

HOME HEALTH AGENCIES

CONTINUE TO IMPROVE ORAL MEDICATION NUMBERS

The improvement in the management of oral medications in Illinois home health agencies is one of IFQHC's top priorities. IFQHC assists home health agencies to improve their performance on publicly reported Quality Measures such as the management of oral medications. According to the latest publicly reported data from CMS, which is listed on Home Health Compare at www.medicare.gov, management of oral medications in Illinois home health agencies is at 41.98 percent, which is an improvement from the statewide baseline of 38.37 percent.

Improvement in management of oral medications is an important part of reducing avoidable acute care hospitalizations (ACH) because incorrect use of medications is the cause of many unplanned hospital visits. To assist with efforts toward this goal, IFQHC provides clinicians with a variety of tools to assess and improve a patient's ability to take all medications consistently and safely.

According to IFQHC's Director of Nursing Home and Home Health Leslie Kolb, RN, BSN, "Education and training has been key when improving the management of oral medications Quality Measure. We have provided all of the agencies throughout the state with an excellent tool kit."

Many of the resources from this tool kit can be found on www.ifqhc.org by clicking on Home Health, then select Resources and choose "Improvement in Management of Oral Medications." One of these tools is "The Medication Assessment Protocol" which serves as an interactive link between the clinician and the patient where the patient must demonstrate elements of the medication administration process. For example, using the protocol, the clinician observes the patient taking his or her medication then assesses the patient's organizational skills, memory ability and other skills.

Another helpful tool is "The BEERS Criteria", which explains the reactions and severity of potentially inappropriate medication use in older adults. For example, benzodiazepines such as diazepam (Valium) have a long half-life in elderly patients (often several days), which may result in prolonged sedation and increase the risk of falls and fractures. Short- and intermediate-acting benzodiazepines are preferred if this medication is required. This reaction is considered a high severity rating. In essence, the BEERS Criteria serves as a quick reference guide to warn clinicians about possibly dangerous unintended effects of medications.

An additional reference document, "Managing Your Medicines" is a checklist to complete to help communicate patients' concerns about their medication(s). The tool consists of statements like "I have new medicines", "I am concerned about side effects" and "I have trouble holding the small pills or opening the packaging or the medicine bottles." The patient checks the statement(s) that pertain to him or her, which helps the home care nurse or therapist determine and address the patient's specific needs and training.



"Med Teaching Strategies" can also be found in the tool kit and promotes a consistent approach to assessing, teaching and evaluating the patient's knowledge and ability associated with properly taking his or her oral medications. The document is divided into three parts for clinicians: Assess, Teach and Evaluate. Listed under each section are questions and statements for the clinician to review with the patient. For example, in the first section, "Assess", pain/discomfort, poor motivation and emotional, are listed as examples of barriers that may be the reason why the patient is not taking his or her medications. In the second section, "Teach", teaching methods that may improve self-administration of medication are listed. And, in the final section, "Evaluate", responses such as "Needs review?" and "Verbalizes knowledge/performs actions spontaneously (without cueing/supervision)?" are listed for the clinician to check as a reminder for future visits.

For many older patients remembering which medications to take at what time can be difficult. Something as simple as a medication list, which includes the name of the medicine, the amount prescribed, when and how often the medication is administered and what the medicine is for, can help the patient with self-management of his or her medications. In addition to a medication list, other examples of simple tools to help patients manage medications include a medication schedule (with illustrations for the drug and time), pillboxes, medication alarms and telephone reminders. These and other simple measures are explained in the "Medication Compliance Aids – Selection Criteria" which is a part of the toolkit.

These are just a few examples of the many tools clinicians can use to improve the management of their patients' oral medications. Additional resources are available through the Web site. For more information on working with IFQHC to improve management of oral medications contact the Home Health team at (800) 386-6431.