A targeted strategy and training program to improve the medication reconciliation process

WHAT WAS DONE ?

- We developed a strategy and an organizational thinking to remove human and technology barriers in performing medication reconciliation (MR)
- We design a program to improve the overall quality of MR and increased the added value of MR for clinicians, nurses and pharmacists

WHY WAS IT DONE ?

- MR was implemented in our hospital in 2011
- Completion of a Best Possible Medication History (BPMH) for 70% of inpatients in less than 24 hours

HOW WAS IT DONE ?

3 PDSA cycles

- 1 month
- 1 month
- 1 month
- 1 year

Sustainability

Quantity | Quality

2011 | 2012 | 2013 | 2014

The high patient volume decreased the quality of our BPMH

WHAT HAS BEEN ACHIEVED ?

Semi-structured interviews:
“Customers approach”: physicians (anesthesists, surgeons) and nurses
- Prefer a qualitative approach to a quantitative approach

“Customers approach”: Pharmacists and pharmacy students
- Training of clinical pharmacist

Outcomes of the “Customers approach”:
Surgeons, anesthesists, nurses

BEFORE
AFTER

Quantitative metrics :
- % of BPMH completed during the first 24h after admission
- % of BPMH completed during the 72h after admission

Quality parameters :
- Target “high risk” inpatients
- Establish criteria of prioritization
- Identify relevant sources of information to complete BPMH

Analysis of the dysfunctions :
- to determine their causes
- to purpose sustainable solutions

“High risk” in patients (HIV, epilepsy, diabetes ...)

Criteria of prioritization ( > 65 years, > 3 medications, > 2 chronic pathologies ...)

Relevant sources to establish BPMH (Medical record, patient, general practitioner ...)

Outcomes of the “Customers approach”:
pharmacists, students

BEFORE
AFTER

Training pathway including :
1/ E learning module 1 : (20 min) Response to the questions students: “why?” performing BPMH
2/ E learning module 2 : (25 min) “how?” performing BPMH
3/ Videos about relevance and impact of BPMH to prevent medication error (15 min) (Ermess : www.youtube.com/watch?v=vYECxe0S_XY)
4/ Short videos about communication showing what can be poor or good communication (7 min)
5/ Practical exercises to perform for learners about Real life examples of BPMH

Best management of BPMH activity
- Professional guidance of the student, from the preparation of the interview up to final BPMH with the pharmacist

THEORY

PRESENTATION

with our experience

PRACTICE

Improvement

- Evaluation of the efficacy of the training program
  - Comparing the concordance of BPMHs : student and pharmacist
  - Evaluation of the learners' satisfaction with a survey
- Certification

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