



Partnering with Patients in Medication Safety

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PPC 2018

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ISMP Canada

Presenter Disclosure

- Presenter's Name: Alice Watt
- I have no current or past relationships with commercial entities
- Speaking Fees for current program:
 - I have received no speaker's fee for this learning activity

Commercial Support Disclosure

This learning activity has received in-kind support from CSHP in the form of a 2 day complementary registration to this conference.

Objectives

Participants will leave with an increased understanding of:

- the rationale for partnering with patients in medication safety
- the role and responsibilities of patients/families in medication safety and how hospital pharmacists can help

Objectives

Participants will leave with an increased understanding of:

- the evidence pertaining to patient and family engagement strategies and their impact on medication safety
- supporting tips, tools and resources, leading innovation and practices that help engage patients in safe medication use

Rationale for Partnering with Patients

Colleen's Story




November 10, 2015 - Your Discharge is Someone's Admission, National MedRec Webinar, Colleen Cameron, Clinical Pharmacist at Grand River Hospital in Kitchener Ontario

MRS. C

Can you show me how you
would take warfarin 7 mg?



5 5 5 5 5 1 1 = 27 mg



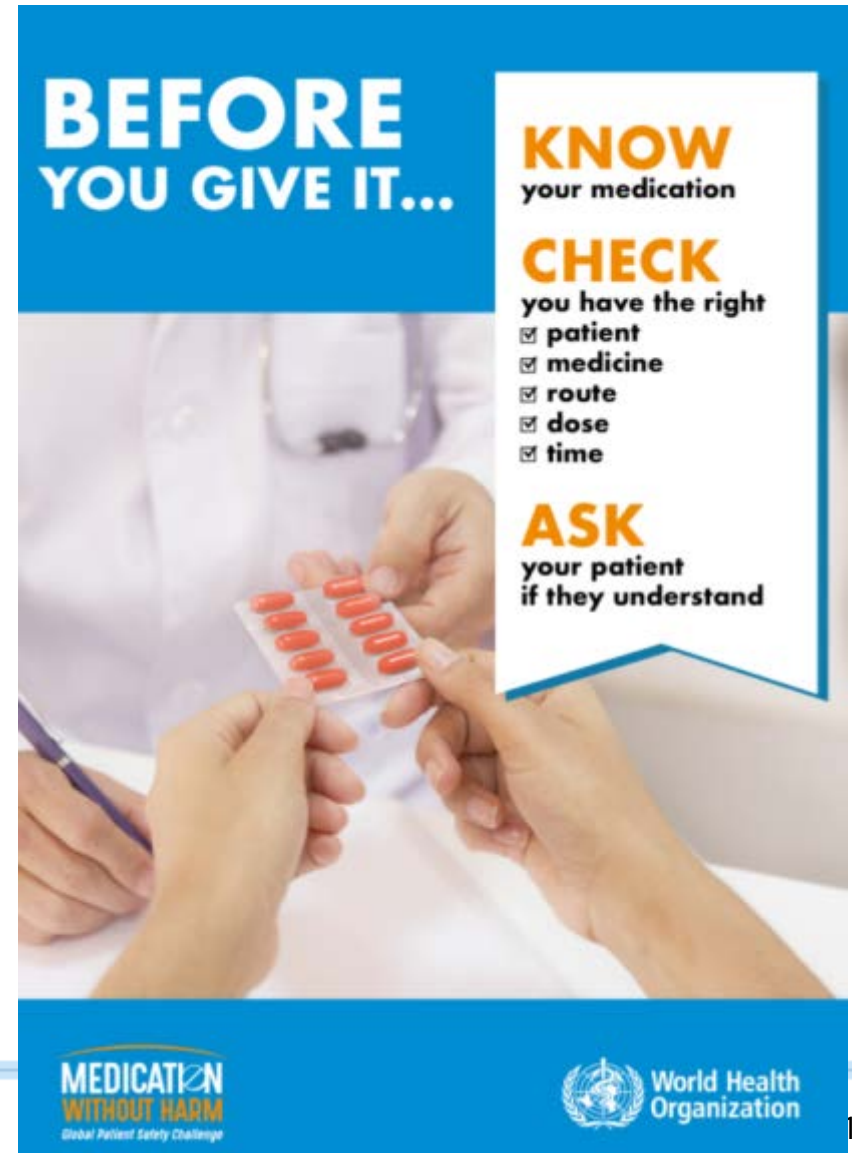
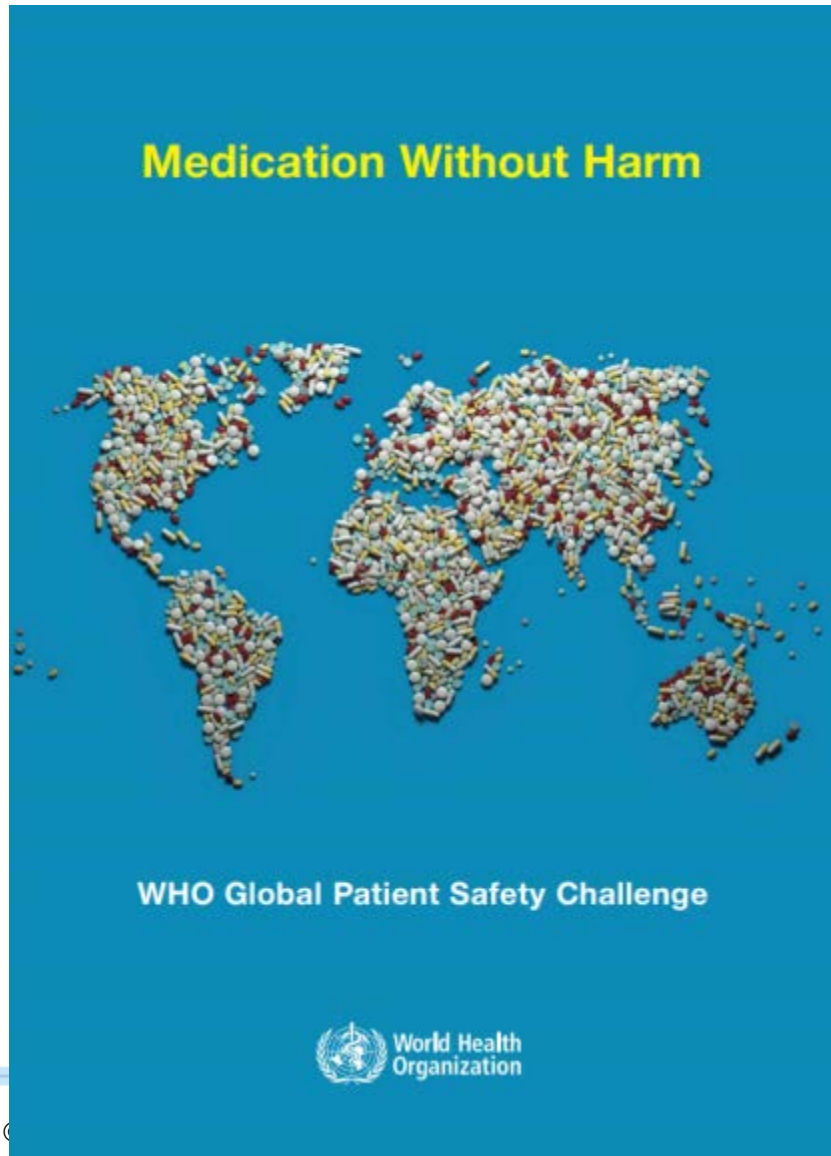
1 1 1 1 1 1 1 = 7 mg

Why the confusion?

Taking 7 mg using   is **Math**

Taking 7 mg using  is **Counting**

WHO Global Safety Challenge



Medical error is the 3rd leading cause of death in Canada

Medication errors are among the most common and harmful of patient safety incidents

(CIHI;CPSI, 2016; Slawomirksi, Auraaen, & Klazinga, 2017) .



Institute for Safe Medication Practices Canada

REPORT MEDICATION INCIDENTS

Online: www.ismp-canada.org/err_index.htm

Phone: 1-866-544-7672

A KEY PARTNER IN

CMIRPS  **SCDPIM**
Canadian Medication Incident Reporting and Prevention System Système canadien de déclaration et de prévention des incidents médicamenteux

ISMP Canada Safety Bulletin

Volume 17 • Issue 5 • May 25, 2017

Death Due to Pharmacy Compounding Error Reinforces Need for Safety Focus

ISMP Canada Safety Bulletin, May 25, 2017

“We had no idea this could even happen.”

Mother whose 8 year old child
died after receiving a wrong drug

**Supporting FULL ENGAGEMENT of patients
improving safety and effectiveness of
medication use ...**

**“is the ‘most powerful’ strategy for
improving safety”**

Lyle Bootman, Co-chair, Committee on
Identifying and Preventing Medication Errors,
Institute of Medicine, July 2006

Role of Patients

Partnering with patients

- values their insights and experience, and empowers them to take an active role in their care.

“Patients are the extra sets of eyes and ears that should be integrated into the safety process of all health care organizations”

Engaging Patients in Patient Safety - a Canadian Guide CPSI 2017

Patient/Family contributions to medication safety

- Self-knowledge and knowledge of family members
- Managing/monitoring medications
- Coordinating among providers
- Research
- Reporting
- Helping guide improvement

Helen Haskell's Presentation: Patient engagement in medication safety at the point of care – roles, responsibilities, September 15, 2016 WHO/CPSI

Role of Patients

- Ask questions about your medications
- Say back to clinicians in your own words what you think they have told you.

Safety Is Personal: Partnering with Patients and Families for the Safest Care. Lucien Leape Foundation

Role of Patients

- Ask the pharmacist to review your medications with you prior to discharge
- Prior to discharge, ask for a list of the medications you should be taking at home

Institute of Medicine. 2007. *Preventing Medication Errors*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/11623>.

Role of Pharmacists

By engaging patients, pharmacists can help improve :

- patient's knowledge
- patient's adherence
- patient satisfaction and quality of life
- patient's hospital experience

Chisholm-Burns MA, et al. Med Care 2010;48(10):923-933.

Effect of an In-Hospital Multifaceted Clinical Pharmacist Intervention on the Risk of Readmission

- >1,400 Danish adults, acute admission ward who were using five or more medications.
- A multifaceted clinical pharmacist intervention at discharge could reduce the number of visits to the emergency department (ED) and readmissions to the hospital

Ravn-Nielsen Lv et. Al. Effect of an In-Hospital Multifaceted Clinical Pharmacist Intervention on the Risk of Readmission: A Randomized Clinical Trial. JAMA Intern Med. 2018 Jan 29.

Effect of an In-Hospital Multifaceted Clinical Pharmacist Intervention on the Risk of Readmission

- The extended intervention had a significant effect on the numbers of patients who were readmitted within 30 days (NNT=12) or within 180 days(NNT =11)
- This study shows that hospital pharmacists may play an important role in preventing hospital readmissions

Ravn-Nielsen Lv et. Al. Effect of an In-Hospital Multifaceted Clinical Pharmacist Intervention on the Risk of Readmission: A Randomized Clinical Trial. JAMA Intern Med. 2018 Jan 29.

Systematic Review: **Identifying the Optimal Role for Pharmacists in Care Transitions**

- MedRec alone is insufficient
- Combine with patient counselling and clinical medication review
- Link with outreaching hospital pharmacist or community pharmacist/family doctor

Role for the hospital pharmacist

- Pharmacist listens to, understands and respects the patient's story about experiences and expectations that will affect the use of medications.
- Educates patient about diseases and medications during their hospital stay
- Medication education at discharge

CSHP Excellence in Hospital Pharmacy cshp.ca/excellence

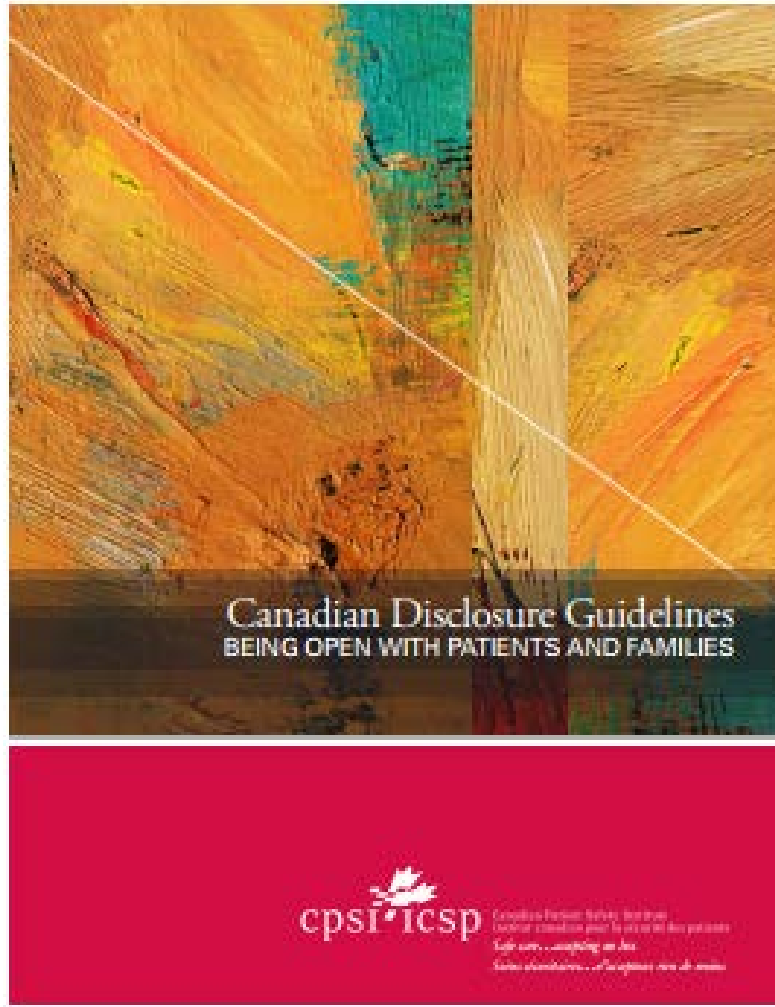
Role for the hospital pharmacist

- MedRec At Discharge
- Plan of care at transitions of care is communicated to the next care provider
- Involve patient in care decisions
- View patients as valuable, effective partners in shared decision-making.

Role for the hospital pharmacist

- Provide patient and providers in circle of care with an up-to-date medication list
- Provide medication information and engagement tools that support patients at their literacy level/language.
- Engage patients as equal partners in safety improvement and care design activities.

Role for the hospital pharmacist



- Provide clear information, apologies, and support to patients and families when things go wrong.

CPSI Canadian Disclosure Guidelines 2011
<http://www.patientsafetyinstitute.ca>

Evidence of Patient / Family Engagement Strategies

Systematic Review: Evaluation of patient and family engagement strategies to improve medication safety

- Key engagement strategies
 - Patient education
 - MedRec strategies

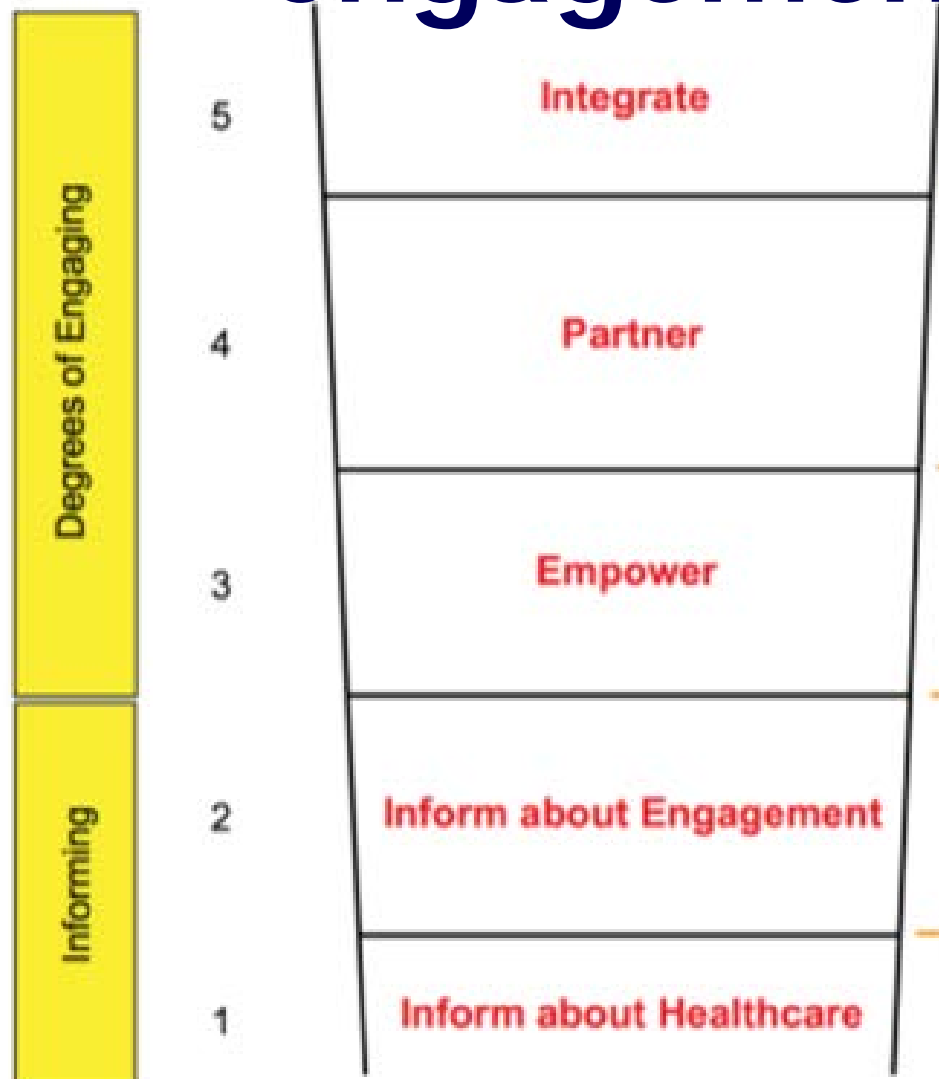
Kim JM et al. Evaluation of patient and family engagement strategies to improve medication safety. The Patient. 2017:1-14.

Systematic Review:
**Evaluation of patient and family
engagement strategies to improve
medication safety**

- 55% of the studies (n=19) significant improvement on at least one medication safety outcome

Kim JM et al. Evaluation of patient and family engagement strategies to improve medication safety. The Patient. 2017:1-14.

Ladder of patient and family engagement



Kim JM et al. Evaluation of patient and family engagement strategies to improve medication safety. The Patient. 2017;1-14.

Tips, Tools & Resources

Tip: Communication is key

How do we talk with patients?

- Focus on “need-to-know” & “need-to-do”
- Demonstrate/draw pictures
- Use clearly, written education materials
- Use Motivational Interviewing and TeachBack method

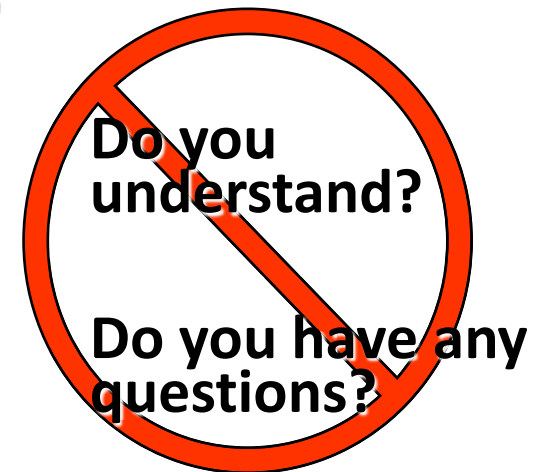
Health Literacy: Hidden Barriers and Practical Strategies. <http://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/tools/literacy-toolkit/tool3a/index.html>

Use TeachBack Method to Confirm patient understanding

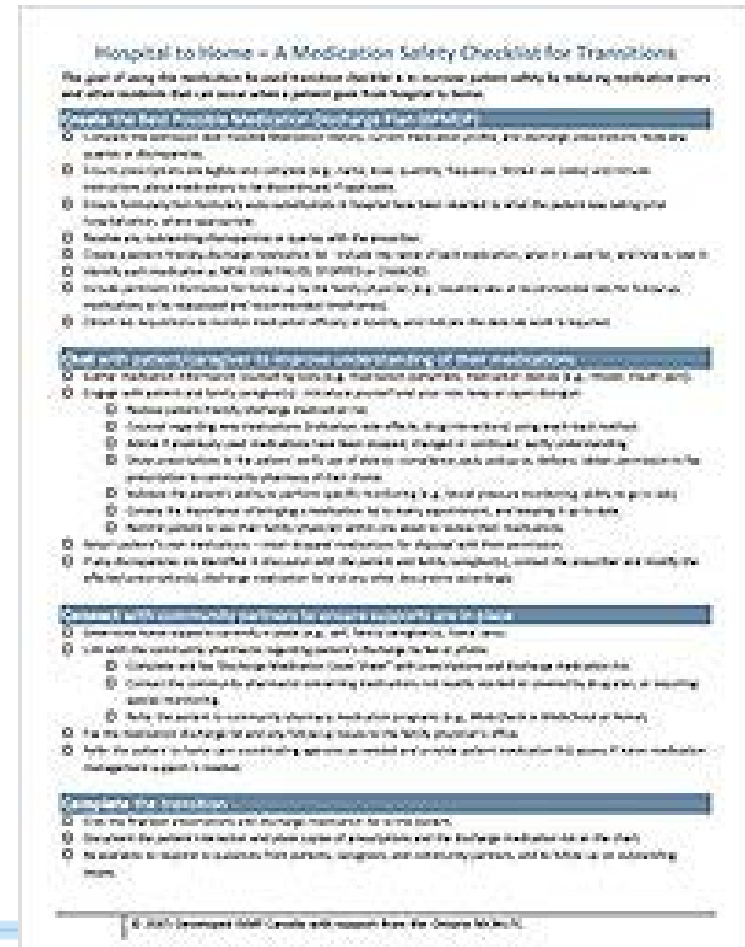
“Tell me what you’ve understood.”

“I want to make sure I explained your medicine clearly. Can you tell me how you will take your medicine?”

Health Literacy: Hidden Barriers and Practical Strategies.
<http://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/tools/literacy-toolkit/tool3a/index.html>



A Toolkit and Checklist for Hospital Pharmacists



Hospital to Home Medication Focused Transitions Checklist

- 1. Create** Best Possible Medication Discharge plan
- 2. Chat and Check** patient's understanding of meds
- 3. Connect** with community partners to ensure supports in place
- 4. Complete transition**

Co-Designed with Patients

5 QUESTIONS TO ASK ABOUT YOUR MEDICATIONS
when you see your doctor, nurse, or pharmacist.

1. CHANGES?
Have any medications been added, stopped or changed, and why?

2. CONTINUE?
What medications do I need to keep taking, and why?

3. PROPER USE?
How do I take my medications, and for how long?

4. MONITOR?
How will I know if my medication is working, and what side effects do I watch for?

5. FOLLOW-UP?
Do I need any tests and when do I book my next visit?

Keep your medication record up to date.

Remember to include:

- ✓ drug allergies
- ✓ vitamins and minerals
- ✓ herbal/natural products
- ✓ all medications including non-prescription products

Ask your doctor, nurse or pharmacist to review all your medications to see if any can be stopped or reduced.

© 2014 Elder Care

Visit safemedicationuse.ca for more information.

ISMP
International Society of Hospital Pharmacists
Société internationale des pharmaciens hospitaliers

CPA/ICSP
Canadian Pharmacists Association
Association des pharmaciens du Canada

SafeMedicationUse.ca



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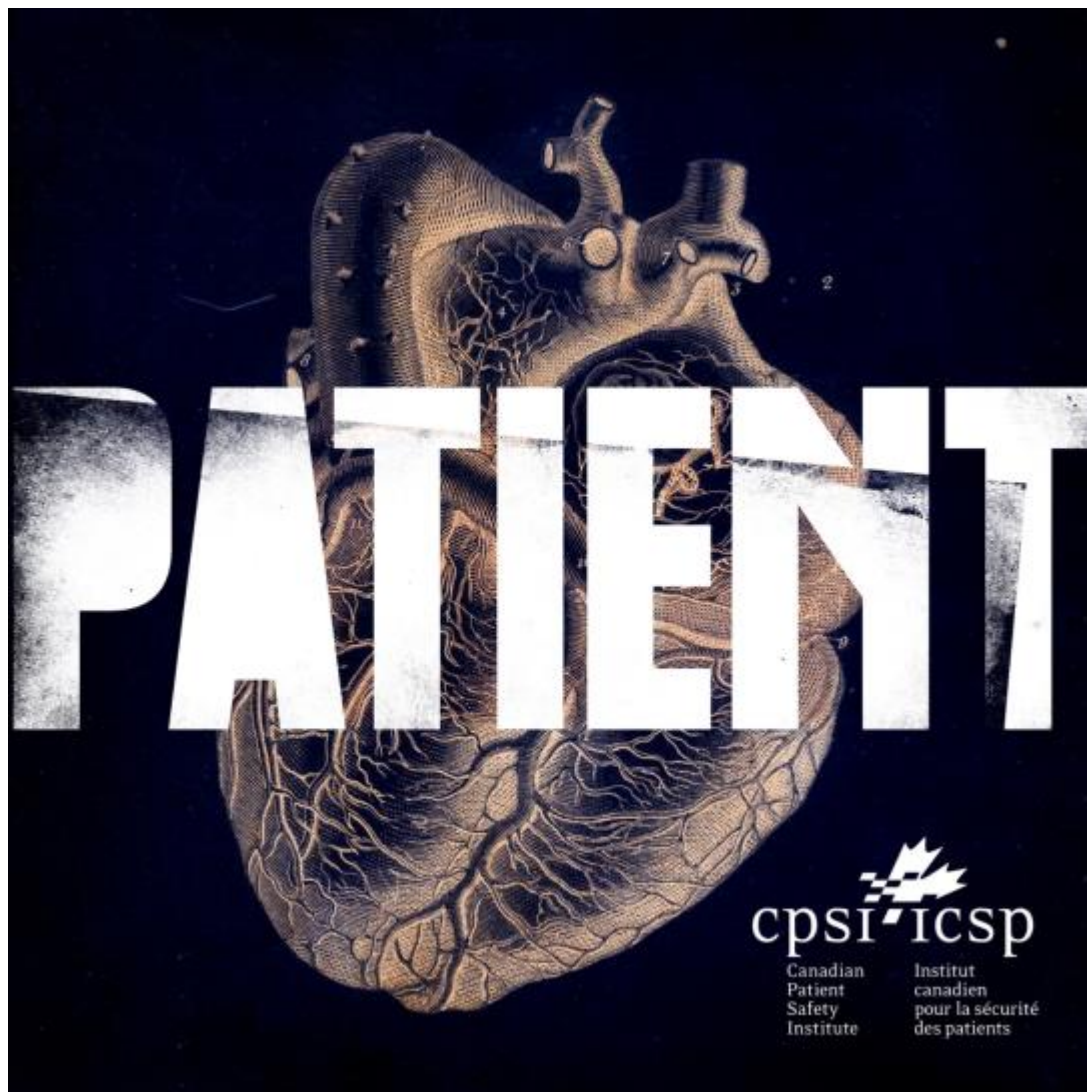
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FOR PATIENT SAFETY**



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PHARMACISTS
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<http://www.patientsafetyinstitute.ca/en/Events/cpsw/Pages/Patient-Podcast-Series.aspx>

MyMedRec



Medication
Record Book

<https://www.knowledgeisthebestmedicine.org/index.php/en/app/>



App for

- iPhone
- Android
- Blackberry

Opioids for pain after surgery: Your questions answered



Opioids for pain after surgery: Your questions answered



1. Changes?

You have been prescribed an opioid.
Opioids reduce pain but will not take away all your pain. Ask your prescriber about other methods of reducing pain including using ice, stretching, physiotherapy, or non-opioid drugs like acetaminophen or ibuprofen. Know your pain control plan and work closely with your prescriber if your pain does not improve.



2. Continue?

Opioids are usually required for less than 1-2 weeks after surgery.
As you continue to recover from your surgery, your pain should get better day by day. As you get better, you will need less opioids. Consult your doctor or pharmacist about how and when to reduce your dose.



3. Proper Use?

Use the lowest possible dose for the shortest possible time.
Overdose and addiction can occur with opioids. Avoid alcohol and sleeping pills (e.g. benzodiazepines like lorazepam) while taking opioids. Do not drive while taking opioids.



4. Monitor?

Side effects include: sedation, constipation, nausea and dizziness.
Contact your doctor or pharmacist if you have severe dizziness or inability to stay awake.




5. Follow-Up?


Ask your prescriber when your pain should get better.
If your pain is not improving as expected, talk to your healthcare provider.

To find out more, visit: OpioidStewardship.ca and DeprescribingNetwork.ca


It is important to:




Never share your opioid medication with anyone else.



Store your opioid medication in a secure place; out of reach and out of sight of children, teens and pets.




Ask about other options available to treat pain.



Take unused medications back to a pharmacy for safe disposal. Talk with your pharmacist if you have questions. For locations that accept returns: 1-844-535-8889 healthsteward.ca





Did you know?

 About 16 Canadians are hospitalized each day with opioid poisoning.
—Canadian Institute for Health Information, 2017

Examples of opioids used for pain after surgery:

hydromorphone	morphine	codeine	oxycodone	tramadol
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Notes:



PREVENT MEDICATION ACCIDENTS

1. Store medications out of sight and reach of:

Children and teens



Visitors



Pets



2. Place unused medications in a bag and bring to a pharmacy.



3. For locations that accept returns:



1-844-535-8889



healthsteward.ca

Ask a healthcare provider if you have questions.



Download from <https://www.ismp-canada.org/download/OpioidStewardship/storage-disposal-information.pdf>

Storage and Disposal
of unused
medications
card

Mayo Clinic Shared Decision Making National Resource Center

A Journey Toward Shared Decision Making



<https://shareddecisions.mayoclinic.org/>



Welcome to the **Diabetes Medication** Choice Decision Aid.

This guide provides information on medications commonly used to treat type-2 diabetes.

Let's get started

Caution: This application is for use exclusively during the clinical encounter with your clinician

<https://diabetesdecisionaid.mayoclinic.org/>

Patient engagement is changing



DASH MD

SeamlessMD

myUHN

Patient engagement



CGM

Self Care

The logo for athenahealth, featuring a green leaf icon and the word "athenahealth" in purple lowercase letters.

Population health
management



Telehealth
Virtual Care



Access to labs/records



Connecting/collaborating



Incentives



Peer to Peer
Support

ElevateHealth 2017/ Adapted from Lydia Lee

*Do the best you can until you know better.
Then when you know better, you do better.*

Maya Angelou, renowned poet

**Let's continue the conversation
and share your ideas**

FB: MedRec Network

MedSafety PSN

Twitter **@alicewatt**

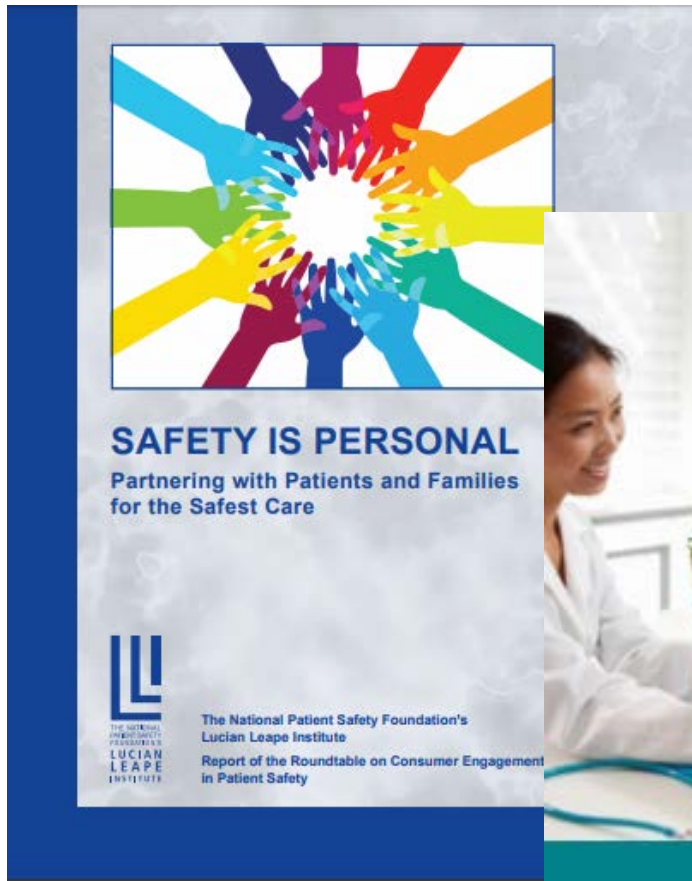
Contact: alice.watt@ismp-canada.org



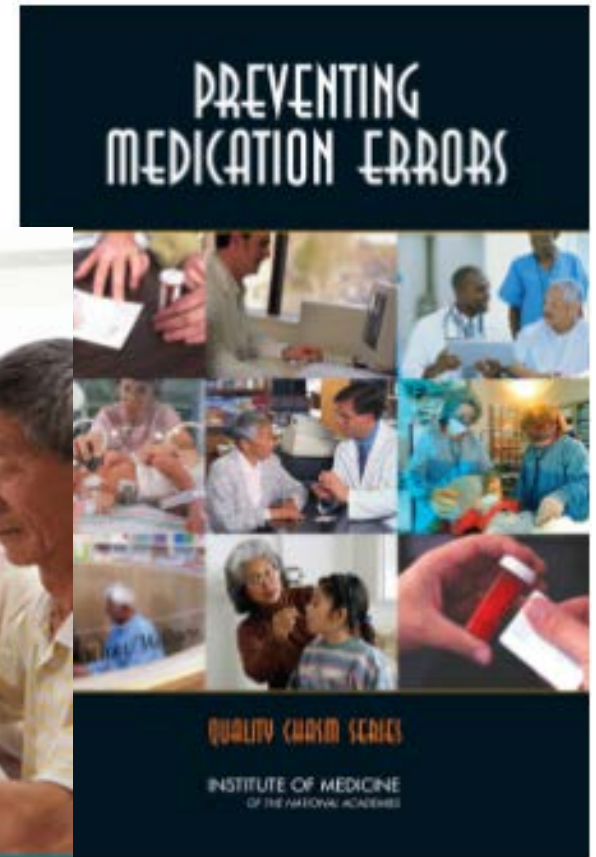
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2. WHO Global Safety Challenge: <http://www.who.int/patientsafety/medication-safety/en/>
3. CPSI – The Case for Investing in Patient Safety in Canada, August 2017
4. CPSI – Canadian Disclosure Guidelines 2011
5. ISMP Canada Safety Bulletin, May 25, 2017
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8. Ensing HT, et. Al. Identifying the Optimal Role for Pharmacists in Care Transitions: A Systematic Review. *J Manag Care Spec Pharm*. 2015 Aug;21(8):614-36.
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10. ElevateHealth 2017/ Adapted from Lydia Lee. Used with permission.
11. WHO/CPSI - Helen Haskell's Presentation: Patient engagement in medication safety at the point of care – roles, responsibilities , September 15, 2016
12. National Patient Safety Foundation's Lucian Leape Institute. *Safety Is Personal: Partnering with Patients and Families for the Safest Care*. Boston, MA: National Patient Safety Foundation; 2014.
13. Mayo Clinic Shared Decision tools: <https://diabetesdecisionaid.mayoclinic.org>,
<https://shareddecisions.mayoclinic.org>
14. https://www.ted.com/talks/celeste_headlee_10_ways_to_have_a_better_conversation
15. <https://www.wired.com/video/2017/11/expert-explains-one-concept-in-5-levels-of-difficulty-blockchain/>

Recommended Resources



Engaging Patients in Patient Safety – a Canadian Guide



Patient Engagement Video





Google Custom Search



Preventing harm from medication incidents is a responsibility of health professionals. **Consumers like you** can also play a vital role.

Reporting Medication Incidents
benefits all Canadians.



REPORT NOW

- [About SafeMedicationUse.ca](#)
- [About Medication Incidents](#)
- [Why Report?](#)
- [Resolving Concerns About the Safety of Your Care](#)
- [Frequently Asked Questions \(FAQs\)](#)
- [Your privacy](#)
- [5 Questions to Ask About Your](#)

5 QUESTIONS TO ASK ABOUT YOUR MEDICATIONS

when you see your doctor,
nurse, or pharmacist.

1. CHANGES?

Have any medications been added,
stopped or changed, and why?







*5 questions
to ask!*

Safety Resource
→ [LEARN MORE](#)



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-  Health Canada: Shortage of EpiPen (0.3 mg) auto-injector in Canada 2018-01-18
-  Health Canada: OFEV (nintedanib) - Risk of Drug-Induced Liver Injury and the Need for Regular Monitoring of Liver Function 2018-01-11