

### Online medication reconciliation

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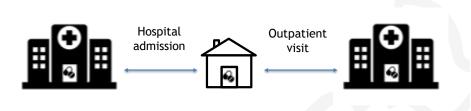
ESCP symposium 2019 Ljubljana 24th of October L2.2





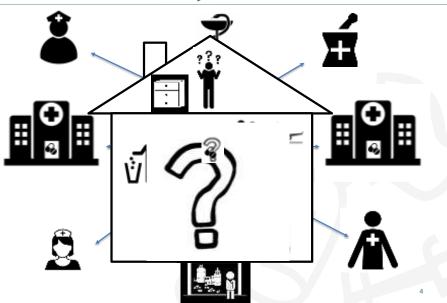
Posture & movement





But it is never that easy...





#### Background



- Transitions in healthcare and drug taking behaviour → (unintended) medication discrepancies
  - Outpatient settings (50%)1
  - Inpatient settings (67%)<sup>2</sup>
  - 1/3 potentially causing harm

Recommended solution: medication reconciliation

#### **Definition**



'Medication reconciliation is the process of creating the most accurate list of medications at all transition points, with the goal of providing correct medications'

Joint Commission on The Accreditation Of Healthcare Organizations. Medication Reconciliation Handbook. ASHP; 2006

<sup>&</sup>lt;sup>1</sup> Bergeijk 2008, Sint Maartenskliniek <sup>2</sup> [1] Tam et al. CMAJ 2005;173:510-6. [2] De Winter S, et al. Qual Saf Health Care 2010;19:371-5. [3] Pippins JR et al. J Gen Intern Med 2008;23:1414-22. [4] Kwan JL et al. Ann Intern Med 2013;158:397-403.

#### Why online? (1)



- 30 million outpatient visits in NL every year
- Time spent on a live medication reconciliation converstation ≈
   10 minutes

#### Sint Maartenskliniek:

- Low coverage live medication reconciliation: only 20% of the patients
- Preferably not by a doctor during the consultation/visit

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#### Why online? (2)



#### Online medication reconciliation

- Meets national standards
  - physician has a Current Medication List at hospital admission and during (outpatient) visits<sup>1</sup>
- Encouraged by patient panels<sup>2</sup>
  - eHealth useful for information about medication and practical/emotional support with medication use
  - In addition to regular care: contact with healthcare practitioner in person
- Increases patient empowerment

 $<sup>^{1}</sup>$ Standard handover medication data in the chain, version 1.0 (april 25th 2008)  $_{2}$ Mathijssen et al. 2017

## Medication reconciliation prior to outpatient visit



#### Sint Maartenskliniek:

- Patient checks in online:
  - Medication reconciliation takes less time at the day of the visit
- Patiënt doesn't check in online:
  - Medication reconciliation takes more time at the day of the consult or the patient is called



#### Medication reconciliation process at SMK



#### In case of an online check-in:

2 weeks before the visit	Patient is invited to - perform online medication reconciliation - answers questions about experience with medication use
2 days before the visit	Pharmacy technician - validates medication list - notes points of interest for visit with physician
During the visit	Physician - discusses points of interest - updates medication list - prescribes/changes existing medication
At the day of the visit	Pharmacy technician - processes changes made by physicians during visit
At the day of the visit	Patient - sees changes made by the physician in online personal health record





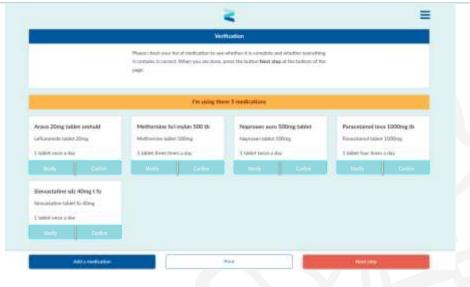
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### Demo Zorgdoc - PATIENT









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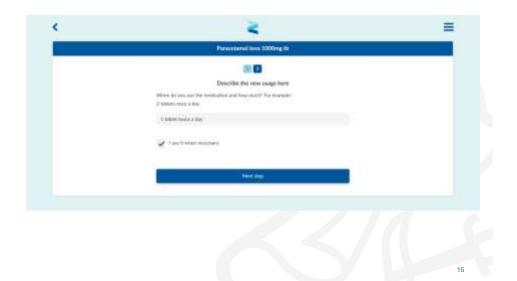




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## Sint Maartenskliniek

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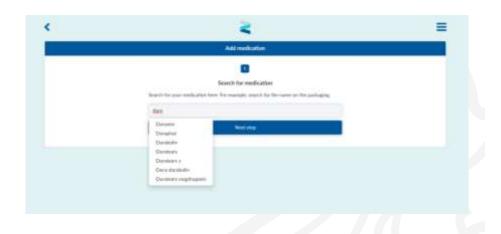


### Demo Zorgdoc - PATIENT









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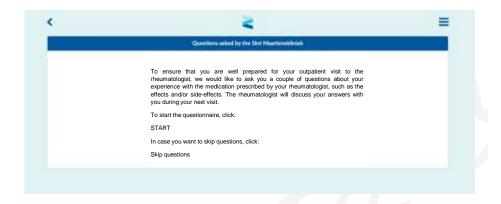


### Demo Zorgdoc - PATIENT









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## Sint Maartenskliniek

# Demo Zorgdoc - PATIENT



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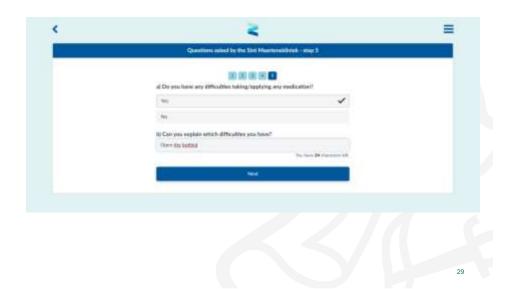


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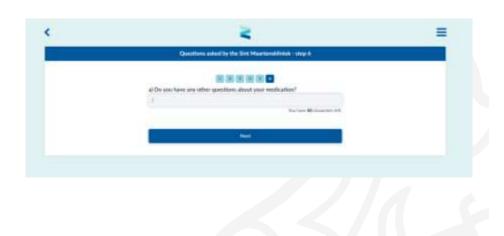






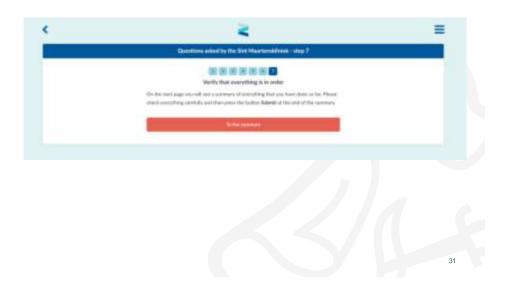
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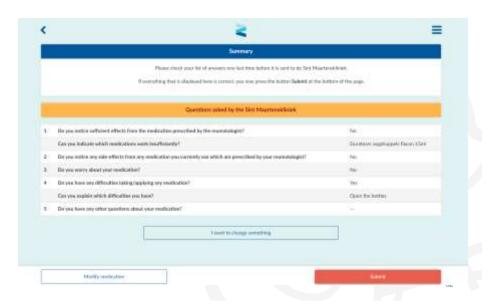




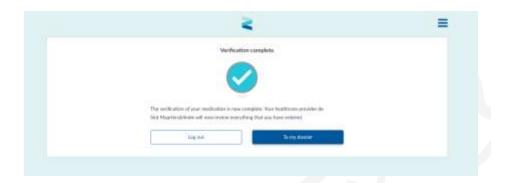












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### Medication reconciliation process at SMK



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### Medication reconciliation process at SMK



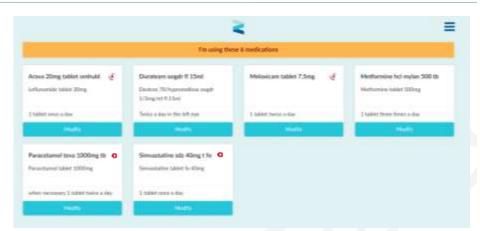
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### Demo Zorgdoc - PATIENT





#### Considerations



- Is the patient capable of using the online personal health record?
- How does the patient feel about it?
- Is the quality of online medication reconciliation comparable to the quality of live medication reconciliation?
- Does online medication reconciliation save time?
- Is the verified medication information used during the visits by the physicians?

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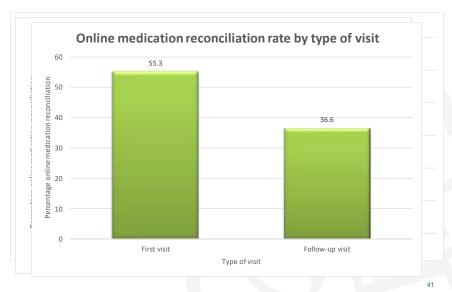
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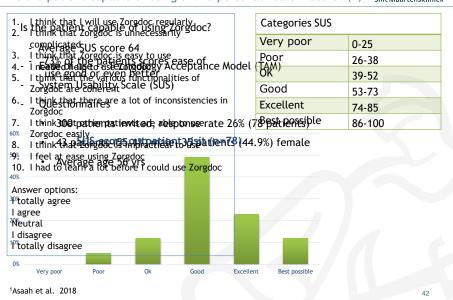


#### Is the patient capable of using online personal health record? (1)



Is the patient capable of using online personal health record? (2) sint M.





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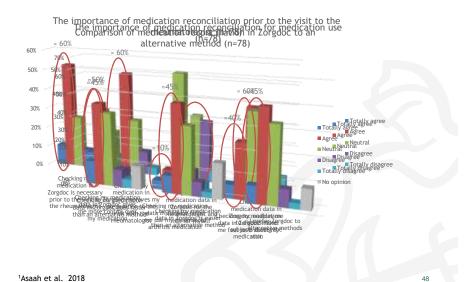
#### How does the patient feel about it? (1)

- How does the patient feel about medication reconciliation and the use of Zorgdoc?
  - Perceived usefulness -> TAM
  - Questionnaires
  - 300 patients invited, response rate 26% (78 patients)
  - 43 patients (55.1%) male, 35 patients (44.9%) female
  - Average age 56 yrs

<sup>1</sup>Asaah et al. 2018



#### How does the patient feel about it? (2)



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Is the quality of online medication reconciliation comparable to the quality of live medication reconciliation?



#### Current research:

- RCT, two arms<sup>1</sup>:
  - Online Medication reconciliation before hospital admission
  - · Live medication reconciliation before hospital admission
- Primary outcome measure: number of medication discrepancies between the Current Medication List after medication reconciliation and the medication record on the National Exchange Point
- 450 patients included yet
- Interim analysis based on 119 patients:
  - No difference in the number of medication discrepancies between live medication reconciliation and online medication reconciliation
- <sup>1</sup> M. Ebben et al., 2019, Leiden University Medical Center

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#### Does online medication reconciliation save time?

	Online	Live	Telephone
Minutes spent per medication reconciliation	3	10	15
# medication reconciliations per FTE healthcare practitioner per year	38000	11000	7500

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### Is the verified medication information used during the visits by the physicians? (1)



#### Observational pilot study 1:

- · Which medication information is used during the visit
- In which sources is this information available?
  - · Observation of 84 visits with 9 rheumatologists
  - · 130 actions related to medication use
  - Rheumatologist needs information in 51% of the actions and 58% of the visits
  - Availability required information: Current Medication List (CML) 92% of the visits, National Exchange-Point (NEP) 72% of the visits
- A risk-based approach to improve the effectiveness and implementability of medication reconciliation<sup>2</sup>

<sup>1</sup>Geurts et al. 2018 Sint Maartenskliniek, The Netherlands <sup>2</sup>Sint Maartenskliniek and Amphia Hospital, Breda, The Netherlands

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### Is the verified medication information used during the visits by the physicians? (2)



	Guideline 2008¹	Guideline 2019 <sup>2</sup>
Medication reconciliation prior to hospital admission	Always	Always
Medication reconciliation during outpatient visit	Always	Medication reconciliation based on risk assessment by the prescriber

<sup>&</sup>lt;sup>1</sup> Guideline Transfer of Medication data in the chain (2008)

<sup>&</sup>lt;sup>2</sup> Guideline Transfer of Medication data in the chain (published in november 2017, not yet a formal guideline)

#### **Summary**



Get MR organized in an efficient way for a large number of patients!

- Critically assess and determine in which situations it is useful to perform medication reconciliation -> risk based approach
- 2) Consider to implement online medication reconciliation
- Quality of online MR is comparable to live MR in terms of the number of discrepancies
- Online MR is much more efficient (3 times faster than live, 5 times faster than telephone)
- Patients are willing and able to perform online medication reconciliation -> patient empowerment



## Thank you for your attention

More information?

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