

**DIABETES DISEASE STATE MANAGEMENT
COMPETENCY ASSESSMENT for PHARMACISTS**

Employee Name:

Rating Period:

1	2	3	4	5	6	7	8	9
Competency Expectation	Initial Training Method*	Comp F/P/N **	Development Plan* (As applicable)	Plan Comp Date	Supervisory Comments	Date Assessed	Assess Code ***	Comp F/P/N **
CLINICAL PROBLEM SOLVING, JUDGMENT, AND DECISION MAKING Demonstrate knowledge and application of disease state guidelines and current literature in the following areas:								
Demonstrates knowledge and understanding of the most recent DM guidelines	<ul style="list-style-type: none"> • ADA Diabetes Standards • AACE Guidelines 							
Able to establish glycemic goals based on guidelines and patient specific factors.								
Demonstrates the ability to ask open-ended questions and can provide appropriate follow-up questions when clarification is needed.								
Demonstrates ability to obtain an accurate medication history that includes a thorough assessment of med adherence								

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Demonstrates appropriate knowledge of insulins and is able to initiate and adjust insulin regimens <ol style="list-style-type: none"> 1. Basal/Bolus (fixed dose or flexible dosing) 2. Mixed Insulin regimens 3. Once daily intermediate or long acting insulin 4. Continuous subcutaneous insulin infusion(if seeting requires) 								
COMMUNICATION AND EDUCATION								
Educates all new patients initiated on diabetes medications including insulin: Side effects, efficacy, prescribed dosage, administration, timing/frequency <ol style="list-style-type: none"> 1. Missed/delayed doses 2. Storage 3. Travel 4. Safety 	AADE7™ http://www.diabeteseducator.org/ProfessionalResources/AADE7/							
Educates patient as required on diet, drug interactions, exercise, self-monitoring, management of hypoglycemia and hyperglycemia, and adherence								
Educates patient on how to use glucose meter								
Communicates effectively								
Ability to counsel patients on all diabetes medications								

Diabetes Standards 2014:

http://care.diabetesjournals.org/content/36/Supplement_1/S11.full.pdf+html

AACE Diabetes Guidelines:

<https://www.aace.com/files/dm-guidelines-ccp.p>

**HYPERTENSION DISEASE STATE MANAGEMENT
COMPETENCY ASSESSMENT for PHARMACISTS**

Employee Name:

Rating Period:

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Competency Expectation	Initial Training Method*	Comp F/P/N **	Development Plan* (As applicable)	Plan Comp Date	Supervisory Comments	Date Assessed	Assess Code ***	Comp F/P/N **
PATIENT ASSESSMENT SKILLS								
Demonstrates knowledge and understanding of the most recent HTN guidelines	AHA Guidelines http://circ.ahajournals.org/cgi/reprint/115/21/2761 JNC 7 http://jama.jamanetwork.com/article.aspx?articleid=196589 JNC 8 http://jama.jamanetwork.com/article.aspx?articleid=1791497							

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Ability to recognize and treat hypertensive urgencies- Know when to refer patients to the ED	Cleveland Clinic Review/Algorithm for Hypertensive Crisis http://www.clevelandclinimed.com/medicalpubs/diseasemanagement/nephrology/hypertensive-crises/							
PROVIDES PATIENT EDUCATION								
Educates all new patients initiated on HTN medications including: Side effects, efficacy, prescribed dosage, administration, timing/frequency, potential drug interactions								
Educates patient as required on diet, drug interactions, exercise, self-monitoring and adherence								
Educates patient on how to use home blood pressure monitor								
Communicates effectively								
Ability to counsel patients on all hypertensive medications								

AHA Guidelines:

<http://circ.ahajournals.org/content/115/21/2761.full.pdf+html>

JNC 7 & 8 Guidelines:

<http://jama.jamanetwork.com/article.aspx?articleid=196589>

<http://jama.jamanetwork.com/article.aspx?articleid=1791497>

VA/DOD Guidelines: Currently being updated

<http://www.healthquality.va.gov/htn/>

http://www.healthquality.va.gov/htn/htn04_pdf1.pdf

INITIAL DYSLIPIDEMIA COMPETENCY ASSESSMENT for PHARMACISTS

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PATIENT ASSESSMENT SKILLS								
Demonstrates knowledge and understanding of the most recent dyslipidemia treatment guidelines	<ul style="list-style-type: none"> VA/DoD 							

Demonstrates ability to determine patient's cardiovascular risk and set treatment goals based on current treatment guidelines and individualized patient information	Clinical Practice Guideline for the Management of Dyslipidemia <ul style="list-style-type: none"> • 2013 ACC/AHA Cholesterol Guideline • ATP-3/NCEP Guideline for Triglycerides Management • AACE Guidelines 								
Demonstrates appropriate assessment of laboratory values including, but not limited to: lipid panel, apolipoprotein B, metabolic profile, thyroid panel, liver panel, creatinine kinase, etc...									
HYPERLIPIDEMIA TREATMENT SKILLS									
Understands and implements appropriate individualized diet and exercise regimens including DASH diet and Mediterranean diets.	<ul style="list-style-type: none"> • 2013 ACC/AHA Cholesterol Guideline • ATP-3/NCEP Guideline for Triglycerides Management • 2013 ACC/AHA Guideline on Lifestyle Management 								
Understands how to modify cardiovascular risk and minimize adverse drug events through the initiation, monitoring, and adjustment of appropriate-intensity statin therapy									
Demonstrates ability to address ADEs associated with statin treatment including dose and frequency adjustments, therapy discontinuation, medication substitutions, and patient education									
Demonstrates appropriate knowledge of nonstatin therapies, when to initiate treatment, when to modify treatment, and how to manage treatment-related ADEs									

PROVIDES PATIENT EDUCATION								
Educates all new patients initiated on statin and non-statin therapy regarding expected efficacy, potential adverse drug events and interactions, prescribed dosage, administration, and timing/frequency of doses								

<p>Demonstrates ability to perform the following:</p> <ol style="list-style-type: none"> 1) Interview patient <ol style="list-style-type: none"> a. Asks open-ended questions b. Obtains accurate medication history 2) Determine patient compliance with regimen 3) Determine dietary impact/alcohol 4) Determine any signs and symptoms of bleeding 5) Determine any signs and symptoms of reoccurrence of thrombotic or embolic event <p>B. Maintains appropriate patient follow up C. Maintains appropriate documentation in coag program</p>								
<p>Demonstrates ability to:</p> <ol style="list-style-type: none"> 1) Adjust dose of Coumadin 2) Hold dosing of Coumadin when appropriate <p>When reversal of Coumadin is appropriate</p> <ol style="list-style-type: none"> 3) Various antidotes for reversal of Coumadin 4) Which antidote to select 5) Dosing of vitamin K for various INR's 6) Patient assessment for signs of bleeding 7) Patient follow up requirements after vitamin K administration 								
<p>Demonstrates knowledge of:</p> <ol style="list-style-type: none"> 1) Adjustment procedures for patients with MVR/AVR 2) Adjustment procedures for patients with AFIB, DVT, PE 3) Adjustment procedures for recent embolic event 3) Adjustment procedures for various surgical procedures 4) Adjustment procedures for dental procedures 								
<p>Demonstrates:</p> <ol style="list-style-type: none"> 1) Knowledge of conditions requiring referral to physician for evaluation 2) Demonstrates ability to contact appropriate physician. 								
<p>PROVIDES PATIENT EDUCATION</p>								

Demonstrates: 1) Ability to counsel patients on Coumadin 2) Knowledge of dietary restrictions, drug interactions, signs and symptoms of bleeding, and safety measures B. Demonstrates ability to periodically re-assess patient and provide information for identified knowledge deficits C. Patient demonstrates understanding of instructions given by the provider.								
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	Printed Name	Signature	Date
Trainee			
Trainer			
Associate Chief of Clinical and Educational Programs.			

**CHRONIC PAIN DISEASE STATE MANAGEMENT
COMPETENCY ASSESSMENT for PHARMACISTS**

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CLINICAL PROBLEM SOLVING, JUDGMENT, AND DECISION MAKING Demonstrate knowledge and application of disease state guidelines and current literature in the following areas:								
Demonstrates knowledge and understanding of the most recent chronic pain management guidelines	<ul style="list-style-type: none"> Chronic Opioid Therapy -- Safe Prescribing in Primary Care, parts <u>I</u>, <u>II</u>, and <u>III</u> Neuropathic Pain: Stepped, Integrated Care 							
Able to establish pain related goals based on guidelines and patient specific factors.								
Demonstrates the ability to ask open-ended questions and can provide appropriate follow-up questions when clarification is needed.								
Demonstrates ability to obtain an accurate medication history that includes a thorough assessment of med adherence, past use of pain modalities both pharmacologic and non-pharmacologic								

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Competency Expectation	Initial Training Method*	Comp F/P/N **	Development Plan* (As applicable)	Plan Comp Date	Supervisory Comments	Date Assessed	Assess Code ***	Comp F/P/N **
Understands non-opioid management of chronic pain, and makes appropriate recommendations including but not limited to the following medication classes: <ol style="list-style-type: none"> 1. Non-steroidal anti-inflammatories (NSAIDs) 2. Anti-depressants 3. Anti-convulsants 4. Topical agents 5. Acetaminophen 	<ul style="list-style-type: none"> • Pharmacologic Management of Persistent Pain in Older Persons • Clinical Guidelines for Opioid Use in Chronic Non cancer Pain <p>*Links at bottom</p>							
Demonstrates appropriate assessment of markers of adherence including but not limited to: accessing the state prescription drug monitoring program, ordering and interpreting appropriate urine drug tests, and executing pill counts								
PAIN TREATMENT SKILLS								
Understands and implements a multi-disciplinary biopsychosocial approach to pain management with emphasis on lifestyle changes	See above							
Understands how to utilize oral opioid and non-opioid agents in the treatment of chronic pain and can make recommendations for initiation and adjustment of oral agents appropriately to maximize outcomes while minimizing side-effects.								
Understands proper opioid conversions and tapers								

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Competency Expectation	Initial Training Method*	Comp F/P/N **	Development Plan* (As applicable)	Plan Comp Date	Supervisory Comments	Date Assessed	Assess Code ***	Comp F/P/N **
Knows how to address ADRs associated with chronic pain management treatment including dosage adjustment, discontinuation, therapy changes, and patient education. 1. Constipation (opioids) 2. Nausea/Vomiting 3. Edema (anti-convulsants, NSAIDs) 4. Cognitive dysfunction 5. GI upset or bleed								
COMMUNICATION AND EDUCATION								
Educates all new patients initiated on pain medications including: Side effects, efficacy, prescribed dosage, administration, timing/frequency, Missed/delayed doses, Storage, Travel, Safety	See above *links at bottom							
Educates patient as required on drug interactions, monitoring for ADRs, management of side effects and adherence	Current Opioid Misuse Measure (COMM) Screener and Opioid Assessment for Patients in Pain-Revised (SOAPP-R®)							
Educates patient on opioid agreement								
Ability to counsel patients on all chronic pain management medications								
Utilizes proper tools to predict or identify aberrant behavior								

APS/AAPM Guidelines on Chronic Opioid Therapy

<http://www.sciencedirect.com/science/article/pii/S1526590008008316>

**HEART FAILURE DISEASE STATE MANAGEMENT
COMPETENCY ASSESSMENT for PHARMACISTS**

Employee Name:	Rating Period:
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CLINICAL PROBLEM SOLVING, JUDGMENT, AND DECISION MAKING Demonstrate knowledge and application of disease state guidelines and current literature in the following areas:								
Demonstrates knowledge and understanding of the most recent heart failure guidelines.								
Able to establish goals based on guidelines and patient specific factors.								
Demonstrates the ability to ask open-ended questions and can provide appropriate follow-up questions when clarification is needed.								
Demonstrates ability to obtain an accurate history that includes a thorough assessment of medications, immunization history, and adherence as well as identification of behaviors that may contribute to HF exacerbations.								

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Competency Expectation	Initial Training Method*	Comp F/P/N **	Development Plan* (As applicable)	Plan Comp Date	Supervisory Comments	Date Assessed	Assess Code ***	Comp F/P/N **
<p>Knows how to address ADRs associated with HF treatment including dosage adjustment, discontinuation, therapy changes, and patient education.</p> <ol style="list-style-type: none"> 1. Arrhythmias 2. Changes in volume status 3. Changes in blood pressure/pulse 4. Dehydration 								
COMMUNICATION AND EDUCATION								
Educates all new patients initiated on HF medications: Side effects, efficacy, prescribed dosage, administration, timing/frequency, missed/delayed doses, and storage.								
Educates patient as required on diet, drug interactions, exercise, self-monitoring, smoking cessation, alcohol abstinence, and adherence								
Communicates effectively								
Demonstrates ability to counsel patients on all HF medications								

2013 AHA/ACC Guideline for the Management of Heart Failure
<http://circ.ahajournals.org/content/128/16/e240.extract>

**COPD/ASTHMA DISEASE STATE MANAGEMENT
COMPETENCY ASSESSMENT for PHARMACISTS**

Employee Name:

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Competency Expectation	Initial Training Method*	Comp F/P/N **	Development Plan* (As applicable)	Plan Comp Date	Supervisory Comments	Date Assessed	Assess Code ***	Comp F/P/N **
CLINICAL PROBLEM SOLVING, JUDGMENT, AND DECISION MAKING Demonstrate knowledge and application of disease state guidelines and current literature in the following areas:								
Demonstrates knowledge and understanding of the most recent COPD/Asthma guidelines.								
Able to establish goals based on guidelines and patient specific factors.								
Demonstrates the ability to ask open-ended questions and can provide appropriate follow-up questions when clarification is needed.								
Demonstrates ability to obtain an accurate history that includes a thorough assessment of medications, immunization history, and adherence as well as identification of behaviors that may contribute to/worsen COPD/Asthma.								
Demonstrates ability to assess symptoms to establish a baseline, severity, duration, and precipitating/alleviating factors.								

Understands complications associated with COPD/Asthma <ol style="list-style-type: none"> 1. Respiratory infections 2. Heart Failure 3. Sleep disturbances 4. Osteoporosis 								
Demonstrates appropriate assessment of laboratory values to include but not limited to: electrolytes, ABG, CBC.								
COPD/ASTHMA TREATMENT SKILLS								
Utilizes spirometry/peak flow and guideline-based classifications to direct therapy.								
Understands how to individualize therapy to address co-morbid conditions, which could contribute to COPD/Asthma (i.e., GERD, obesity, sleep apnea, depression, etc.) and ensure immunizations are up-to-date.								
Understands how to effectively utilize step up/step down therapy.								
Knows how to address ADRs associated with treatment including dosage adjustment, discontinuation, therapy changes, and patient education. <ol style="list-style-type: none"> 1. Oral thrush 2. Reduced bone mineral density 3. Xerostomia 4. Tachycardia 								
COMMUNICATION AND EDUCATION								
Educates all new patients initiated on COPD/Asthma medications on the following: Side effects, efficacy, prescribed dosage, administration, timing/frequency, difference between maintenance and rescue inhalers, order of use if multiple inhalers used at once, drug interactions, missed/delayed doses, storage, and proper inhaler/nebulizer technique.								

Educates patient as required on exercise, self-monitoring of symptoms (including use of peak flow meter, if applicable), smoking cessation, identifying and decreasing exposure to triggers, and adherence.								
Communicates effectively								

2014 GOLD Strategy for the Diagnosis, Management, and Prevention of COPD

http://www.goldcopd.org/uploads/users/files/GOLD_Report_2014_Jan23.pdf

2007 NHL Asthma guidelines

<http://www.nhlbi.nih.gov/files/docs/guidelines/asthgdln.pdf>