

Best Possible Medication Histories for Best Possible Care; Medication reconciliation for rural and remote hospitals



By Nathan Chahoud

Background

There are 20 sites in our health district with no pharmacy service, these sites have poor rates of best possible medication histories (BPMH) taken and medications reconciled on admission and discharge. Best possible medication histories and accurate reconciliation is an essential tool in reduction of medication related harm and errors. This intervention ensures patients from our regions receive an equal level of care as those in the city.



Aim

The primary function of this project was to establish and then commence an education and consultancy program relating to medicine reconciliation for WNSWLHD facilities currently without a clinical pharmacy service. The project involved liaising with stakeholders to develop targeted education and then deliver capacity building education including tools to improve the care provided to inpatients across 8 sites in the WNSWLHD.

Method

A 4 step program was developed and actioned over a 13 week period:

1 Initial engagement and identification of key stakeholders and “Champions” at individual sites.



2

Development and provision of targeted education and data collection tools.



3

Data collection to identify areas to improve



4

Review data collected and target further interventions and 1 on 1 education.

Results

The project saw a 4 fold increase in medication histories taken on admission over a 3 month period. Medication reconciliation on admission and discharge doubled over the 3 month period. Surveys of nursing staff and doctors who received education and participated in the consultations and ongoing support mirrored these results.



Discussion

The increased participation in histories and reconciliations address an increasingly important issue. Incomplete medication histories at the time of admission have been cited as the cause of at least 27% of prescribing errors in hospital. The most common error is the omission of a regularly used medication, around half of the medication errors that happen in hospital occur on admission or discharge and taking a medication history and reconciling this history helps to prevent these errors. 30% of these errors have the potential to cause harm.



Contact Details