

Partnering with Patients Safer Healthcare Now!

Medication Reconciliation

Cape Breton District Health Authority, Nova Scotia

Paula Creighton, MD, FRCP(C)
Sharon D. Sobol, PharmD, (HSM), RPh

Where are we?



Who are we?

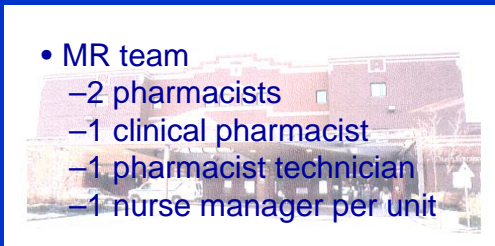


What we have done with Medication Reconciliation (MR)?



What we have done with Medication Reconciliation (MR)?

- MR team
 - 2 pharmacists
 - 1 clinical pharmacist
 - 1 pharmacist technician
 - 1 nurse manager per unit



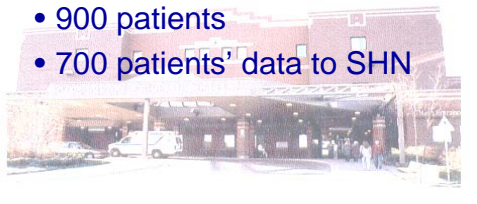
What we have done with Medication Reconciliation (MR)?

- 3 services
 - Mental health
 - Acute medical
 - Surgical pre-admission



What we have done with Medication Reconciliation (MR)?

- 900 patients
- 700 patients' data to SHN



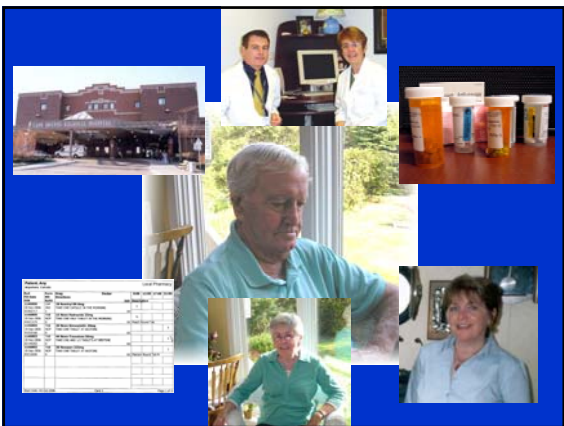
Our MR Process?



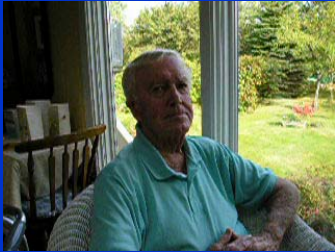








Patient Perspective of the MR Process



What we found

Undocumented intentional discrepancies

- Prevalent on all services
- Invests considerable reconciliation time
- Change practice toward standard documentation

What we found

Unintentional Discrepancies

- Equally prevalent on all services
- Invests less reconciliation time
- Change practice trend toward patient/family interview

What patients tell us

Reasons for Unintentional Discrepancies

- Over-the-counter medications
- Shared prescriptions
- Labels "as directed"
- Prescription change without script
- Dispense quantity/shared prescriptions to avoid financial burden
- Samples

What patients request of us

- Documentation: what changed and why?
- Convey a clear understanding of desired outcomes to therapy.

What patients request of us

MEDICATION CALENDAR				
NAME: _____				
DATE: _____				
Drug Name	Drug Dose/ Strength	TIMES		Medication Use / Side Effects
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				

What patients request of us

- Alternatives to vials



Future Direction at CBDHA

Develop:

- Policy and procedures for best possible medication history
- Structured, dynamic education modules to facilitate practice change

Future Direction at Cape Breton District Health Authority

- Strengthen ties with community health care providers:

October 2006:

Medication Seamless Care Patient Safety Conference "Getting It Right – Together"

Future Direction at
Cape Breton District Health Authority

Continue:

- MR form for accountability of process (follow discrepancy coding and data collection) led by pharmacy service
