

Collaborative Medication Delivery Model in Community Care



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Medication and Seniors



The Issue

50%

Prescription Drugs

- Seniors took at least 5 different prescription drugs

25%

Number of medications

- Seniors took between 10 and 19 pills each day

0.20

Medication-related adverse events

- Per 1,000 hospitalizations as a result of adverse events related to medications



Cost to the Ontario Healthcare System



\$13,600,000

Medication Management Challenges



Lack of proper education

Lack of supports

Lack of recording standards

The Need



Develop a comprehensive medication management program to reduce medication related errors, hospitalization rates and ensure continued independence for seniors

The background of the slide features a light gray world map. Overlaid on the map are various chemical structures, including benzene rings and hexagons. Some of these structures are highlighted with a rainbow-colored gradient, while others are in black or gray. The right side of the slide is a solid yellow vertical band.

2

Planning and
Implementation

Planning

RFP

Resident Care Pharmacy selected following a comprehensive selection process

Pharmacy Task Force

Comprising of front-line staff, supervisors, pharmacy liaison

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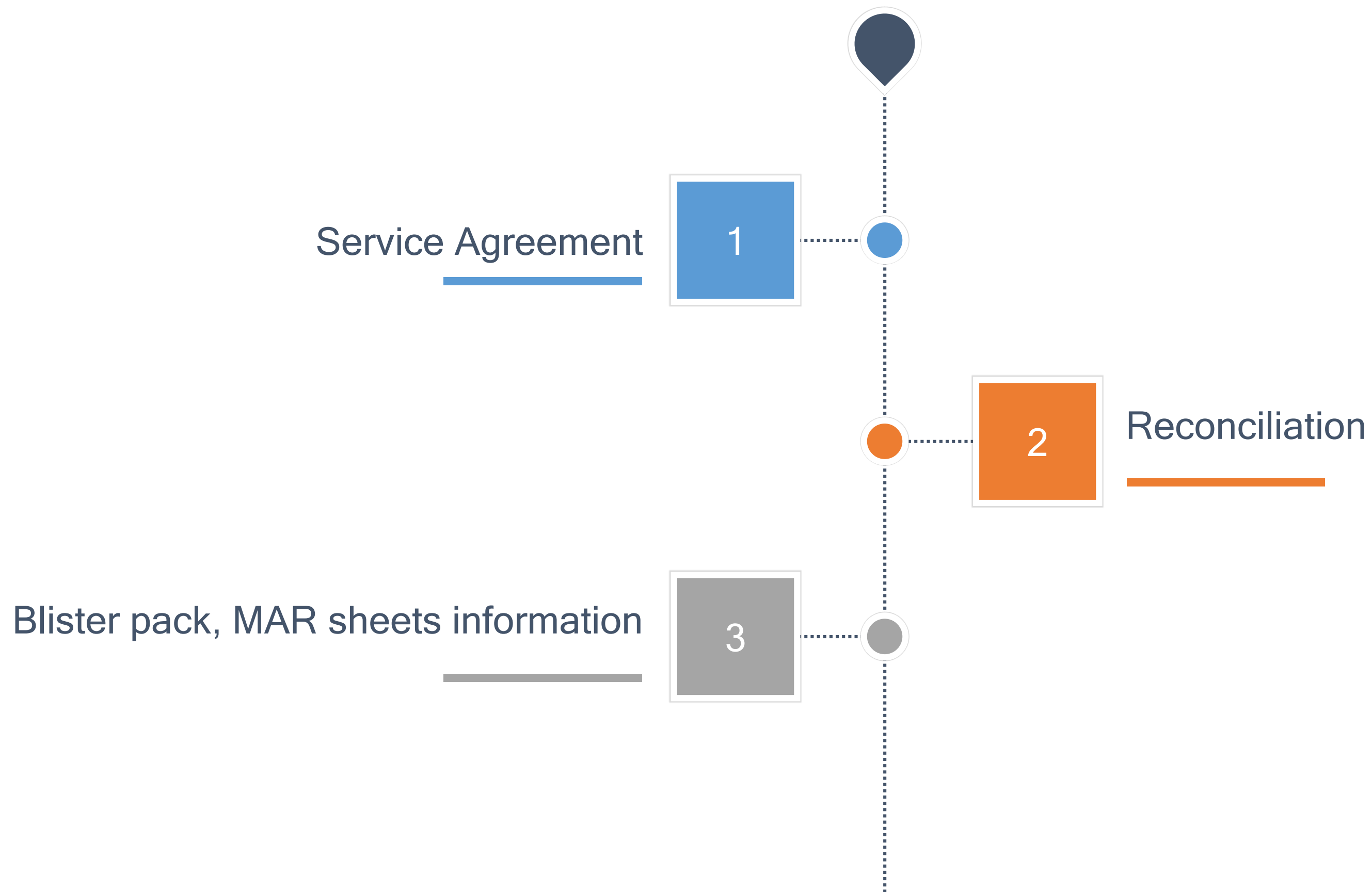
Orientation and P&P

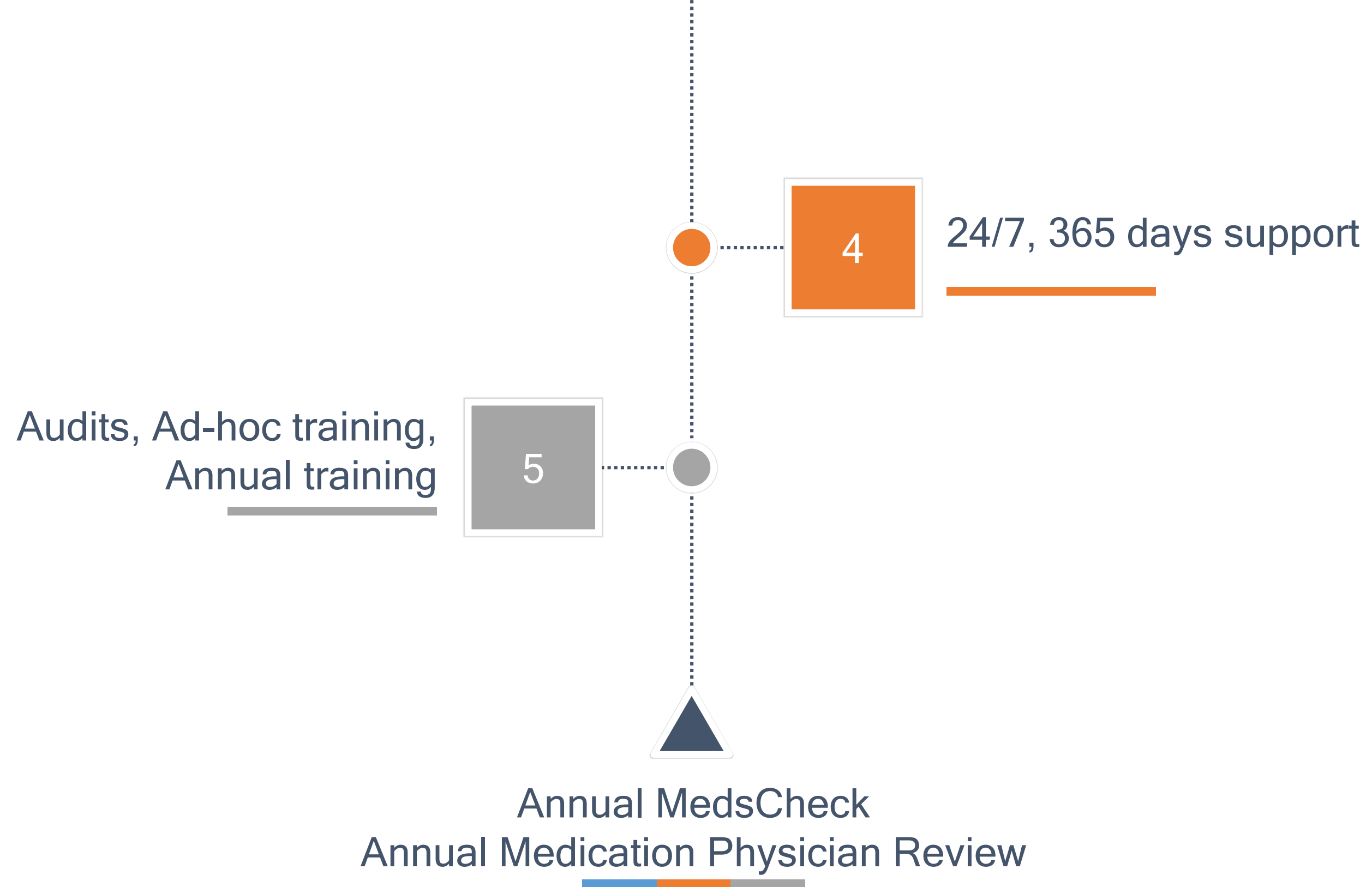
- Development of materials related to medication management
- Policies and procedures development

Implementation

Change management across all sites

Implementation





Medication Video



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Analysis



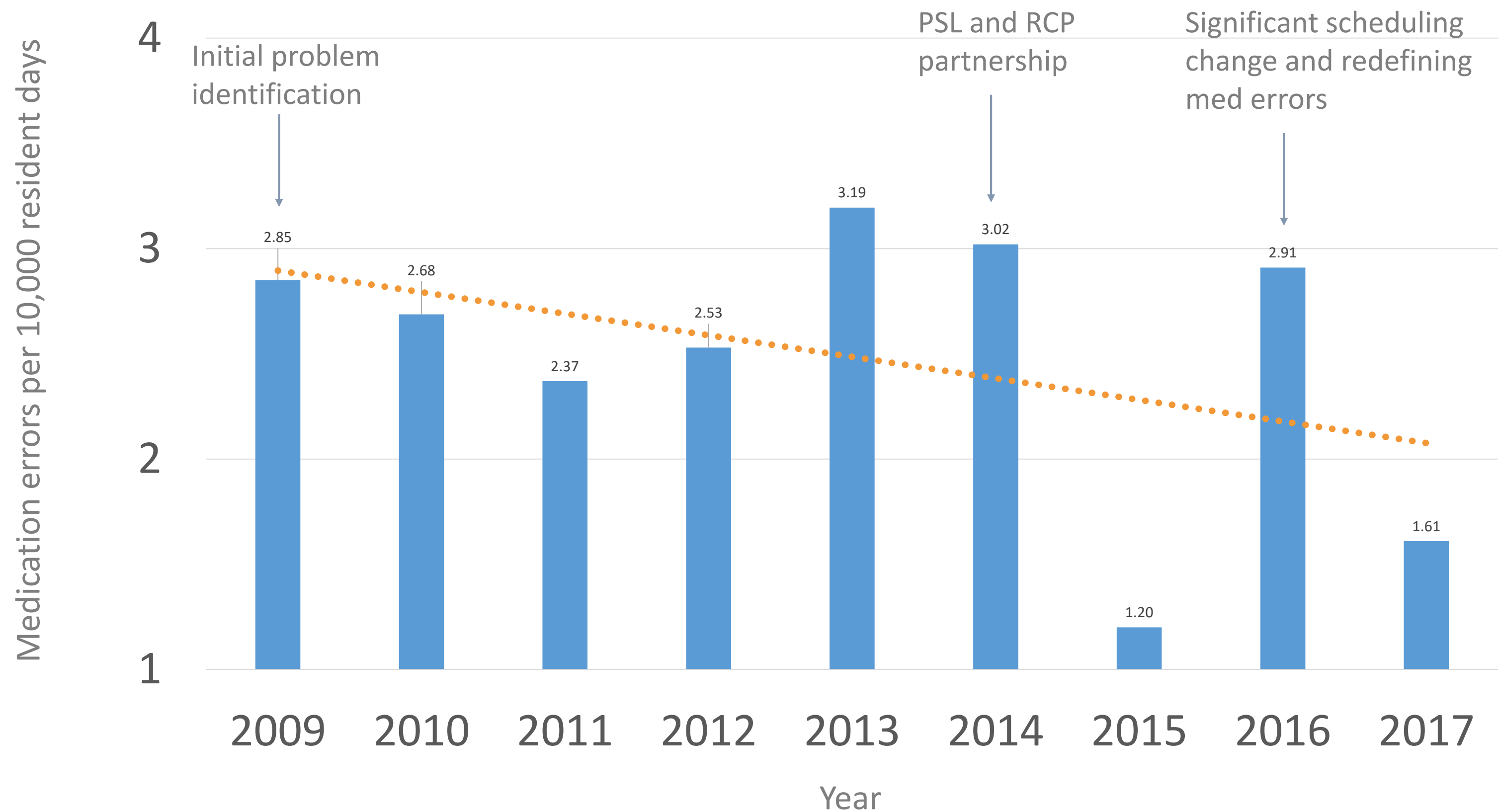
Our Measure



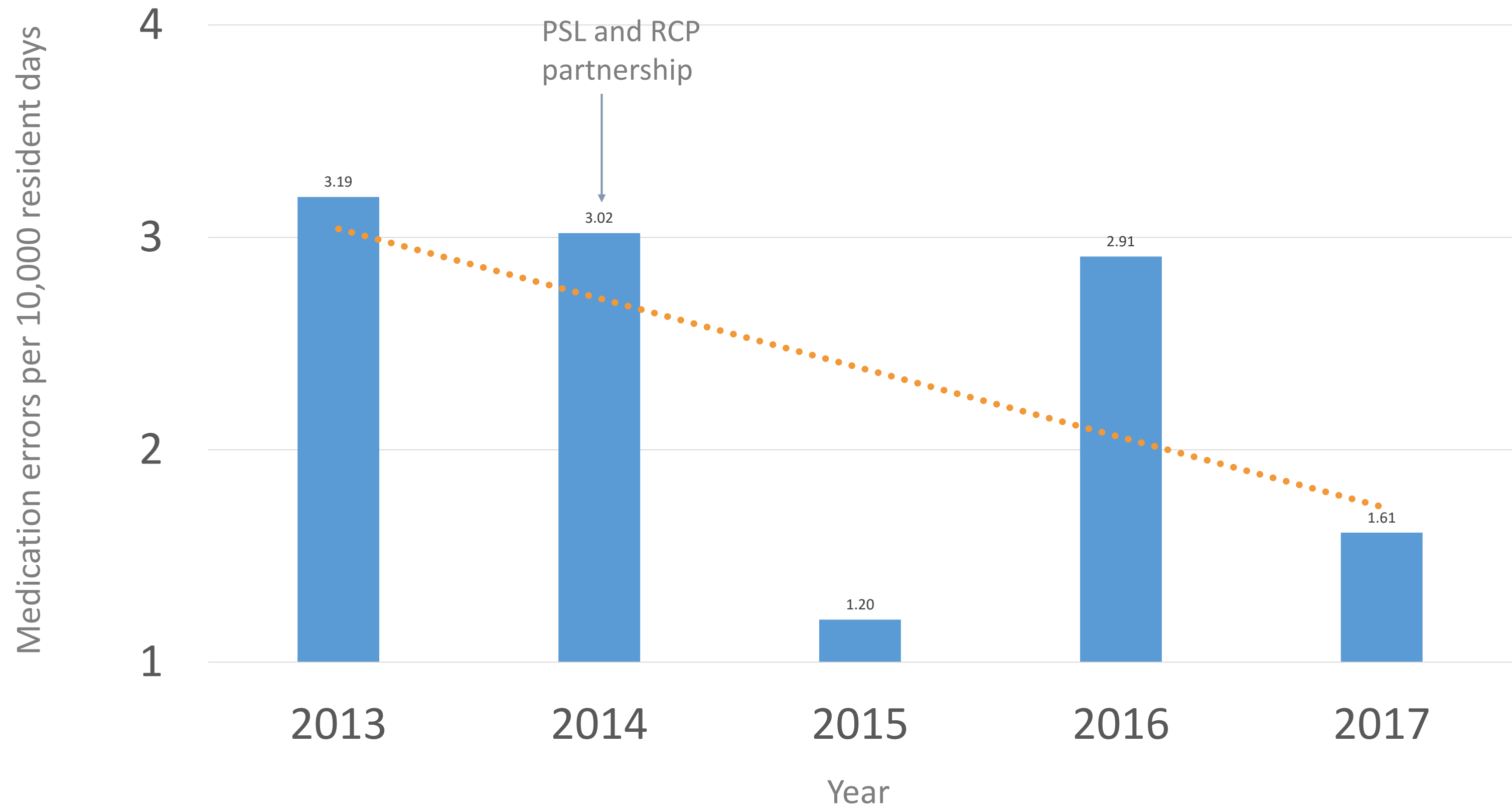
Medication Errors per 10,000 resident days

“any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in control of the health care professional, patient, or consumer”

Our Results (Overall)



Our Results (2013-2017)



Discussion



Literature Support



Health Care Aides were significantly less likely to cause errors



Health Care system savings



Potential to save the health care system millions of dollars



Standardization



Cost savings with standardization across the community sector within the province

Conclusion



Safe Model



Utilize PSW to full scope of practice



Collaboration



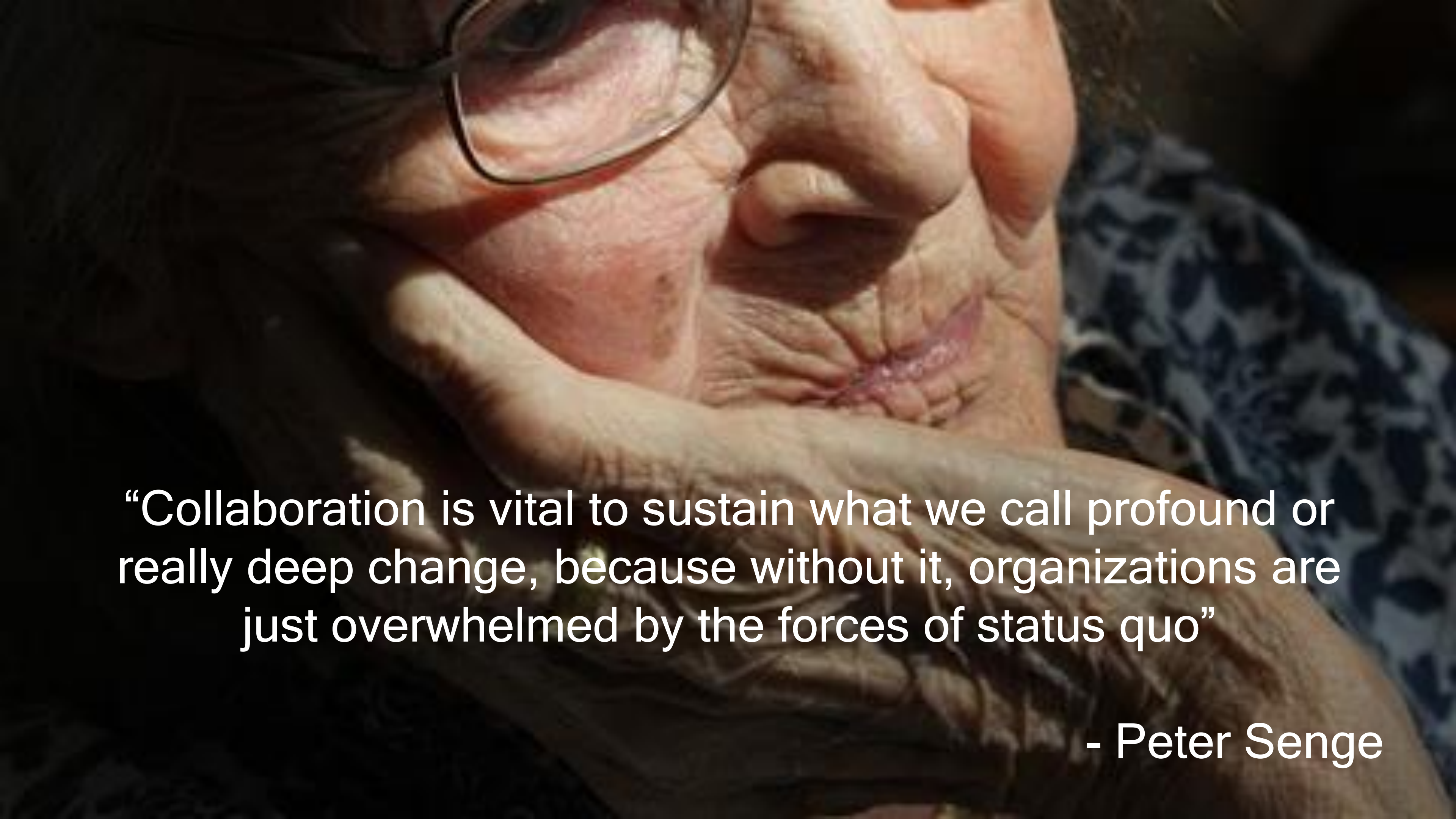
Partnership with pharmacy critical to success



Increased independence



Seniors can live longer in the community



“Collaboration is vital to sustain what we call profound or really deep change, because without it, organizations are just overwhelmed by the forces of status quo”

- Peter Senge

Thank you!

Any questions?

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References

01

Medco Health Solution survey,
December 2009

02

Wu C, Bell CM, Wodchis WP. Incidence and Economic Burden of Adverse Drug Reactions among Elderly Patients in Ontario Emergency Departments: A Retrospective Study. Drug Safety. 2012; 35(9): 769-81.

03

Safety at Home – A Pan-Canadian Home Care Safety Study. Canadian Patient Safety Institute, 2013.

04

Canadian Patient Safety Institute.
<http://www.patientsafetyinstitute.ca>

05

Arain M, Deutschlander S, Rostami M, Suter E. Should Health Care Aides Assist with Medications in Long-Term Care?. Gerontology Geriatric Medicine. 2016.

06

Examining Health Care Aide Utilization in Continuing Care Facilities with a Particular Focus on Medication Assistance. August 22, 2016. Alberta Health