



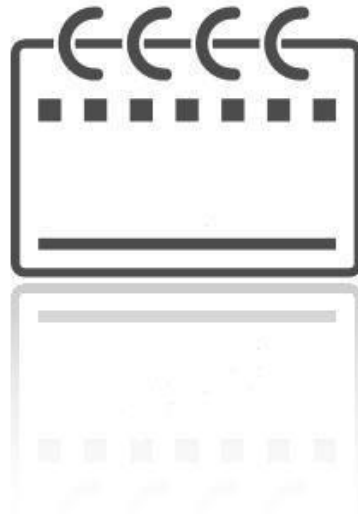
Medication Reconciliation Patient-Centered Approach Training Guide





About this training

This training summarizes the essential steps to conduct medication reconciliation in a healthcare setting with hands-on experience in taking medication history and patient chart review utilizing the WHO-High5 -standard operating protocol and international Patient Safety and quality standards.



AGENDA



Agenda:

- 08:00-08:30** **Registration and Pre-Test**
- 08:30 – 9:30** **Medication reconciliation: the 3 w's: what, why and when?**
- 9:30- 10:30** **Medication Reconciliation: Who's job, is it?**
- 10:30 -11:00** **How to get the BPMH?**
- 11:00-11:30** **Role play for medication history case.**
Exercise 1
- 11:30-12:30** **Implementing Medication Reconciliation strategies**
Exercise 2
- 12:30-13:30** **Break**
- 13:30-14:30** **Medication Reconciliation training and competency program**
for health care professionals
Exercise 3
- 14:30-15:30** **Medication Reconciliation challenges and lessons learned.**
- 15:30-16:00** **Post-test, Questions & wrap up**



Pre-/PostTest with answer Key

Activity one:1: Pre-test /post test

Description:

- The test will be distributed twice to the participants before and after the training session.
- The main objective is to assess the training effectiveness.
- Give each correct answer a score of 1, and the total full mark is 5. Calculate the result for each candidate before and after the test.



Questions:

Pre/Post Test

Please select one correct answer only

- a. At which stage the medication reconciliation is important?
 - a. Admission and discharge
 - b. Transfer
 - c. Ambulatory care
 - d. All of the above
- 2-Medication reconciliation is the job of the:
 - a. Pharmacist
 - b. Nurse
 - c. Physician
 - d. A multidisciplinary team approach including medical, nursing and pharmacy staff.
- 3-What is the most important step for proper implementation of medication reconciliation in the hospital?
 - a. Secure leadership commitment
 - b. Team formation
 - c. Pilot testing
 - d. Get the BPMH
- 4-In order to get a proper patient history (BPMH) you need to:
 - a. Interview the patient.
 - b. Check the patient's file.
 - c. Check the Patient's medication list.
 - d. Use at least 2 methods from the above
- 5-True or False: Intended medication changes are documented and communicated.
COMMUNICATE or SUPPLY is the last key step of medication reconciliation.
 - a. True
 - b. False



Answer Key:

Pre/Post Test

Please select one correct answer only

a. At which stage the medication reconciliation is important?

- a. Admission and discharge
- b. Transfer
- c. Ambulatory care
- d. All of the above

2-Medication reconciliation is the job of the:

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- a. Interview the patient.
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5-True or False: Intended medication changes are documented and communicated. COMMUNICATE or SUPPLY is the last key step of medication reconciliation.

- a. True
- b. False



Module 1:

Medication Reconciliation: The 3 Ws What? Why? When?

Refer to Presentation slides from 1-29

Module 2:

Medication Reconciliation: Who's Job is it? How to get the BPMH?

Refer to Presentation slides from 30-60



Your Turn: Exercises

Obtain medication history

Scenario 1:

- A 66-year-old male in Emergency Department (ED) complaining of left-sided stroke symptoms
- The ED pharmacist begins the medicine reconciliation process to find out what the patient was taking before coming into hospital



SAY:

- Pharmacists have in-depth medication knowledge and are trained to take more accurate and comprehensive medication histories than other health care professionals.
- Preferably upon admission
- Preferably face-face interview
- Other sources as appropriate



Exercise 1: Role play for medication.

Medication History Interview

- Divide the audience in 3-4 groups considering the skill mix (Pharmacist, Nurse and Physician); they can chat through online chat (5 min)
- – Discuss strategies to use if the patient is unavailable or unable to be interviewed? (10 min)
- – Each group can offer suggestions in turn until all ideas are exhausted (5 min)
- – Group discussion – what if the patient is unavailable for the interview? (5 min)
- Discuss the answers (5 min)

Possible answers:

If the patient is unavailable for interview...

- Patient's medicine list
- Patient's medicine labels
- Carer/other family members
- -Hospital records from previous admission/discharge

Use at least two sources of information for all medication histories.

Exercise 2: Role play for medication.

Perform a medication history interview (15 mins)

Tool: BPMH guide

https://www.ismp-canada.org/download/MedRec/SHN_medcard_09_EN.pdf

Form X groups

- In each group, one participant will role-play the patient, and another one will be the pharmacist, and others will be observers.
- Patient/Observers to provide feedback to the pharmacist at the end of the interview.

Play The video at the end to summarize the steps.



BPMH guide, ISMP Canada

Medications: More Than Just Pills

Prescription Medicines

These include anything you can only obtain with a doctor's order such as heart pills, inhalers, sleeping pills.

Over-The-Counter Medicines

These include non-prescription items that can be purchased at a pharmacy without an order from the doctor such as aspirin, acetaminophen, laxatives, other bowel care products, **herbs** like garlic and Echinacea or **vitamins** and **minerals** like calcium, B12 or iron.

DON'T FORGET THESE TYPES OF MEDICATIONS



Eye/Ear Drops



Inhalers



Nasal Spray



Patches



Liquids



Injections



Ointments/Cream

Prompt the patient to include medicines they take **every day** and also ones taken **sometimes** such as for a cold, stomachache or headache.



Adapted from Vancouver Island Health Authority



www.SaferHealthcareNow.ca

Best Possible Medication History Interview Guide



Prevent Adverse Drug Events through Medication Reconciliation

www.SaferHealthcareNow.ca



Introduction

- Introduce self and profession.
- I would like to take some time to review the medications you take at home.
- I have a list of medications from your chart/file and want to make sure it is accurate and up to date.
- Would it be possible to discuss your medications with you (or a family member) at this time?
 - Is this a convenient time for you? Do you have a family member who knows your medications that you think should join us? How can we contact them?

Medication Allergies

- Are you allergic to any medications? If yes, what happens when you take (allergy medication name)?

Information Gathering

- Do you have your medication list or pill bottles (vials) with you?
- *Use show and tell technique when they have brought the medication vials with them*
 - How do you take (medication name)?
 - How often or When do you take (medication name)?
- *Collect information about dose, route and frequency for each drug. If the patient is taking a medication differently than prescribed, record what the patient is actually taking and note the discrepancy.*
- Are there any prescription medications you (or your physician) have recently stopped or changed?
- What was the reason for this change?

Community Pharmacy

- What is the name and location of the pharmacy you normally go to? (*Anticipate more than one*).
 - May we call your pharmacy to clarify your medications if needed?

Over the Counter (OTC) Medications

- Do you take any medications that you buy without a doctor's prescription? (*Give examples, i.e., Aspirin*). If yes, how do you take (OTC medication name)?
-



Vitamins/Minerals/Supplements

- Do you take any vitamins (e.g. multivitamin)? If yes, how do you take (vitamins name(s))?
- Do you take any minerals (e.g. calcium, iron)? If yes, how do you take (minerals name(s))?
- Do you use any supplements (e.g. glucosamine, St. John's Wort)? If yes, how do you take (supplements name(s))?

Eye/Ear/Nose Drops

- Do you use any eye drops? If yes, what are the names? How many drops do you use? How often? In which eye?
- Do you use ear drops? If yes, what are the names? How many drops do you use? How often? In which ear?
- Do you use nose drops/nose sprays? If yes, what are the names? How do you use them? How often?

Inhalers/Patches/Creams/Ointments/Injectables/Samples

- Do you use inhalers?, medicated patches?, medicated creams or ointments?, injectable medications (e.g. insulin)? For each, if yes, how do you take (medication name)? *Include name, strength, how often.*
- Did your doctor give you any medication samples to try in the last few months? If yes, what are the names?

Antibiotics

- Have you used any antibiotics in the past 3 months? If so, what are they?

Closing

This concludes our interview. Thank you for your time. Do you have any questions?

If you remember anything after our discussion please contact me to update the information.

Note: *Medical and Social History, if not specifically described in the chart/file, may need to be clarified with patient.*

Adapted from University Health Network



Reviewing Medication Chart

Provides information on:

- Patient's demographics including age and possibly weight
- All medicines prescribed by the hospital doctors
- Administration times of medicines by nursing staff, and their initials
- Reasons for medicine non-administration
- Allergies
- What else?

For 5 Minutes, ask the audience about essential elements that should be available in the patient Chart:

Possible Answers:

- Lab results
- Pregnancy status
- BMI
- Diagnosis



Exercise 3: Role play for medication.

Review medication Chart

Required tool:

Any Drug Information resource available for free access or paid.

Case Scenario:

You are reviewing a medication chart for Mr X on your ward.

The nurse asks for your advice about how to give the regimen via a nasogastric tube.

Verapamil SR 240mg capsule once daily

(morphine SR) tablets 30 mg bid

Efexor XR (venlafaxine) capsules once daily

Omeprazole 20mg tablet once daily

Citalopram 20 mg tablet once daily

Activity 15 minutes:

- Form X groups
- Access the relevant information and formulate a response.
- For medications that can be given as prescribed, endorse the orders to ensure the doses are given correctly.
- For medication orders that need to be changed, determine what you would recommend the doctor prescribe so that the regimen can be given via the NG tube.
- In each group one participant will role play nurse, another one will be the pharmacist and others will be observers.

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