

PQS PHARMACY A1C COLLECTION CONVERSATIONS



According to the Centers for Disease Control and Prevention, 37.3 million Americans have diabetes. Many of your patients will be managing this condition as diabetics represent 11.3% of the US population. Diabetes is one of the main contributors to serious health conditions such as heart disease, stroke, and kidney disease. It can also cause serious nerve damage leading to vision and hearing loss, neuropathy, and limb loss. As patients visit their pharmacies on a regular basis, pharmacy staff can play an important role in helping people with diabetes manage their disease, prevent disease progression, and the consequences of poorly controlled blood glucose levels.

CONSEQUENCES OF A1C



VISION
LOSS



HEART
DISEASE



NEUROPATHY



STROKE



HEARING
LOSS



KIDNEY
DISEASE

PQS is working with pharmacies and insurers to collect A1C results to better support patients with diabetes. To assist pharmacists in helping their patients manage diabetes, we have developed a conversational framework to encourage use of the pharmacy for A1C testing.

INVITATION TO A1C MONITORING

Short, simple conversations around the need for regular A1C testing can be introduced into typical pharmacy interactions. Conversations begin with an invitation to discuss having an A1C test.



Thank you for dropping off your prescription Mr. Jones. If you're planning to wait for it to be filled, I want to let you know that we're offering A1C tests in the pharmacy. Regular A1C level tests are one of the best ways to prevent stroke and heart attacks. It looks like you haven't had a recent A1C test. It doesn't require fasting. Can we get one from you now?



Hi Susan, I'm calling from your pharmacy to let you know that we're offering our customers with diabetes A1C tests in the pharmacy. Monitoring A1C levels helps to prevent future problems such as stroke and heart attack. Can you take a minute when you come in to pick up your prescription to let us measure your A1C?



We're helping patients with diabetes prevent future problems like kidney failure and heart disease by offering A1C tests in the pharmacy. It only takes a minute to get results. When is a good time for you to stop by the pharmacy this week and get your A1C test?

TIP

Your invitation should be just that, an invitation -- not a directive such as "We need your A1C level. When can you come in?" Instead try "You don't have an A1C in our files. Would you be able come in and have your A1C tested?"

RESPONDING TO NO

Inevitably you will have some patients who don't want to have their A1C taken. Here are some ways to counter these common objections.

“My doctor checks my A1C.”

It's important that your doctor is checking your A1C, but it's often difficult to get into the doctor's office for more than an annual check-up. It looks like you haven't had an A1C test in the past 6 months. A1C tests are recommended every 3 months to show how glucose levels fluctuate. Knowing how glucose levels change over time can help you gain better control of your diabetes. Can we test your A1C today?

“I monitor my glucose levels at home.”

Daily glucose monitoring is an important part of diabetes management, and A1C tests provide additional information about your glucose control. A1C tests show how your glucose levels fluctuate over time. This can help us make sure your medications are the right dose to prevent health issues caused by diabetes.

MANAGING THE PROCESS

Once you gain customer agreement to test their A1C you can quickly perform the test as follows:

1. Put on gloves and set up your blood collection supplies, you can use a lancet to draw a small amount of blood for testing.
2. Following directions for your testing device, submit the blood sample. Results should be available in minutes.
3. When results are available, discuss A1C results and document the encounter.
4. Remember to dispose of the lancet safely in a sharps container.
5. Discuss next steps. Example conversations can be found in the material below.

“Why should I get my A1C checked at the pharmacy?”

A1C levels help the pharmacist make recommendations about your diabetes medications. More regular monitoring of your A1C can help you and your doctor learn whether your diabetes medications are working for you.

“I don't have time right now.”

We can work with your schedule – we have equipment here in the pharmacy that will give us results in minutes. If you don't have time now can we set up an appointment for another day?

USING OPEN-ENDED QUESTIONS TO UNCOVER PATIENT OBJECTIONS

It can help to explore the reasons for the patient's reluctance or objection by asking an open-ended question. These are questions that cannot be answered with a “yes” or “no.” They prompt the patient to give you information to help you understand and work around their reluctance. On the other hand, closed ended questions make it easy for the patient to say “No” and end the conversation without getting permission.

Open-ended questions begin with “How” and “What.” For example, If the patient says “No, thank you” you can follow up with a question such as:

- *How can we make checking your A1C level convenient for you?*
- *What is keeping you from setting up a time to come in to get your A1C checked?*
- *What are your concerns about having your A1C checked here at the pharmacy?*

Be careful starting questions with “why.” Although they are open-ended they often come across as accusatory.

SHARING FEEDBACK ON A1C LEVELS

When sharing feedback on A1C results, use concise language that delivers the results and relates them to glucose control guidelines. For instance:

Your A1C is 8.5% which is higher than we would like to see. This can put you at higher risk for complications such as stroke and heart disease. However, your glucose levels are always changing which is why it is important to check your A1C every 3 months. If your A1C is consistently high, your doctor may need to adjust your medications or suggest other changes you can make.

TIP

Feedback about A1C levels should be delivered without judgement or accusation. Accusatory or judgmental feedback might sound something like “Wow, that’s really high. I can tell you haven’t been eating right.”

A1C levels are reported as a percentage. The higher the percentage, the higher glucose levels have been over the past 2 to 3 months. The A1C goal for most people with diabetes is 7% or less. However, personal goals depend on many things such as age and any other medical conditions.



<https://www.diabetes.org/diabetes/a1c>

DISCUSSING CHANGE PLANS

Once you’ve given feedback about the client’s A1C, you’re in a position to discuss change plans if they are open to having that discussion. You could build off your feedback as in these examples:

Your A1C is 8, which is high. I see that you didn’t fill your Glipizide for last month. Would it be okay if we talked about how you’re taking it?

Your A1C is 7.5 which is just a little high. You’ve been filling your prescription for Junuvia regularly which is good, can we talk about some other things that might be impacting your glucose levels?

End the interaction with a quick overview of your conversation with emphasis on next steps. For instance: “Your reading today was a little high, and you were concerned that it was because you had an infection. We talked about ways to better monitor and control your glucose levels when you are sick.”

LIFESTYLE INTERVENTIONS TO MANAGE GLUCOSE LEVELS

- TRACK GLUCOSE LEVELS
- EAT AT REGULAR TIMES
- DON’T SKIP MEALS
- LIMIT ALCOHOLIC DRINKS
- TRACK FOOD, DRINKS AND PHYSICAL ACTIVITY
- DRINK WATER INSTEAD OF JUICE AND SODA
- CHOOSE FOODS LOW IN CALORIES, SUGAR, FAT AND SALT CONTROL
- WATCH FOOD PORTIONS WITH THE PLATE METHOD

<https://www.cdc.gov/diabetes/managing/manage-blood-sugar.html>