy email to staff	An email was sent to all staff containing the presentation from the meeting and the team discussion summary		
Text messages	A follow up summary message was sent to all staff members letting them know to check their email and the communication book for My Health Record communications		
One-to-one communication	MHR Champions have spoken to 5 of the staff members face to face; need to speak to Andrew, Sylvia, Shaun and Claudia		

My Health Record feedback template					
Check-in date	Feedback from	Feedback comment	Response from	Response/actions	Outcomes
Week 1 check-in	Pharmacist: John	Not sure how to get my Healthcare Provider Identification for Individuals (HPI-I)	MHR Champion: Jennifer	Please check Healthcare Identifiers Service—how to get your HPI-I for instructions and let me know if you need further assistance	Checked the link and received the HPI-I
	Pharmacist: Mariam	Not sure how to use the software	MHR Champion: Michael	Check Clinical software summary sheets for dispensing software summary sheets. We can contact our Primary Health Network's Digital Health team to provide us with training	A person came and trained the pharmacists on how to use the software
Week 2 check-in	Pharmacy assistant: David	Was asked a few questions by patients that I didn't know the answer to	Pharmacist: John	Will role-play through Appendix 4 scenarios to increase confidence	Role-played and is now much more confident

"The problem with communication is the illusion that it happened"

George Bernard Shaw

# **Appendix 6 - My Health Record pharmacy sustainability checklist**

Ensuring that all team members are confident in their explanations and use of My Health Record increases alignment and consistency in patient care within your pharmacy.

My Health Record pharmacy sustainability examples				
My Health Record success measure	Confidence level	Follow-up		
Pharmacy assistants can answer patient questions about My Health Record	High	None required		
Pharmacy technicians are able to confidently ask patients about any missing key identifiers, as flagged by the pharmacist	High	None required		
Pharmacists can confidently speak to, and liaise with, other healthcare professionals regarding patients' My Health Record				
Pharmacists can confidently log into My Health Record on their software and easily navigate through the software				
Pharmacists know when access to My Health Record is required to improve patient care				
Pharmacists are able to answer any questions that patients have about My Health Record				
Patients who regularly visit the pharmacy are comfortable and confident with use of My Health Record to optimise their own care				

"Sustainability is a phase in the process of a professional pharmacy service, in which the service previously integrated into practice during the implementation phase is routinized and institutionalized over time to achieve and sustain the expected service outcomes<sup>3</sup>"



### **Change Implementation Guide authors and contributors**

#### Author

Lydia Moussa—PhD in organisational change implementation and founding director of The Change Hub.

Lydia is a change implementation specialist and pharmacist whose doctorate explored the most effective strategies to implement innovations in organisations.

By combining research and experience, Lydia and her team are able to use evidence-based practice to design change implementation frameworks, while creating a culture that embraces change and makes it stick.

#### Pharmaceutical Society of Australia Digital Health project team

- Jan Ridd
- Tracy Leung
- Emma Abate
- Daniela Gagliardi

#### • Pharmacist insights, challenges and strategies

- Amanda Seeto
- Rachelle Cutler
- Daniel Nasri

### Acknowledgements

Change implementation research contributors

- · Lydia Moussa (PhD Candidate)
- Professor Shalom (Charlie) Benrimoj
- Dr Victoria Garcia-Cardenas
- Dr Joanne Moullin
- · Dr Alison Roberts
- Carmen Crespo-Gonzalez (PhD Candidate)
- · Laura Wilson

#### References

- Moullin JC, Sabater-Hernández D, Benrimoj SI. Model for the evaluation of implementation programs and professional pharmacy services. Res Social Adm Pharm 2016;12(3):515–22.
- Moussa L, Garcia-Cardenas V, Benrimoj SI. Facilitation strategies used in the implementation of innovations in healthcare practice. Journal of Change Management (accepted, awaiting publication in 2019).
- Crespo-Gonzalez C, Garcia-Cardenas V, Benrimoj SI. The next phase in professional services research: from implementation to sustainability. Res Social Adm Pharm 2017;13(5):896–901.



#### PHARMACEUTICAL SOCIETY OF AUSTRALIA LTD.

ABN 49 008 532 072

#### NATIONAL OFFICE

Level 1, Pharmacy House 17 Denison Street Deakin ACT 2600

PO Box 42

Deakin West ACT 2600

P: 02 6283 4777 F: 02 6285 2869 E: psa.nat@psa.org.au

**BRANCH CONTACT DETAILS** 

P: 1300 369 772 F: 1300 369 771

#### **AUSTRALIAN**

#### CAPITAL TERRITORY

Level 1, Pharmacy House 17 Denison Street Deakin ACT 2600

PO Box 42

E: act.branch@psa.org.au

#### NEW SOUTH WALES

32 Ridge Street North Sydney NSW 2060 PO Box 162 E: nsw.branch@psa.org.au

#### QUEENSLAND

Level 2, 225 Montague Road West End QLD 4101

Woolloongabba QLD 4102

E: qld.branch@psa.org.au

#### SOUTH AUSTRALIA

Suite 7/102 Greenhill Road Unley SA 5061 E: sa.branch@psa.org.au

#### **TASMANIA**

161 Campbell Street Hobart TAS 7000 E: tas.branch@psa.org.au

#### **VICTORIA**

Level 1, 381 Royal Parade Parkville VIC 3052 E: vic.branch@psa.org.au

#### **WESTERN AUSTRALIA**

21 Hamilton Street Subiaco WA 6008 E: wa.branch@psa.org.auu

