



Medication Reconciliation (MedRec)

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Frequently Asked Questions

How Do I prepare for the Admission MedRec Quality Audit?

Preparing for the audit

STEP 1 – Determine your eligibility to use the MedRec Quality Audit tool.

Participation in the audit encourages the use of the MedRec Quality Audit tool. The tool was developed for use at admission in acute and long term care settings. If you meet both of the following criteria, you are eligible to use this tool/participate:

- You have an implemented **ADMISSION** MedRec process and
- Your admission MedRec process follows an **Acute Care** OR **Long Term Care** model

For reference, access the “Getting Started Kits”

[Acute Care](#)
[Long Term Care](#)

STEP 2 – Consider which care areas you would like to audit and how you might wish to group/analyze the audit results.

Determine the areas **where an admission MedRec process is currently established and which of these areas you would like to audit.** This may vary from auditing several individual units or the organization as a whole. Your decision will determine at what level(s) you are able to analyze your data. That is, if you decide to collect data from a number of units you will be able to compare quality performance between units, roll it up to the organizational level and compare to the region, province and the country. If you choose to collect data for the organization as a whole your analysis will be limited to comparing the organization’s performance to the region, province and country.

We would encourage organizations to audit as many areas as resources will allow.

NOTE: For the purpose of this tool, the “area” being audited is the area of care to which the patient has been admitted (e.g. medicine unit) rather than from where they have been admitted/transferred (e.g. an Emergency Department or Pre-Admission Clinic).



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STEP 3 - Access your audit tool

There are two ways to access your organization's area-specific audit tool/data collection form:

1. You may generate your tool yourself. Read the [online instructions](#); or
2. [Get help by contacting](#) PSM staff at 416-946-3103 or metrics@saferhealthcarenow.ca.

Note: Each audit tool has space to accommodate data from 5 patient chart audits. Once, the area-specific form has been generated, print as many forms as you require for your audit. Do not photocopy the forms.



STEP 4 – Determine the number of charts to audit and how the charts will be selected

Given that organizations differ in size, patient volumes, and availability of resources to conduct audits, there are no specific requirements for the number of charts to audit. **Both the number of charts (sample size) and the method used to select charts for audit is at the discretion of the end users.** For example:

- (1) if your organization is small or has relatively few admissions, you may wish to audit the charts of all admitted patients;
- (2) if your organization is >100 beds you may prefer to sample from individual units. *For those seeking guidance, on the number of charts to audit we provide the following recommendation: a sample of a minimum of 10 patient charts per area of care selected.*

Note: the larger the number of charts included (the sample size), the more robust the results

Now you are ready to go!

For more information, please see the FAQ 'How do I complete the quality audit and submit results!'