

Orakei Health Services

Ngati Whatua Orakei Health Clinics Ltd

PHO support:

Carol Ennis

Lisa Fuller (GP /
Clinical Lead)

Alicia Caulton (Nurse
Lead SIP Orakei)



“Buy - In”

Aim: By June 2017 all discharge summaries will be reviewed with medications reconciled and patients contacted to ensure that they understand and are taking their medications correctly

Buy-in:

- Good experience from SIP programme in 2015/16 – staff felt it benefited the way the practice worked
- Risk in this area already identified by practice team from trigger tool and general daily work over SIP 2015/16
- Discussed what trying to do, reasons and how to go about it at practice hui together agreeing on plan for next month

Change Ideas:

Doctor doing reconciliation decide most appropriate way for changes to be reviewed with patient

- **Come for consult?**
 - **Call on phone?**
- **Nurse to discuss with patient?**

Use “medication status” functions of prescriptions to document medications reconciliation – allowing changes to be made without appearing as prescriptions printed or dispensed

What Changes have you tested?

	Change Tested	Outcome
1	Set up new medication status code MEDREC – Medications Reconciled but no printed	Some drs using this some using old codes – discussed together which ones most useful and removed others
2	Let doctors decide most appropriate way for patient understanding of medication changes to be reviewed	Worked really well – some patients came in, others rung by nurses. 100 % of patients contacted and understanding of medication changes reviewed

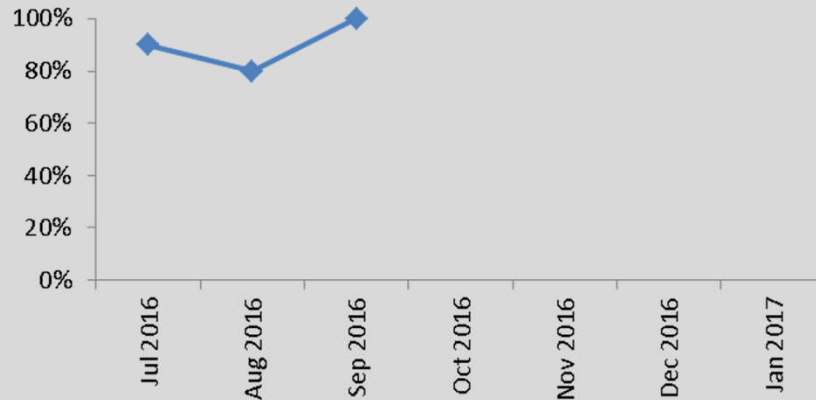
Most Successful PDSA Cycle

Suggestion to GP's for **patients to be contacted** about their understanding of medication changes but leaving it to GP to decide most appropriate method depending on the individual patient and their clinical scenario

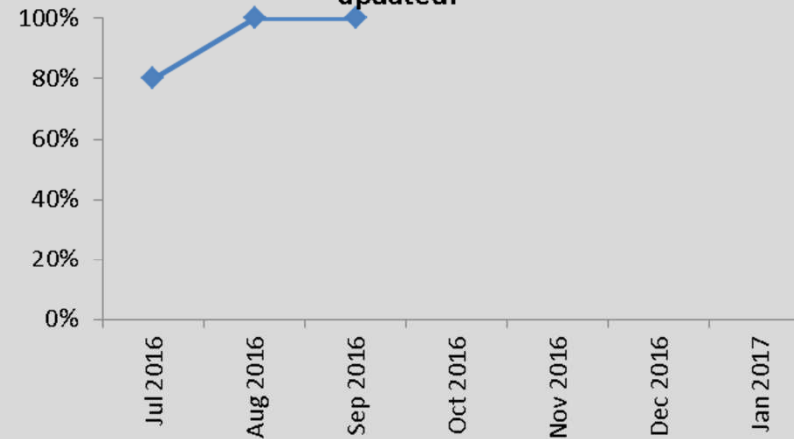
30% → 100% of patients having changes discussed with them - over 2 months 😊

Measures Summary

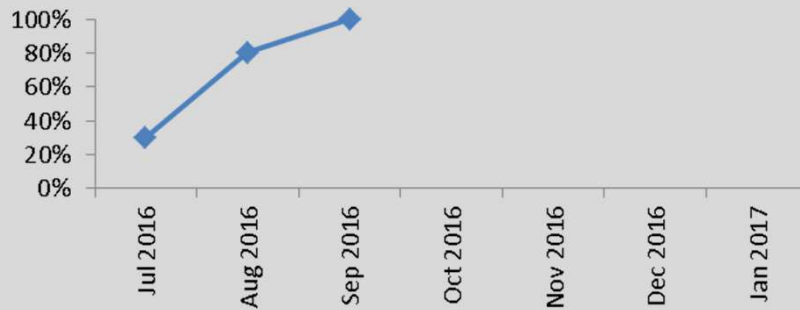
Has Medication Reconciliation occurred within 7 (calendar) days of the EDS being received?



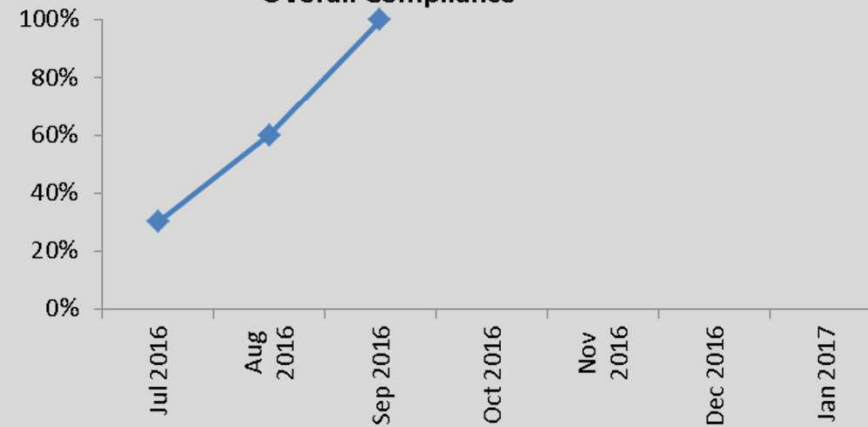
Has the patient's regular medication list been updated?



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



Medication Reconciliation Overall Compliance



Highlights and Lowlights

- All staff have taken the idea of reducing the risk around medication changes from discharge summaries and clinic letters on board very readily
- Audits EVERY month not very useful as by time discussed with practice team after audit and decided in changes, most of month has passed – more useful to audit every second month to see results of changes within the practice

Achievements to date

Do you have an

- agreed aim **YES**
- a change package **YES**
- measurement plan **YES**

Do people on your team know what their responsibilities are and what is expected of them? **YES**

What has changed and what difference have the changes made?

We were already doing some reconciling and updating of medication changes as a result of last years work – but we weren't routinely checking patient understanding and compliance whereas now we are



Other comments

Our experience has highlighted:

- Critical importance of regular practice meetings – working as a team
- Perception of better patient care as a result – interesting to see results of patient surveys as they come through