



Medication Reconciliation (MedRec)

safer healthcare
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Frequently Asked Questions

Where can I find information about MedRec in the home care setting?

There are several resources which contain information about MedRec in Home Care.

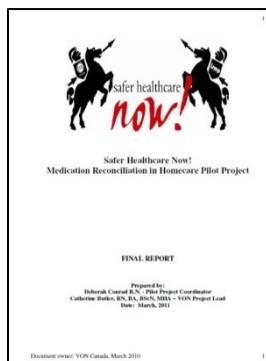
Safer Healthcare Now! resources

Safer Healthcare Now! Home Care Getting Started Kit



Published in 2011, the Home Care Getting Started Kit was the result of a partnership between VON Canada, the Institute for Safe Medication Practices (ISMP) Canada and the Canadian Patient Safety Institute (CPSI). This kit describes the MedRec process in home care, provides a review of evidence to support the need for MedRec in home care and provides tools and resources to support effective implementation. The Getting Started Kit is accessible [here](#). Note: *The Home Care Getting Started Kit will be undergoing revisions and updates in fiscal 2014-2015*. To access a slide deck from a *Safer Healthcare Now!* workshop used to describe the Getting Started Kit, click [here](#).

Home Care Pilot Project



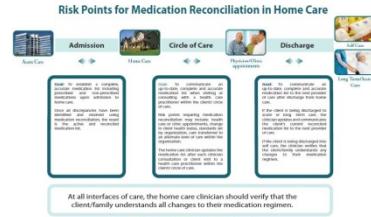
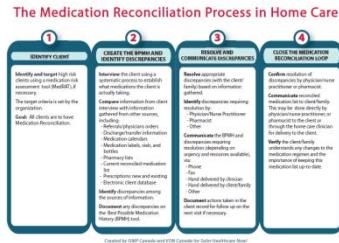
The Home Care Getting Started Kit was based in large part on a 2008-2010 home care pilot project that brought together 15 pan-Canadian home care teams to:

- Develop a broad definition for what can be applied in the home care setting.
- Develop and test tools, guides, measures and processes which can be applied to MedRec in the homecare setting.
- Identify and share challenges and lessons learned in the application of MedRec in home care across Canada

This work was again led by VON Canada, ISMP Canada and CPSI. The final report of this pilot project is available [here](#). To access a webinar describing the results of the pilot project, click [here](#). To access a "Scrapbook of Testimonials" from home care pilot team practitioners describing their stories on value of MedRec, click [here](#).

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One-pagers/Quick Reference Posters



Steps of the MedRec Process in Home Care

Home Care Virtual Action Series

In 2010, a Home Care Virtual Action Series (VAS) was designed for home care practitioners, home care organizations and healthcare professionals who wanted to implement MedRec into their practice. The VAS was comprised on five webinars sessions. The recordings and slide decks from each of these sessions are freely available for viewing/download [here](#).

National Calls/Webinars

Since 2006, several webinars have featured content relevant to MedRec in Home Care they include:

- December 2009, "What's New with MedRec in Home Care - Results of Home Care Pilot"- Speakers: Debbie Conrad, Marg Colquhoun. To access recording and slides click [here](#).
- December 2011, MedRec Success Stories from Across the Continuum- Speaker (representing home care): Holly Sulsbury (BC). To access recording and slides click [here](#).
- June 2012, "Sharing the Ontario Central Community Care and Access Centre's Med Rec Success"- Speakers: Mary Burello, Lisa Sever. To access recording and slides click [here](#). To watch a Canada Health Infoway video on Central CCACs Medication Management Support Services, click [here](#).
- March 2014, "Continuing the circle of care: MedRec in the Community"- Speakers: Ann Nickerson /Michelle Anglehart (NB) and Colleen Stoecklein/ Liz Moran- Murray (SK). To access recording and slides click [here](#).

MedRec Community of Practice

On this website, designed for sharing of information, you can find many home care forms, policies, educational resources and more. To access these home care related documents, click [here](#). There is also a home care discussion forum where you can review questions asked and responses provided from other users of the Community of Practice. To access the home care discussion forum, click [here](#).

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Accreditation-related resources

The following are excerpts from [Accreditation Canada's 2014 Required Organizational Practices \(ROP\) Handbook](#). Additional guidance on this ROP can be found on pages 25/26 of the handbook. Organizations are also encouraged to view Accreditation Canada's "MedRec FAQ" documents accessible via an organization's Accreditation Canada web portal.

Accreditation Canada Required Organizational Practice for Home and Community Care:

For the following sets of standards: Case Management Services, Community-Based Mental Health Services and Supports, and Home Care Services.

When medication management is a component of care (or deemed appropriate through clinician assessment), and with the involvement of the client, family, or caregiver (as appropriate), the team generates a Best Possible Medication History (BPMH) and uses it to reconcile client medications.

TESTS FOR COMPLIANCE

- (Major) The organization identifies and documents the types of clients who require medication reconciliation.
- (Major) At the beginning of service the team generates and documents a Best Possible Medication History (BPMH), with the involvement of the client, family, health care providers, and caregivers (as appropriate).
- (Major) The team works with the client to resolve medication discrepancies OR communicates medication discrepancies to the client's most responsible prescriber and documents actions taken to resolve medication discrepancies
- (Minor) When medication discrepancies are resolved, the team updates the current medication list and provides this to the client or family (or primary care provider, as appropriate) along with clear information about the changes
- (Major) The team educates the client and family to share the complete medication list when encountering health care providers within the client's circle of care.

A recorded session of an Accreditation Canada webinar, describing changes to the Home Care ROP in 2014 is available for purchase [here](#).

Note: You can consult the Accreditation Canada "Leading Practices" database to view those home care teams given this designation [here](#).

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Other relevant references

The “Safety at Home: A Pan-Canadian Home Care Study” found that the rate of adverse events in Canadian Home Care clients was 10 -13 per cent, over a period of one year with **half** being deemed to be preventable. The main types of adverse events identified from both chart review and secondary databases were falls, **medication-related incidents** and infections. System weaknesses identified as contributing to adverse events included: “**Lack of integration of HC teams, lack of care coordination across healthcare sectors and failures in communication**”. To access the full study, click [here](#).

The Institute for Safe Medication Practices (ISMP) Canada’s [“Aggregate Analysis of Medication Incidents in Home Care”](#) identified that 1) medication transition failures and 2) complex communications were identified as major themes among the medication incidents reported to ISMP Canada. Both of these themes relate to MedRec.

The Canadian Patient Safety Institute has a [website](#) with medication safety resources aimed at home care providers, patients and families, and policy makers and academics. Several of these medication safety resources emphasize the importance of keeping a list of medications and sharing the list with your health care providers (e.g., [Medication Safety Brochure](#), [Poster on Using Medications Safely](#)).

The Institute for Healthcare Improvement’s [“How-to Guide: Improving Transitions from the Hospital to Home Health Care to Reduce Avoidable Rehospitalizations”](#)

NOTE: While this document reviews Home Care specific information about MedRec, there are similarities in specific steps of the MedRec process (such as collection and creation of a BPMH) across care settings (e.g., acute care, long-term care). You may wish to consult other resources accordingly.