Leveraging the EHR for Medication Reconciliation Process Improvement

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Introduction/Background

The Institute for Healthcare Improvement defines Medication Reconciliation as "the process of creating the most accurate list possible of all medications a patient is taking, and comparing that list against the physician's admission, transfer and/or discharge orders". This is a complex, time-consuming and challenging process. It is further complicated when the patient/family/caregiver is unable to provide accurate and/or current information. An accurate Prior to Admission (PTA) medication list is the foundation for safe and complete medication reconciliation. Winchester Hospital uses a pharmacy tech (MRT) during the day to update the PTA med list in the Emergency Department (ED). The MRT reviews and corrects the med list using the claims history, information from the primary care provider (PCP), and patient/family/caregiver interviews. Not every patient list is reviewed by the MRT. Once admitted, nurses have the primary responsibility for the integrity of the list.

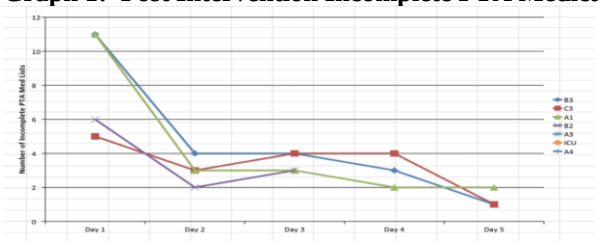
Methods

An interdisciplinary team was created to study the complex process of obtaining an up-to-date PTA med list. Based on data indicating that most medication lists were inaccurate or incomplete, practice alerts were sent to the nursing staff to educate them about how to obtain a complete list. In spite of this education, there was little improvement in practice. A SWAT team (a nurse educator, two nursing informatics specialists and a quality improvement specialist) was created to target med rec and educate nurses about leveraging the Epic system to obtain an accurate medication history. The team rounded for one week on each unit, spending time teaching nurses about PTA medication documentation, and how to use electronic resources to verify current medications. Nurses were shown how to update and maintain the med list, including adding new medications, removing inactive medications, revising dosages and navigating through Epic to validate the information. Epic's Chart Review and Care Everywhere tabs provide medication lists from other encounters. These are helpful when interviewing the patient to determine if the med list is up-to-date.

Results

SWAT team intervention was successful in reducing the number of incomplete medication lists.

Graph 1: Post Intervention Incomplete PTA Medication Lists



Discussion/Conclusion

Providing the correct medications at all transitions of care is an important patient safety effort. Med Rec is a fluid process, requiring review and confirmation with the patient/family/caregiver over the continuum of care. Used effectively, Epic is a valuable resource in obtaining medication history.

References

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