The Institute for Safe Medication Practices Canada (ISMP Canada) is an independent national not-for-profit agency established for the collection and analysis of medication error reports and the development of recommendations for the enhancement of patient safety.

The Healthcare Insurance Reciprocal of Canada (HIROC) is a member owned expert provider of professional and general liability coverage and risk management support.

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Medication Reconciliation: Moving Forward

Medication reconciliation is a formal process in which healthcare providers work with patients, families, and other care providers to ensure that accurate and comprehensive medication information is communicated across transitions of care. Medication reconciliation requires a systematic and comprehensive review of all medications that a patient is taking, to ensure that any medications being added, changed, or discontinued are carefully evaluated. It is a component of medication management that enables the most appropriate medication-related decisions to be made.[1] The World Health Organization has identified medication reconciliation as a global priority for patient safety.[2] This bulletin provides an update on the medication reconciliation directions in Canada.

Medication reconciliation was introduced as a national patient safety initiative through Safer Healthcare Now! in 2005 and is now identified by most provinces and territories as a key strategic priority for improving the safety and quality of healthcare. Also in 2005, Accreditation Canada established Required Organizational Practices (ROPs) for medication reconciliation. In 2006 ISMP Canada published a bulletin describing early evidence for this medication safety initiative.[3]

Medication Incident Example

A patient was admitted to hospital from the emergency room. At the time of the admission, the patient was asked about home medications. It was documented that the patient was requiring fentanyl patch “225 mcg” every 3 days. Through a best possible medication history (BPMH) obtained as a component of medication reconciliation in the hospital, it was determined that the patient had in fact been applying “two 25 mcg” patches every 3 days. Fortunately, the process of medication reconciliation was completed before the time of the next dose, and the correct dose was administered.

Moving Forward

In spite of expressed support for medication reconciliation across the country, implementation remains a challenge. In 2010, Accreditation Canada found opportunities to enhance medication reconciliation.[4] For example, only 46% of healthcare organizations were conducting medication reconciliation at the time of admission, and only 44% were conducting this process at points of transfer.

In an effort to understand how best to accelerate a system-wide strategy to optimize medication reconciliation, the Canadian Patient Safety Institute (CPSI), Canada Health Infoway, and ISMP Canada cohosted a National Medication Reconciliation Summit in February 2011. Participants identified the following 9 distinct themes, and developed specific recommendations for each:[5]

- interprofessional engagement
- leadership accountability
- engagement of the public (consumers) and caregivers
- physician roles
- culture and human systems
- education and training
- information systems and technology
- tools and resources
- measurement

Co-led by CPSI and ISMP Canada, ten national organizations (listed below) have now formed an advisory group for a National Medication Reconciliation Strategy to assist with moving forward the themes and recommendations from the national summit:

- Accreditation Canada
- Canada Health Infoway
- Canadian Medical Association
- Canadian Nurses Association
- Canadian Patient Safety Institute
- Canadian Pharmacists Association
- Canadian Society of Hospital Pharmacists
- College of Family Physicians of Canada
- Institute for Safe Medication Practices Canada
- Royal College of Physicians and Surgeons of Canada

One of the first undertakings for this advisory group was to identify leading practice organizations and jurisdictions and to create an inventory of supporting tools, resources, and research that can be shared across the country. This evolving inventory can be found on the Cross Country MedRec Check-up website: www.ismp-canada.org/medrec/map/.

Canada is making medication reconciliation a national priority through multilevel support, research, and innovative programs. The following are examples of the programs and strategies that have been undertaken to advance medication reconciliation:

- The British Columbia Ministry of Health has committed funding for the provision of standardized medication review services by community pharmacists. In addition, as part of the Clinical Care Management program, the Ministry of Health has identified medication reconciliation in residential care as a priority. The BC Patient Safety and Quality Council is committed to facilitating and supporting the province on this initiative.
- Alberta Health Services has created a provincial model and approach for implementing medication reconciliation in all sectors across the province by 2015.
- The Ontario Ministry of Health and Long-Term Care (MOHLTC) has launched the MedsCheck program, which remunerates community pharmacists for services related to medication reconciliation. In addition, MOHLTC support for initiatives related to medication reconciliation on discharge from hospital has led to the development of discharge medication reconciliation tools that have been shared nationally through Safer Healthcare Now!
- In Quebec, there is a recognized service whereby community pharmacists provide medication lists to the healthcare team of a patient requiring care in an emergency department.
- Many provinces have either established or are working toward implementing an electronic drug information system that will allow healthcare providers to have secure access to patients' medication profiles. For example, Prince Edward Island has a fully integrated system for electronic health records.
- Canada Health Infoway has issued the ImagineNation Outcomes Challenge, which seeks to accelerate the use and spread of innovative solutions in healthcare information and communication technologies that have the potential to improve the quality of healthcare and patients' experience in Canada. The Challenge involves 4 key areas, including medication reconciliation.

The overall aim of medication reconciliation is to ensure that communication about medications at all transitions of care is accurate and effective. The vision is that every Canadian will have an accurate medication list that accompanies them as they transition through the healthcare system.

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ISMP Canada is a national voluntary medication incident and 'near miss' reporting program founded for the purpose of sharing the learning experiences from medication errors. Implementation of preventative strategies and system safeguards to decrease the risk for error-induced injury and thereby promote medication safety in healthcare is our collaborative goal.

Medication Incidents (including near misses) can be reported to ISMP Canada:
(i) through the website: http://www.ismp-canada.org/err_report.htm or (ii) by phone: 416-733-3131 or toll free: 1-866-544-7672.

ISMP Canada can also be contacted by e-mail: cmirps@ismp-canada.org. ISMP Canada guarantees confidentiality and security of information received, and respects the wishes of the reporter as to the level of detail to be included in publications.

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