

Best Collaborative Medication History for a single source of truth: A Pharmacy-Medical co-designed strategy



Background

Documentation of a best possible medication history (BPMH) is the first key step of medication reconciliation. A multidisciplinary effort is required to ensure timely and accurate medication reconciliation to optimise patient safety. Medical officers are key contributors in BPMH documentation, however local experience indicates use of the correct medication history documentation tool in the electronic medical record (eMR) by medical officers is inconsistent. This may lead to incomplete documentation and inaccurate medication reconciliation.

Objective

To evaluate a pharmacy-medical collaborative strategy to improve BPMH documentation in the eMR through education and eMR extracted weekly performance dashboard report.

Action

A pharmacy-medical working group including pharmacists, medical and surgical superintendents, and clinical governance medical officers developed and delivered education on BPMH and the medication history tool in eMR to junior medical officers at a 500-bed tertiary hospital in July 2022, and was repeated quarterly. Weekly BPMH performance data was extracted using Discern Analytics and a dashboard report was created using Power BI (figure 1). In addition to education, this feedback was distributed to medical officers via email and hospital-approved instant messaging application.

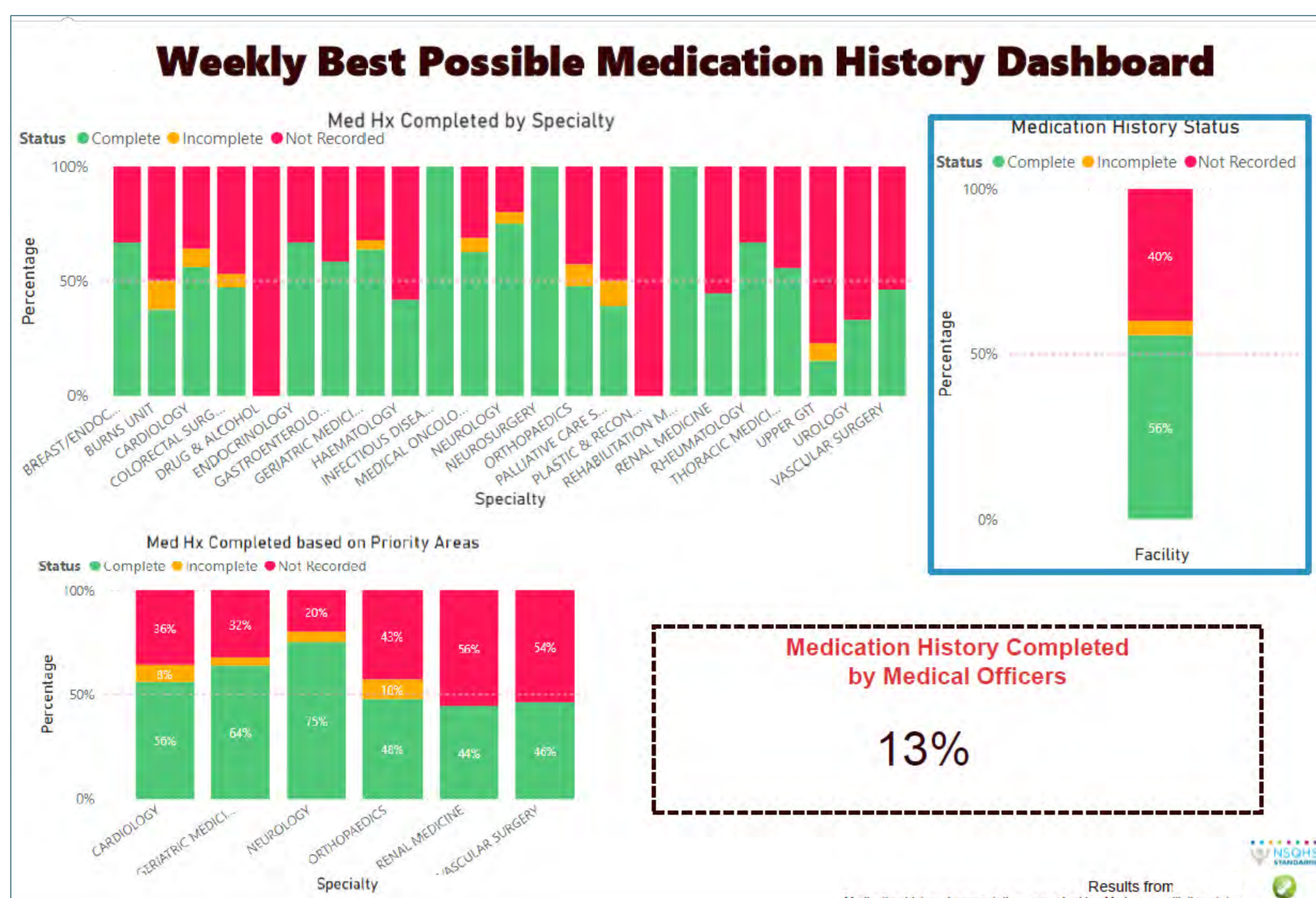


Figure 1: Example of Best Possible Medication History Dashboard distributed to junior medical officers weekly.

Evaluation

Medical officers documented 3%(n= 19) of total completed BPMHs in July 2022. BPMH rates increased in February-March 2023 at 11%(n=44) and 13%(n=74) respectively. Medical officers completed 25%(n=143) of all documented BPMHs in September 2023, 14 months post-implementation, revealing a 733% increase in BPMH documented in eMR (figure 2). Medical officers in close cooperation with pharmacists were noted to have better engagement.



Figure 2: Best Possible Medication Histories completed by medical officers (%) over 14 months

Discussion

A pharmacy-medical co-designed strategy demonstrated effective collaboration and highlighted colleague-to-colleague education better equipped and empowered medical officers on BPMH documentation in the eMR. Regular performance feedback in the form of a visual dashboard created friendly competition and increased engagement. The replicability of this strategy will be examined through implementation at other tertiary hospitals within the local health district.

Acknowledgements

I would like to acknowledge Julianne Chong, Andrea Nguyen and Diana Byrne for their contribution.