

Learning Session 3



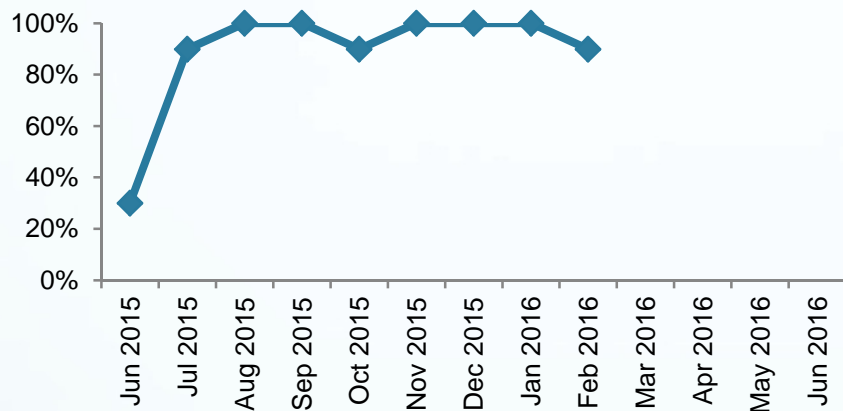
Clendon Family Health Centre Medication Reconciliation

Team members: CFHC staff

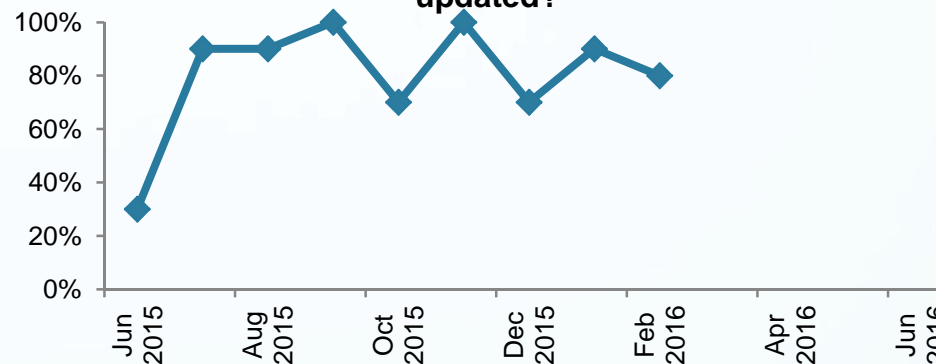
PHO and Facilitator: Procure, Nikki

Measures Summary

Has Medication Reconciliation occurred within 7 (calendar) days of the EDS being received?



Has the patient's regular medication list been updated?



Is it documented that any medication changes have been discussed with the patient or their representative within 7 (calendar) days of receipt?



Medication Reconciliation Overall Compliance



Change Package

	Change Tested	Outcome / Evidence of Improvement
1	<p>Med rec process needs to be applied to residential care patients:</p> <ul style="list-style-type: none"> - Clinical team meeting to remind team members - Random audit of discharge summaries from 5 residential care patients 	<ul style="list-style-type: none"> - Improvement in monthly audit data - Med rec process, including contacting of patients, correctly followed with 60% of patients.
2	<p>Standardised process of recording that med rec has been done and GP decision as to contacting patients:</p> <ul style="list-style-type: none"> - Random audit of 10 discharge summaries from 3 GPs 	<ul style="list-style-type: none"> - GP decision for contacting patients written into the comments of 70% of discharge summaries.

Trigger Tool:

- No incidents founds; some identified potential for harm eg. Language barrier, multiple caregivers, multiple health provider (ie. nurse/doctor) input, lots of health issues being dealt with in one consult; providers not knowing social history of patient.

TAKE HOME POINTS FOR CFHC:

- Importance of communication with a patient's main provider (verbally or using staff tasks)
- Family members do not make good interpreters- use alert system to ensure a professional interpreter is booked
- Remember can do blood tests while the patient is in the clinic
- It's okay to rebook an appointment to manage multiple health issues to keep patients safe
- Reminder that social history is part of new patient baselines. A social history is mandatory for patients over 65 years of age.

Highlights and Lowlights

HIGHLIGHTS:

- Clear vision and aim
- Tangible improvement in medication reconciliation of discharge summaries that has, in turn, promoted practice buy- in ie. Not just ‘ticking boxes.’

LOWLIGHTS:

- Found that some patients do not need contacting about their medication changes due to insignificant changes but this is not accounted for in the audit.
- Engaging locums and communicating the practice’s med rec process continues to be a challenge.