



Partnering with Patients “5 Questions to Ask About Your Medications”

CHCA Conference
October 2016



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The Institute for Safe Medication Practices Canada is an independent not-for-profit organization dedicated to reducing preventable harm from medications.

Our aim is to heighten awareness of system vulnerabilities and facilitate system improvements.

www.ismp-canada.org

With support from the Canadian Patient Safety Institute



Outline

- Background - A Patient Story
- Development - Partnerships and collaboration
- Who, How, Where,
- Spread and Dissemination
- Questions



Background – A Patient Story

Ms. C, 72 years old

- Admitted to hospital for **acute delirium**, new onset atrial fibrillation.
- **PMH** – HTN, seizures, recurrent DVTs on warfarin
- **Social Hx:** widowed, lives alone in home, Gr. 8 education, manages meds & ADLs independently
- **Meds** – phenobarbital, carbamazepine, telmisartan/HCTZ, warfarin
- **Warfarin history** – on between 7-8 mg/day for > 15 years. Has always had 5 mg and 1 mg tablets dispensed. INRs pre-admission – consistently stable for years between 2.3-3.0

How the Patient's Truth can be a MedWreckerPatient Story shared by:
Colleen Cameron, RPh, Pharm.D. Grand River Hospital, Kitchener ON
(SHN teleconference 2015 – Your discharge is someone's admission)



On discharge – delirium clearing and getting close to baseline, I took the home warfarin bottles out of her bag. “Can you please show me how you would take 7mg of warfarin?”



I confirmed with her “Is that 7mg?” → “Yes”

I put the 5mg vial behind my back and again asked her to put 7 mg in her hand using only 1 mg tablets.



Why the confusion?

Taking 7mg using  is **MATH**

Taking 7mg using  is **COUNTING**

What would the next admission look like if this hadn't been caught?

In the next admission for hematuria pulmonary hemorrhage, GI bleed and an INR > 10 , when we ask her what her warfarin dose is for her BPMH: "I take 7 mg of warfarin every day."

The Patient's Truth

Outcome

Ms. C has been back in her home for 6 months.

She is independent with her ADLs and is managing her medications using warfarin 1 mg tablets

Aggregate Analysis of Medication Incidents in Home Care

- 68% of the incidents reviewed were due to medication transition failure and involved a problematic transition of the patient and his/her medications from the hospital back home.

Reference: http://ismp-canada.org/download/safetyBulletins/2014/ISMPCSB2014-8_MedicationIncidentsHomeCare.pdf

“Poor communication at transitions can undo a lot of effort and compromise otherwise excellent care.”

Dr. M. Hamilton

SHN! November 2015 Teleconference Your discharge is someone's admission

Meet Emily



Background

- 2014 National Medication Safety Summit
 - Goal: Improving communication about medication among providers and patients and families at transitions of care
 - Action: Create and disseminate a national medication safety checklist for patients and families at transitions in care.

Outline

- Background - A Patient Story
- Development – Partnerships and Collaboration
- Who, What, Where, When, How?
- Spread and Dissemination
- Video

Project Co-Leads



Collaborative Process

- Completed environmental scan
- Working group developed draft checklist
- Feedback obtained from patients, clinicians, advisory panel and external stakeholder groups
 - Electronic survey
 - Email
- Checklist revised based on feedback received

Outline

- Background - A Patient Story
- Development – Partnerships and Collaboration
- **Who, What, Where, When, How and Why?**
- Spread and Dissemination
- Video

What are the 5 questions?

5

QUESTIONS TO ASK ABOUT YOUR MEDICATIONS

when you see your
doctor, nurse, or
pharmacist.

Visit safemedicationuse.ca
for more information.

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.

How can it be used and by who?

- Patients
 - Bring it to every appointment
 - Before you leave the hospital
 - Review with homecare nurse or pharmacist
- Healthcare providers
 - Help you focus your discussion about medications
 - Counselling tool – Teach back method/Show me how

Where can you use it?



Adapted from Medication Reconciliation in Home Care Getting Started Kit, January 2011

When to use it?

Use these five questions when you're:

- Attending a doctor's appointment (e.g., family physician or specialist, dentist, optometrist)
- Interacting with a community pharmacist
- Leaving the hospital to go home
- Visited by home care services

Why should clients use it

- Empowers you to be an active partner in your health
- Gives you the words and questions you need to ask
- Helps to prevent medication errors

It's about starting a conversation

- "...initiates 2 way communication and encourages everyone to be more involved with their personal health care – take more accountability and responsibility"
- "Excellent tool to promote conversation between patients and providers." – Canadian Nurses Association

Why should Home Care Clinicians use it

- Client/caregiver will be more informed
- Help to proactively prevent medication errors before they happen
- Pay it forward
 - Save time later for next care provider to perform MedRec if clients have an up-to-date medication list (BPMH)
- It's the right thing to do

MedRec as one component of medication management



1. Developed collaboratively by the Canadian Pharmacists Association, Canadian Society of Hospital Pharmacists, Institute for Safe Medication Practices Canada, and University of Toronto Faculty of Pharmacy, 2012.

2. www.health.gov.bc.ca/pharmacare

3. ISMP Canada. Medication Reconciliation in Acute Care: Getting Started Kit. 2011

4. ISMP Canada. Medication Reconciliation in Acute Care: Getting Started Kit. 2011

Adapted from Fraser Health, Providence Health Care, Provincial Health Services Authority, Vancouver Coastal Health

Figure 1: Components of Safe Medication Management

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- **Spread and Dissemination**
- Video

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5 Questions to Ask about your Medications

Home Endorsements Additional Languages



Request to add your logo

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Endorsements with Customized 5 Questions (Click to view 5 Questions):



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Request your customized poster today!
medrec@ismp-canada.org

DIGITAL POSTER CAMPAIGN REPORT

CLIENT: ISMP

START: JUN 6, 2016

END: JUL 30, 2016



REACHED AUDIENCE 532,308

TOTAL FREQUENCY:

PLANNED FREQUENCY: 571,680

ACTUAL FREQUENCY: 593,456

TOTAL IMPRESSIONS:

PLANNED IMPRESSIONS: 3,550,281

ACTUAL IMPRESSIONS: 3,903,982



how're you?
Digital Poster Network

IDS Canada how're you? Digital Poster Network

- Primary Care network in Ontario launched in June
- Launching in Quebec and BC in Sept/Oct



Consumers Can Help Prevent
Harmful Medication Incidents

SafeMedicationUse.ca Newsletter

Volume 7 • Issue 7 • September 20, 2016

5 Questions to Ask about Your Medications

Do you know what questions to ask about your medications? Knowing which medications, if any, have changed and how to take all your medications properly can help you to avoid serious problems. Ask the right questions to stay safe.

SafeMedicationUse.ca recently received a report highlighting the importance of asking your healthcare providers the right questions about your medications. A consumer undergoing cataract surgery was given prescriptions for two different eye drops: an antibiotic (ciprofloxacin) and a corticosteroid (prednisolone). Both eye drops were to be used for a few days up to and including the day of surgery, but only the antibiotic eye drop was to be continued after the surgery.

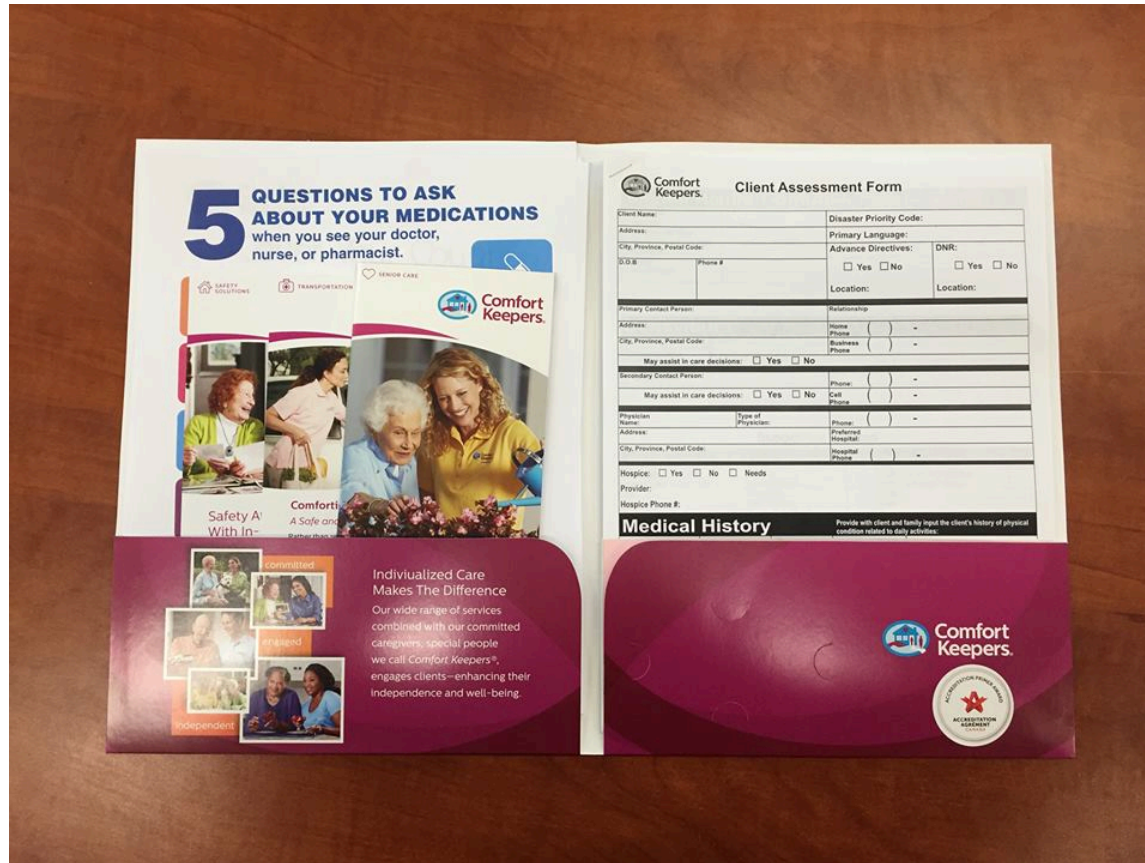
Following the surgery, the consumer mistakenly continued taking the corticosteroid eye drop and stopped taking the antibiotic eye drop. The instructions for using the eye drops were provided on a sheet of paper at an appointment 3 months before the operation, but after the surgery, the consumer's reduced vision prevented her from reading it. After using the wrong eye drop for 4 days, she experienced redness and discomfort in her eyes, and then a family member noticed the error. Although using the wrong eye drop in this case did not seem to affect the overall outcome of the surgery, it did lead to extra doctor visits and caused the patient discomfort and worry.

SafeMedicationUse.ca recommends starting a conversation with your healthcare provider by asking 5 specific questions (outlined below) in each of the following situations:

- during appointments with your doctors, including specialists, your optometrist, and your dentist
- before discharge from a hospital
- when you pick up your prescriptions from the pharmacy
- during home care visits

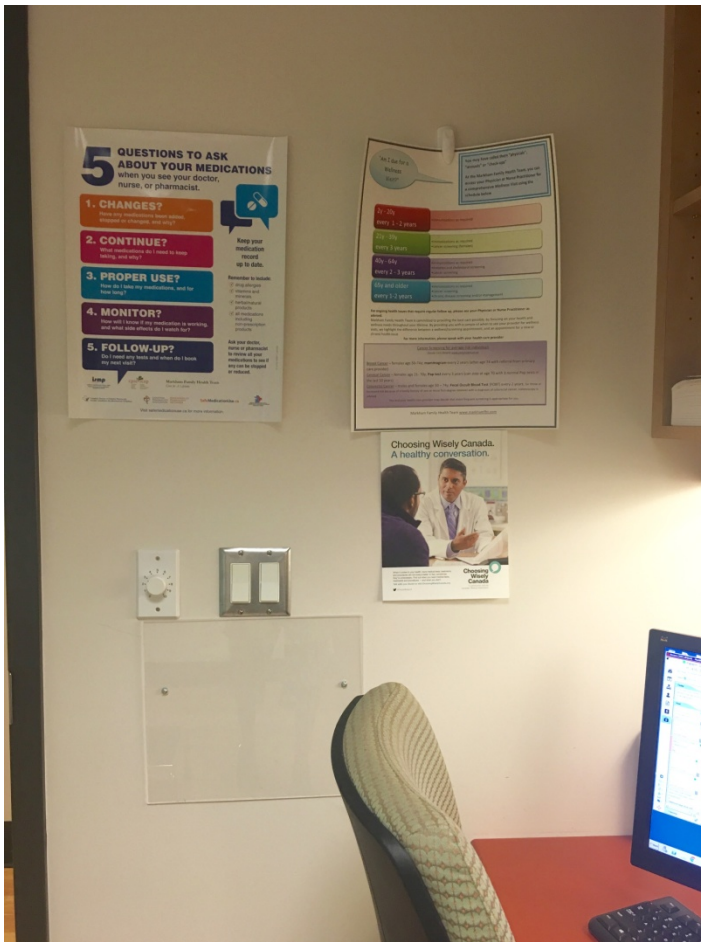


Comfort Keepers



"We see the "5 questions to ask about your medication" as a valuable tool we can use to educate our clients regarding medication safety."

- Comfort Keepers



www.markhamfht.com

Markham Family Health Team
Care for A Lifetime

"I believe a primary care drive for patients belonging to family health teams, could have a significant impact by raising the profile of MedRec as well as additional opportunities for patient safety improvements in medication management."

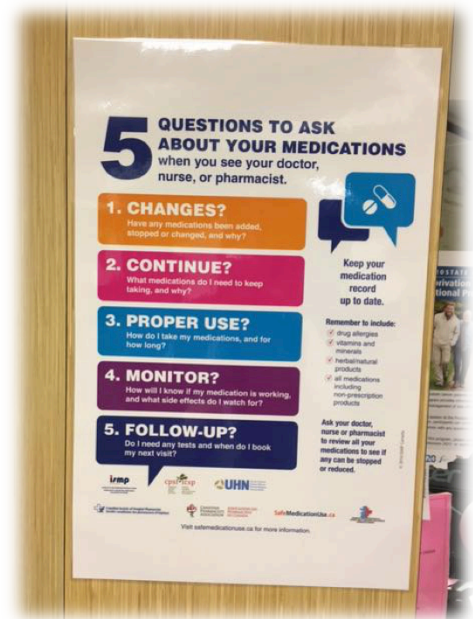
- Dr. John Maxted, Family Physician



Pharmacy Awareness Week 2016
University Health Network



Poster inside the elevator
Michael Garron Hospital
(formerly TEGH)



Princess Margaret
Outpatient Pharmacy

Send your photo to medrec@ismp-canada.org



Additional Reach

- Social Media and Listservs
 - Facebook – MedRec network, Twitter @ISMP Canada, @SafeMeduse
 - Ontario MedRec Network google group
 - CSHP listserv
- Websites
 - Deprescribing.ca
 - CARP
- E-Learning module
 - RxBriefcase

Additional Formats

- Patient Notes (modifiable)
- Screensaver (patient bedside system)
- Animated Powerpoint slide
- Swag (e.g. business cards, fridge magnets, mouse pads etc.)



Patient Notes (modifiable pdf)

works on some mobile devices

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?

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How do I take my medications, and for how long?

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

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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.

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Visit safemedicationuse.ca for more information.



SafeMedicationUse.ca



MP4 video

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Additional Languages

- Based on the 2011 Canada census:
 - Punjabi
 - Chinese (simplified/traditional)
 - Spanish
 - Italian
 - German
 - Tagalog
 - Arabic
- Based on electronic survey results
 - Indigenous languages

CHINESE (SIMPLIFIED)/简体中文

看医生, 护士或是药剂师时需要询问的
5 种有关自己药物的问题.



1. 任何更改?
有那种药物是新添的, 停服的, 或更改的?
为什么呢?
2. 是否继续?
我应该继续服用那种药物? 为什么呢?
3. 正确服用?
我应该怎样服用我的药物? 服药要维持多久?
4. 如何监察?
我怎样会知道我的药物发挥效用? 有那些副作用
需要留意?
5. 需要覆诊?
我是否需要任何复查或检验? 我应否预定下一
次的覆诊期?

保全一份最新
药物服用记录.

记得包括:

- ✓ 药物过敏
- ✓ 维他命, 矿物质
- ✓ 草本药物/天然保健产品
- ✓ 所有药物包括非处方药物

请求您的医生, 护士或药剂师检查一下您所有服用的药物, 以作出有关停服或减少份量的安排.

若要更多资讯, 请上网址
safemedicationuse.ca

Additional Languages

- Hungarian
- Tibetan
- Ukrainian
- Polish
- Greek
- Albanian
- Turkish

POLISH/JĘZYK POLSKI

5 pytań na temat leków, które należy zadać podczas wizyty u lekarza, pielęgniarki lub farmaceuty



1. Zmiany?
Czy jakieś leki zostały dodane, zatrzymane lub zmienione i dlaczego?

2. Kontynuować?
Jakie leki mam dalej zażywać i dlaczego?

3. Właściwie stosowane?
Jak mam brać swoje lekarstwa i jak długo?

4. Monitorowanie?
Jak rozpoznać, czy mój lek działa i na jakie skutki uboczne mam zwracać uwagę?

5. Dalsze działania?
Czy muszę zrobić jakieś testy i na kiedy mam zamówić następną wizytę?

Uaktualniaj swoją dokumentację medyczną.

Pamiętaj, aby uwzględnić:

- ✓ uczulenia na leki
- ✓ witaminy i minerały
- ✓ produkty ziołowe/naturalne
- ✓ wszystkie leki, w tym produkty kupione bez recepty.

Poproś swojego lekarza, pielęgniarkę lub farmaceutę, aby przejrzał wszystkie Twoje leki w celu sprawdzenia, czy jakieś lekarstwo można przestać brać lub zmniejszyć jego dawkę.

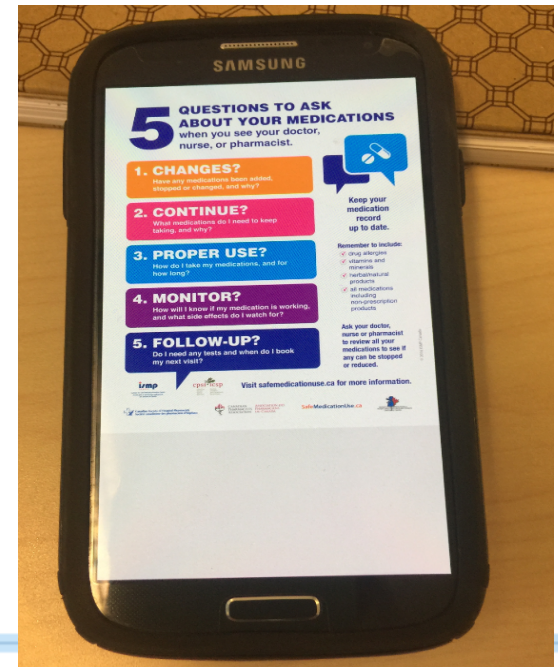
  Po więcej informacji odwiedź stronę: safemedicationuse.ca

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Additional Spread Idea

- Take a screenshot of the '5 questions to ask' on your mobile device
- Make it your home/lock screen



What can you do today?

- Share it with your friends and family
- Introduce it to your clients
- Use it in practice as a counselling tool
- Endorse and request customized PDF poster from your organization
- Share a photo or story @ medrec@ismp-canada.org or through FB or Twitter
- ***#5questionsaboutmeds***

Next steps

- Survey patients and healthcare providers
- Share the message to encourage clients to be an active participant in their healthcare by asking the right questions.

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Keep your medication record up to date.

Remember to include:

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- ✓ 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.

As one client put it “These 5 questions could save your life.”

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Visit safemedicationuse.ca for more information.

YouTube CA Search

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5 Questions to Ask About Your Medications

ISMP Canada

 46

You can be empowered



To be an active partner in your healthcare!

<https://youtu.be/BJI1ToB-Dv8>

Resources

5 questions to ask about your medications poster

- ismp-canada.org/medrec/5questions.htm

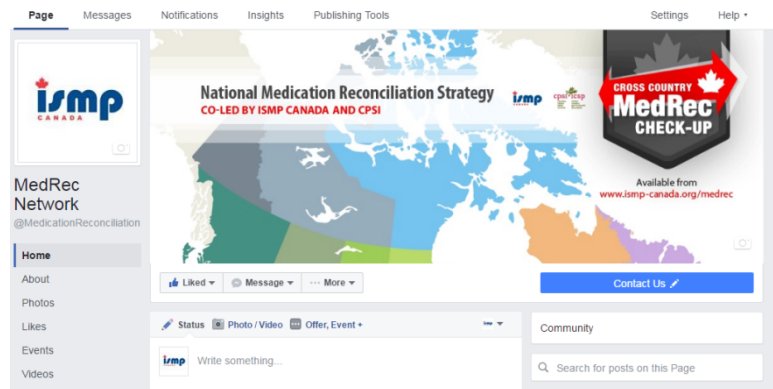
Additional Resources

- *Deprescribing* at deprescribing.org/
- *My MedRec App* at www.knowledgeisthebestmedicine.org/index.php/en/app

Like us on



www.facebook.com/MedicationSafety



www.facebook.com/MedicationReconciliation

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To Keep Up-to-Date with the Latest News on Medication Safety



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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](#)

Tell Us How We're Doing:

TAKE THE SURVEY





Latest News and Resources

- [Similar Patient Names Leads to Pregnant Woman Getting Wrong Prescription](#)
- [Safe Practices for Medication Use \(Take Charge of Your Medicines!\)](#)
- ["Take as Directed: Your Prescription for Safe Health Care in Canada" is now available in Canadian bookstores!](#)
"The authors provide helpful information that can guide Canadians on how to manage their health care, including safe medication use" says Sylvia Hyland, Vice President and Chief Operating Officer of ISMP Canada.
- Health Canada is reminding Canadians about using acetaminophen safely.
 - Read [Health Canada's Information Update on Acetaminophen](#)
 - Read the SafeMedicationUse article "[Spotlight on Acetaminophen](#)"
- [Angeliq Drug Samples Mistakenly Provided as Birth Control - Newsletter - PDF](#)
- [Working with Consumers and Patients to Prevent Medication Incidents: Early Learning from ISMP Canada's Consumer Reporting and Learning Program, *www.SafeMedicationUse.ca* - Webinar - February 23, 2011](#)
- [Epinephrine Auto-Injectors - Know How to Use EpiPen and Twinject Properly](#)

Medication Incident Reporting

- Incidents voluntarily reported

	<p><u>Practitioners</u></p> <p>Healthcare Professional - (e.g., nurse, pharmacist, physician)</p>
	<p><u>General Public</u></p> <p>Preventing harm from medication incidents is a responsibility of health professionals. Consumers like you can also play a vital role.</p>

- Incidents discussed by interdisciplinary team of analysts (nurses, pharmacists, physician)

ISMP Canada Safety Bulletins



ISMP
Canada

Institute for Safe Medication Practices Canada
 REPORT MEDICATION INCIDENTS
 Online: www.ismp-canada.org/err_index.htm
 Phone: 1-866-544-2672

A KEY PARTNER IN
CHIRPS **SCDPIM**
Canadian Hospital Incident Reporting System Canadian Society for Clinical Pharmacy Incident Management

ISMP Canada Safety Bulletin

Volume 12 • Issue 6 • August 28, 2013

Deaths Associated with Medication Incidents: Learning from Collaborative Work with Provincial Offices and Chief Medical Examiners

Background

Each Canadian province and territory has an Office of the Chief Coroner or Chief Medical Examiner responsible for investigating deaths from unexplained, unexpected, or unnatural causes. Within the scope of these investigations are deaths associated with medication incidents. In-depth analysis of information from these cases offers unique opportunities to identify underlying factors and generate recommendations to reduce the chances of similar incidents in the future. ISMP Canada has had a formal collaborative relationship with the Office of the Chief Coroner in one province since 2004, and has worked with other Offices on selected cases. A collaborative medication safety project undertaken with the Offices of the Chief Coroner or Chief Medical Examiner in 4 provinces provided an opportunity to test a coordinated process for analysis of medication incidents from several jurisdictions, and to share learning broadly. This bulletin describes selected findings from the project.

Methods and Findings

An analysis team from ISMP Canada, consisting of 3 pharmacists, a registered nurse, and a physician with experience as a coroner, reviewed 523 death cases (from the years 2007 to 2012) in which a medication incident was potentially associated with the death. Of

these, 122 of medication incidents from ISMP Canada the 122 cases the criteria for incident that the patient's

Medications

The medication incidents as psychotropic antidepressant cardiovascular

Table 1: Medication incidents

Medication
Total no. of incidents
Antidepressants
Antipsychotics
Anticoagulants
Cardiovascular
Insulin
Some incidents

ISMP Canada Safety Bulletin – www.ismp-canada.org/ISMPCSafetyBulletin



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Canadian Hospital Incident Reporting System Canadian Society for Clinical Pharmacy Incident Management

SafeMedicationUse.ca Newsletter

Volume 4 • Issue 5 • July 21, 2013

Consumers Can Help Prevent Harmful Medication Incidents



SafeMedicationUse.ca Newsletter

Some Capsules Are Not Meant to Be Swallowed

swallowed to be effective. But did you know that some that are used to treat lung disease must be inhaled to be effective? Spiriva (tiotropium bromide), a medicine for treating chronic obstructive pulmonary disease (COPD), is a medicine for treating COPD. Spiriva capsules must be used with a special inhaler device called




Figure 1 Spiriva capsules and HandiHaler device. To take a dose of Spiriva, the capsule must be removed from its blister pack and placed into the HandiHaler. The button on the side of the HandiHaler is pressed to puncture the capsule. The medicine inside the capsule can then be inhaled by breathing slowly through the mouthpiece of the HandiHaler.

take medicine, don't assume that all capsules are the same and take note of any additional reminder labels on

to a dosette or pill organizer. Keep the capsules in their original packaging. Do not let your pharmacist put a reminder label on the package (e.g.,

in use.ca

Page 1 of 2



Ontario CRITICAL Incident Learning
Improving quality in patient safety

Issue 5
 August 2013

Promoting the Safe Use of Insulin in Hospitals


Insulin is a high-alert medication¹ that continues to be one of the top drugs involved in incidents associated with harm or death that are voluntarily reported to ISMP Canada.² Efforts to reduce the potential for harm with this drug have resulted in numerous recommendations on best practices for improving the safety of insulin use in hospitals.^{3,4} These strategies touch on all aspects of insulin use throughout the medication-use process. Although many of these interventions have been adopted by hospitals, harmful incidents involving insulin continue to occur.

ISMP Canada undertook a knowledge translation⁵ project to identify effective, evidenced-based interventions and to develop tools to support Ontario hospitals in ensuring safe insulin use, with the overall goal of decreasing potential patient harm. As part of this project, ISMP Canada convened an expert panel to select 2 key insulin-use interventions and then asked expert working groups to develop specific guidelines and templates to support the selected key interventions.

Call to Action for Hospitals

- Develop and implement a diabetes management record:
 - Create a record where all relevant aspects of a patient's glycaemic management can be documented to facilitate decision-making with regard to insulin therapy.
 - Information to be documented in this record includes results of blood glucose testing, details of every insulin dose administered, nutritional status, occurrence of hypoglycaemic episodes, and other factors that may affect blood glucose.
- Use standard order sets for subcutaneous insulin therapy:
 - Develop organization-wide, evidence-based standards and standardized terminology for ordering subcutaneous insulin.
 - Develop recommendations for prescribing and monitoring subcutaneous insulin.
 - Discourage the use of sliding-scale insulin alone.
 - Promote the use of scheduled basal and bolus insulin doses, as well as appropriate correction doses.

The tools developed for this project, available from www.ismp-canada.org/insulin, include a report on the knowledge translation of insulin-use interventions, a template for a diabetes management record, and guidelines for developing order sets for subcutaneous insulin, as well as templates for such order sets. The guidelines and templates that were developed can be customized for use in community or academic hospitals and can be used with both paper-based and electronic systems and processes. These tools and other resources are available for hospitals to use and adapt to meet their own requirements.



ISMP
Canada

ISMP Canada
www.ismp-canada.org
 1-866-544-7672
info@ismp-canada.org

Patient Engagement Resources



[Doc Mike Evans](#)

<http://youtu.be/f2KCWMnXSt8>

iPhone
Android
Blackberry



Medication
Record Book





Alice Watt R.Ph

Medication Safety Specialist

awatt@ismp-canada.org

medrec@ismp-canada.org