Strengthening Medication Safety in LTC Initiative: Progress Update

Carolyn Hoffman, CEO, ISMP Canada

Shirley Drever, Project Manager, ISMP Canada

Ontario Long Term Care Clinicians Conference

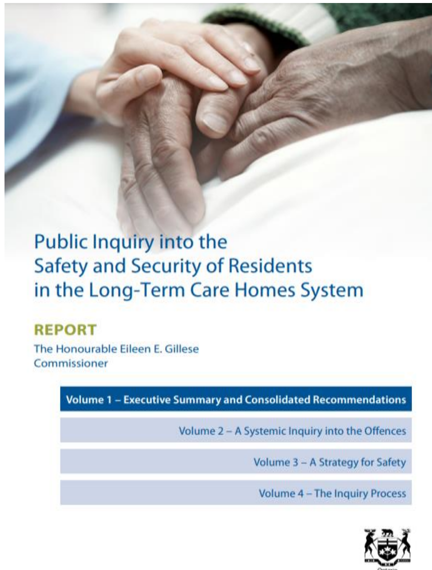
October 22nd, 2022

Learning Objectives

Participants will be able to:

1. Outline the 5 key components of the Strengthening Medication Safety in Long-Term Program
2. Identify program tools and resources to use to improve medication safety in their own Homes
3. Understand how resident and family engagement is essential to improving the safety of the medication management system in Homes
4. Understand implementation and change management strategies by following the progress of the Champion Homes as they move through the program and hear their stories
5. Describe prescriber engagement barriers and enablers to participation in incident analysis and QI activities in Homes
6. Sign up to become a Med Safety Trailblazer Home!

Initiative to Support the Long-Term Care Sector



http://longtermcareinquiry.ca/wp-content/uploads/LTCI_Final_Report_Volume1_e.pdf

The 3-year initiative is funded by the Ontario Ministry of Long-Term Care

This work will include addressing Justice Gillese's specific recommendations with respect to detecting potential medication incidents that would otherwise go unnoticed

Views expressed are the views of ISMP Canada and do not necessarily reflect those of the Province

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Why do we need this initiative?

Residents are **prescribed more medications than individuals in any other setting** in order to treat multiple medical conditions

As the number of drugs prescribed to a resident increases, the **risk of adverse drug events and harm** also increases.

Medication management is complex and resource-intensive in the LTC environment and is a **key area of risk and opportunity** to enhance safety and quality of life for LTC residents

Overall Initiative Goal

Reduce harm associated with medication management errors within Long Term Care

Key Areas of Collaboration and Support

"It's a marathon, not a sprint!"

Champion Homes

- ✓ Special thanks to the 10 Champion Homes that launched this initiative with ISMP Canada!
- ✓ They are working towards completing med safety QI projects later this fall.
- ✓ Their intensive efforts have informed the initiative tools and facilitation strategies.

Champion Homes
(Listed alphabetically)

Bendale Acres Long-Term Care Scarborough
Cedarvale Terrace Toronto
Extendicare York Sudbury
Fairview Lodge
Iroquois Lodge Ohsweken
peopleCare Hilltop Manor Cambridge
Southbridge Pinewood Thunder Bay
St. Patrick's Home of Ottawa
Upper Canada Lodge Niagara-on-the-Lake
Woodingford Lodge Ingersoll

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Thank you to the *Strengthening Medication Safety in LTC* Advisory Committee

The Committee includes individuals with a variety of insights and perspectives on medication safety in long-term care and are reflective of the diversity of the people/residents in Ontario.

a. Residents/Families (2) - Ontario Association of Residents' Councils - Family Councils Ontario
b. Long-term Care Association Representatives (2) - Ontario Long Term Care Association (OLTCA) - AdvantAge Ontario
c. 10 Champion Homes (10) - Executive Sponsor or Project Lead from each Home
d. Ontario Long-Term Care Clinicians (3)
e. Pharmacy Service Providers – CareRx, Medisystem, GeriatRx (3)
f. Ontario Personal Support Worker Association (1)
g. Ministry of Long-Term Care (1) - Lori Coleman, Director, Long-Term Care Response Branch
h. PointClickCare (1)
i. Ontario Centres for Learning, Research and Innovation (1)
j. Institute for Safe Medication Practices Canada (1) - CEO (Chair) ISMP Canada

Resident and Family Engagement

This Photo by Unknown author is licensed under CC BY-ND.

Devora is a resident in a long-term care home in Ontario.

Barry is also a resident of long-term care homes in Ontario.

Resident & Family Engagement Toolkit

"I have had an opportunity to become acquainted with my doctor, and he with me. That rapport, that bond and relationship is critically important for me and for many other residents in long-term care."

Barry, resident in long-term care, Ontario.

Strengthening Med Safety in Long-Term Care

Resident and Family Engagement

"I have had an opportunity to become acquainted with my doctor, and he with me. That rapport, that bond and relationship is critically important for me and for many other residents in long-term care." Barry, resident in long-term care, Ontario.

Residents in Ontario's long-term care are the heart of every home. They have reached a stage in their life where they need to rely on others to support and to care for them, and while there are some residents who cannot be autonomous in their own care, there are many who are able to self-advocate and make decisions for themselves in their medication management. Engaging residents is essential to increasing medication safety and this initiative aims to support you, with resources and education, to do so authentically. Collaboration between staff and residents gives the best possible chance for safe medication experiences.

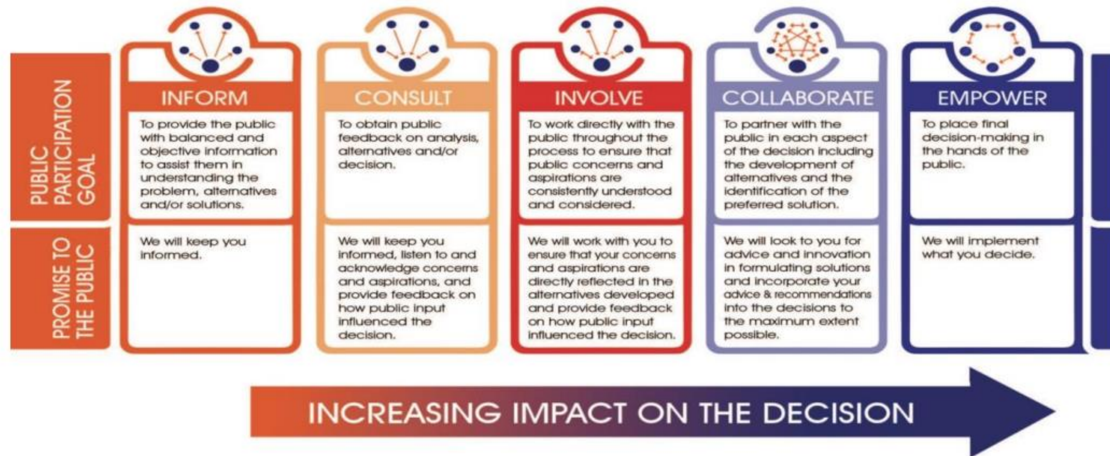
"I would like to be on the committee that decides how they are going to reduce errors so that I can add the resident's voice..." Devora, resident in long-term care, Ontario.

Toolkit

This toolkit has been designed for all staff in long-term care homes in Ontario as a landing place to find resources and information to support resident and family engagement in the home. Whether this practice is already embedded in your setting or whether you are looking for ways to increase engagement, there is information in the following pages that will support any improvement efforts and/or projects.

Institute for Safe Medication Practices Canada
ismpcanada.ca

Resident & Family Engagement



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iap2.org

Questions You Can Ask About Your Medication

- Will I have side effects?
- Will this make me sleepy?
- Do I take this for a short time or will I be on it forever?

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Engagement Survey for Homes

RESIDENT AND FAMILY MEDICATION SURVEY April 7 2022

1. How involved are you in decisions about your medications? Sleect all that apply.
   a. Not at all
   b. My doctor asks if I have any questions at the end of the visit.
   c. My doctor asks if I have a comment/concern, I feel my doctor or nurse listens.
   d. My doctor, nurse, and pharmacist ask me how the medications make me feel and if there are any problems to report.
   e. My doctor works with me to understand what's important to me and I'm involved in setting goals for my medication management.
2. Do you know what your medications are? What they are used for?
   a. Yes
   b. some
   c. No
   d. I am not sure
3. Are you involved as much as you want to be in decisions about your medications?
   a. I am involved as much as I want to be.
   b. I'd like to know more about my medications.
   c. I'd like to know more and be more involved in decisions about my medications.
   d. I want to be involved less and let others make medication decisions for me.

Resident and Family Survey

ISMP Canada tool adapted and implemented by peopleCare Hilltop, 2022

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peopleCare Hilltop Story

Adapting and implementing a med safety resident/family survey

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Measuring and Evaluating

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Medication Safety Self-Assessment (MSSA-LTC)

Canadian Version III, 2021

- 176 assessment items
  - 53 new items
  - 75 revised items from the MSSA-LTC Canadian Version II (2012)
  - 48 items from the MSSA: Focus on Never Events in LTC
- Available in English and French

MSSA-LTC

- Almost all Ontario LTC Homes completed the baseline MSSA-LTC in 2021
- All Ontario Homes were provided with an additional survey credit on June 1, 2022 for a re-survey

Medication Safety Indicators

Objectives:

- Develop and test medication safety indicators for meaningful improvement of med safety in long-term care
- Where possible, leverage data that is already collected and in some cases reported

Baseline Medication Safety Assessment

In addition to the MSSA-LTC, all Champion Homes were asked to share their results for the following indicators

- Number of Medication Errors that alter a Resident's Health Status or Require Enhanced Resident Monitoring per resident per quarter
- Number of Resident transfers to Emergency Department per quarter
- Number of Reported Medication Incidents per Resident per Quarter by Category of Harm
- Number of Usages of Glucagon/or Number of Cases of Severe Unresponsive Hypoglycemia per resident per quarter
- One-time MedRec Quality Audit of 20 charts

Incident Analysis

Medication Incident Analysis

Improve resident safety through a continuous improvement cycle

REPORT > LEARN > IMPROVE > SHARE

All staff, prescribers, and residents/families report in their organization and can also via our ISMP Canada website

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Monthly Incident Analysis Workshops

Incident Analysis in Long-Term Care

A *Live Facilitated Virtual* Workshop for Health Care Professionals

November 10, 2022

Register

WORKSHOP INFO

- Summary
- Abstract
- Schedule
  - November 10, 2022
- Equipment/Materials

Summary

This workshop provides those working in long-term care (LTC) with theory and hands-on practice in incident analysis (root cause analysis).

Incident Analysis is a tool to investigate errors in healthcare through identifying the key contributing factors and developing actions to address them. Content includes a step-by-step approach using the Canadian Incident Analysis Framework, including a focus on human factors and quality improvement.

- Effective incident analysis reporting and learning relys on a just and trusting culture within the Home for all staff, prescribers, and residents/families

- Regular sharing and learning through a communication board, newsletter, etc., facilitates this process and demonstrates the commitment of the organization.

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Just Culture

Supporting a Just Culture in Long-Term Care

Purpose

To provide a brief overview of information and resources for Long-Term Care Homes interested in advancing a just culture in their organization.

Background

Culture is a set of shared attitudes, values, goals, a
organization.[1] A just culture is a small part of a lar
way we do things around here' – that strives to ma

In response to interest, ISMP Canada developed a resource that briefly describes what a Just Culture is and how homes can do to advance it.

Appendix 1 - Questions for Reflecting on a Just Culture with your Staff

Adapted from: SOPS Nursing Home Survey Items and Composites (ahrq.gov)

Nonpunitive Response to Mistakes
1. Are staff blamed when a resident is harmed?
2. Are staff afraid to report their mistakes?
3. Are staff treated fairly when they make mistakes?
Feedback and Communication About Incidents
4. In this long-term care home, do we talk about ways to keep incidents from happening again?
5. Does the staff tell someone if they see something that might harm a resident?
6. In this long-term care home, do we discuss ways to keep residents safe from harm?
Communication Openness
7. Are staff ideas and suggestions valued in this long-term care home?
8. Is it easy for staff to speak up about problems in this long-term care home?

The entire survey is available on-line and can be used as an anonymous patient safety culture staff survey.

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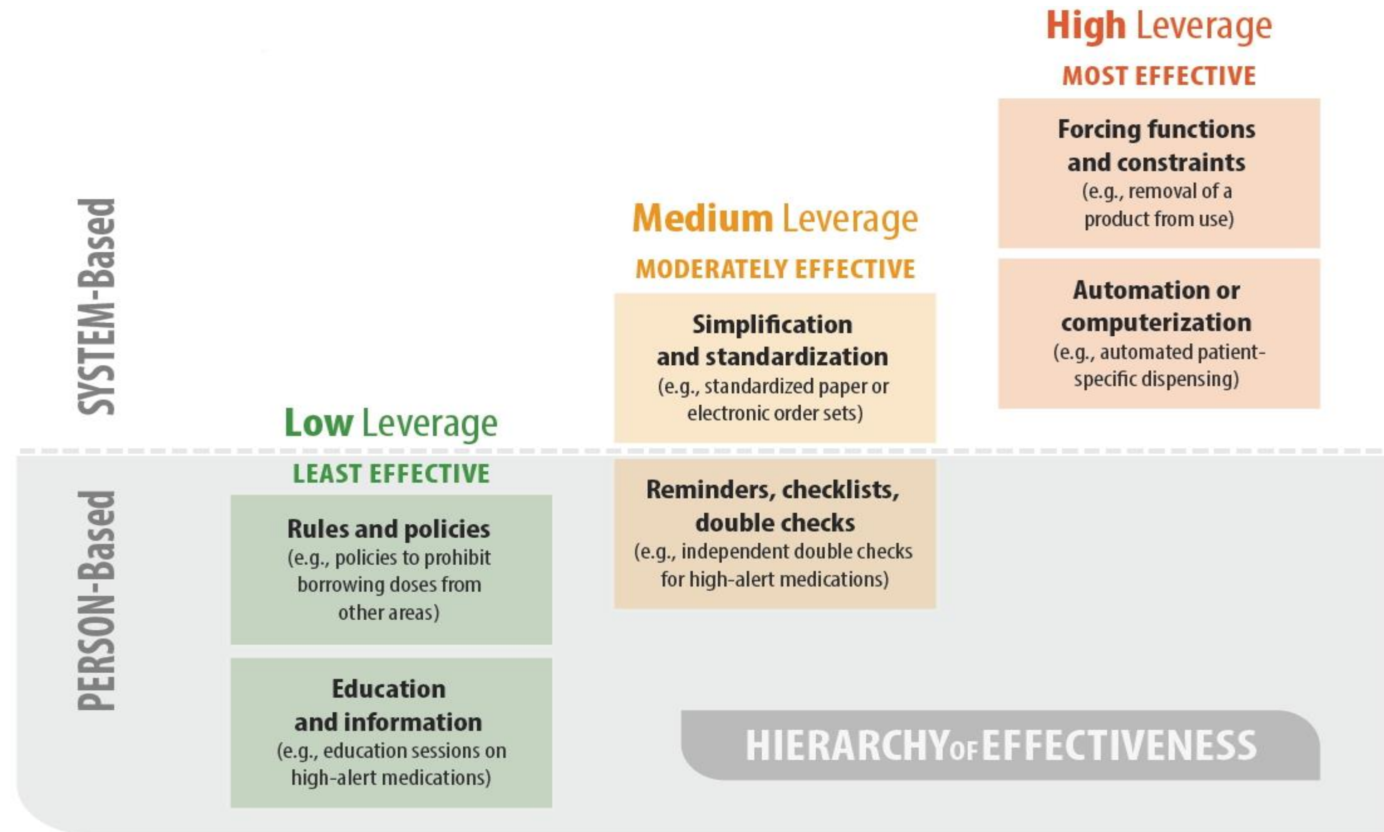
Incident Analysis

All Champion Homes were asked to use the education provided to analyze and submit incident reporting and learning reports for 2 incidents



ISMP Canada: *Designing Effective Recommendations*.
Ontario Critical Incident Learning. Issue 4, April 2013

Extendicare York Story – incident analysis reporting & learning

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Med Safety Signal #1

Developed as a tool for sharing learnings from incidents reported to ISMP Canada by Long-term Care Homes in Ontario

Shared via:

- ISMP Canada email distribution list
- LTCHomes.net
- Social media
- Sign up for the Signals at ismpcanada.ca

Vaccine Error

Strengthening Med Safety in Long-Term Care

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Med Safety Signal

Risks in medication safety reported by LTC Homes in Ontario

Vaccine Error

Volume 1 • Issue 1 • February 9, 2022

Reported Incident (details are modified to ensure confidentiality of the home and reporter)

A resident was prescribed the 13-valent pneumococcal conjugate vaccine (PNEU-C-13) PREVNAR 13™ immunization, to be followed 8 weeks later by the 23-valent pneumococcal polysaccharide vaccine (PNEU-P-23) PNEUMOVAX 23™ immunization. A chart review identified that the PNEU-P-23 immunization was recently given, but looking back through the medication administration record (MAR), the PNEU-C-13 immunization was not given, but rather had the notation "medication not available" on the MAR. Current guidance from Public Health Canada (Pneumococcal vaccine: Canadian Immunization Guide) indicates that PNEU-C-13 not be given until one year after PNEU-P-23, leaving the resident with incomplete vaccine protection for a year.

ISMP Canada staff determined the following key contributing factors and considerations for improvement. It is the responsibility of medication safety leaders in long-term care to determine what, if any, actions for improvement are needed in their medication management processes.

Med Safety Signal #2

Fentanyl Patch incident

- Use of a higher dose fentanyl patch related to drug benefit coverage
- Missing occlusive dressing for reduction of the fentanyl dose

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Med Safety Signal

Risks in medication safety reported by LTC Homes in Ontario

A Patchy Approach to Transdermal Fentanyl Safety

Volume 1 • Issue 2 • July 15, 2022

Reported Incident (details are modified to ensure confidentiality of the home and reporter)

A resident had a prescription for a fentanyl 12 mcg/h transdermal patch, to be changed every 72 hours, to treat chronic pain. Because of specified provincial drug benefit coverage, fentanyl 25 mcg/h patches are typically dispensed by the pharmacy with instructions to place half of the patch over an occlusive dressing placed on the resident's skin. This practice allows only half of the patch to contact the skin, thus delivering an approximation of the prescribed dose. On 2 separate occasions within a month, nurses noted that upon removal of the previous patch, no occlusive dressing was present. Although no harm was reported, this resulted in the resident receiving a 2-fold overdose of this high-alert opioid. Given the occurrence of similar incidents over the past few years, the long-term care home has decided to pay for the 12 mcg/h patch when that dose is prescribed to reduce the risk of harm to residents.

ISMP Canada staff identified the following key contributing factors and considerations for improvement. It is the responsibility of medication safety leaders in long-term care to determine what, if any, actions for improvement are needed in their particular medication management processes.

Key Contributing Factors:

- Constraint of the provincial drug benefit program, which reimburses the 25 mcg/h fentanyl patch but not the 12 mcg/h patch, often leads pharmacies to dispense the 25 mcg/h patch.
  - The 12 mcg/h patch is available outside the provincial drug benefit program if the resident, family, or a third party agrees to pay out of pocket.
- Preparation and administration of the medication, when provided as a 25 mcg/h patch, required the atypical extra preparation step of occluding half the patch on the skin.
  - The patch cannot be cut or folded to adjust the dose.
- Lack of a systematic process to check for proper occlusion of the patch decreased the chance of detecting the error in the 3 days between patch changes.

Considerations for Improvement:

- Eliminate the need to occlude half of the patch by dispensing the 12 mcg/h fentanyl patch for applicable prescriptions.
  - Consider other payment options for the 12 mcg/h fentanyl patch (e.g., third party, out of pocket).
  - Ask the provincial drug benefit program to provide coverage.*
- If using a 25 mcg/h fentanyl patch for a 12 mcg/h dose:
  - Place a reminder on the package/medication administration record to occlude half the patch.
  - Ensure a systematic, independent double-check process for assessment of occlusion at the time of application and daily checks of patch and occlusion thereafter.
  - Dispense the patch in combination with an appropriate occlusive dressing.
- Always indicate the date and time of application on the patch.

Ontario Drug Benefit fentanyl decision: https://www.health.gov.on.ca/en/pro/programs/drugs/ced/pdf/fentanyl.pdf
ISMP Canada Safety Bulletin: https://ismpcanada.ca/wp-content/uploads/ISMPCSB2006-05Fentanyl.pdf
*ISMP Canada has provided a copy of this Med Safety Signal to the Ministry of Long-Term Care

Report an incident to ISMP Canada https://ismpcanada.ca/report/

A product of the Strengthening Medication Safety in Long-Term Care initiative – https://ismpcanada.ca/resource/ltc/
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Tools and Support

- Best practice resources for the front line staff including a Model Policy and a template for MedRec
- E-learning module for safe transitions of care
- Support/facilitation in establishing a standardized process for MedRec and troubleshooting challenges

Resources Developed in Response to Feedback from LTC Homes in Ontario

A resource outlining the benefits of Dprescribing
Deprescribing Resource

“What Questions to Ask”

for residents and families when a medication error occurs
When a Medication Error Happens

Just Culture to ensure incidents are reported in long-term care

Model Policies

Nine DRAFT Model Policies on ismpcanada.ca website now available to Homes to use as a resource for quality improvement initiatives

1. Medication Reconciliation
2. Use of Rescue Medications
3. High Alert Medication Use
4. Drug Destruction
5. Quarterly Medication Reviews
6. Emergency supply boxes
7. Automated Dispensing Cabinets
8. Standardized Medication Incident Analysis and Reporting
9. Medication Storage

Homes are requested to test Model Policies to determine applicability and feasibility of at the local level.

Feedback will be used to finalize the Model Policies.

Upper Canada Lodge Story

Adapting a Model Policy

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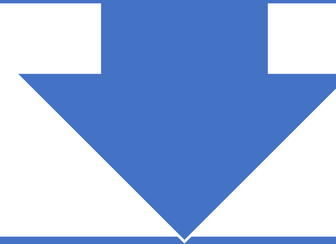
Quality Improvement

Quality Improvement

Quality Improvement initiatives are successful when everyone is engaged and has a stake in their success.



Engagement is brought about by a combination of awareness-building, education/training, and coaching in a structured program, which is what "Strengthening Medication Safety in Long-Term Care" is designed to be.

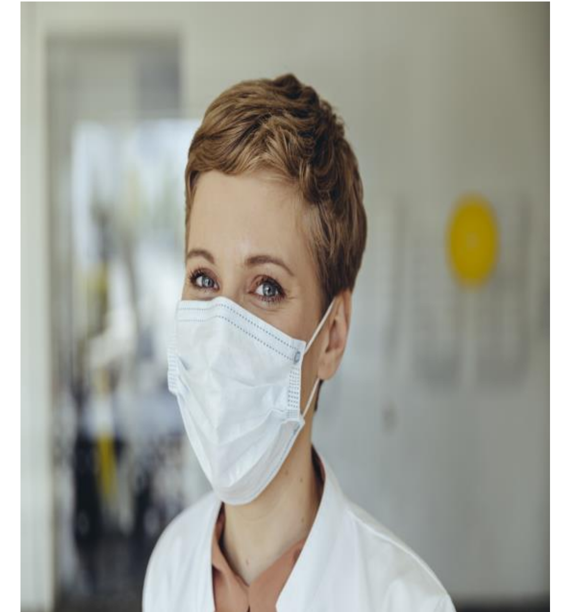
Quality Improvement E-learning Modules

- Introduction to the Quality Improvement Method
- Workplace Organization – An introduction to 5S
- Pictures Talk – Using Visual Work Instructions in Healthcare
- Prevent mistakes by making the abnormal obvious
- Fewer footsteps, more time for care – Using Spaghetti Diagrams
- Use data to take action – Run Charts, the basics
- Process Mapping – an introduction
- Select the fewest ideas for the most impact – Impact-Effort analysis

Quality Improvement Advanced Workshops

I – Map your processes to identify improvement opportunities

II – Designing Tests of Change – the PDSA method



III – Sustaining Successful Changes

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Fairview Lodge Story

Implementing an ADC

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Prescriber Engagement

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Survey Results – Barriers to Engagement

Table 2	Barriers to Analysis		Barriers to QI	
	n=29	percent	n=32	percent
Lack of time	9	31%	11	34%
Lack of remuneration	4	14%	9	28%
Low priority compared with other duties	5	17%	7	22%
Not trained in incident analysis or quality improvement	7	24%	5	16%
Not interested in contributing	1	3%	1	3%
Lack of confidence in being able to contribute	3	10%	1	3%
Worried about medicolegal implications	1	3%	3	9%
Never been asked to participate	24	83%	25	78%
Unaware of any safety event reviews in the Home	4	14%	4	13%
Not part of role	1	3%		0%
New team member			1	3%

ISMP Canada LTC Prescriber Survey, 2022

Key Opportunities to Increase Prescriber Engagement

- **Incentives**
  - Develop a consistent approach to compensating prescribers (who would otherwise not be compensated for this time) for their participation.

- **Opportunity and Interpersonal Relationships.**
  - Provide multidisciplinary team education in all aspects of incident management, with a focus on analysis, and recommendation development, implementation, and evaluation.
    - Seek regulatory/education body accreditation for continuing education credits.

- **General**
  - Explore a “regional expertise” model whereby a central cadre of clinicians and safety/QI specialists could assist Homes in local incident analysis and quality improvement initiatives.
  - Engage in capability and capacity-building initiatives in quality and safety improvement.

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Scale and Spread Plan for Trailblazer Homes

New Opportunity for Interested Homes – Become a Trailblazer!

The Institute for Safe Medication Practices Canada is pleased to announce that the *Strengthening Medication Safety in Long-Term Care initiative* is moving into an exciting new phase!

We are now ready to offer 100 Trailblazer Homes the tools, facilitation, and coaching that have successfully supported the great work of the Champion Homes.

Interested in making a commitment at your home for improving medication safety by joining a provincial collaborative to learn and test improvements with the help of experts?

Registration is free and limited to the first 100 homes to sign up.

Registration closes when 100 homes sign up or on November 2, 2022

As homes sign on, they will be asked to complete Baseline Medication Safety Assessment and decide on their priority activity or activities

Work on their activities will start in September and October

November 3, 2022 Conference to highlight Champion Home Learning and provide group learning sessions for Trailblazers

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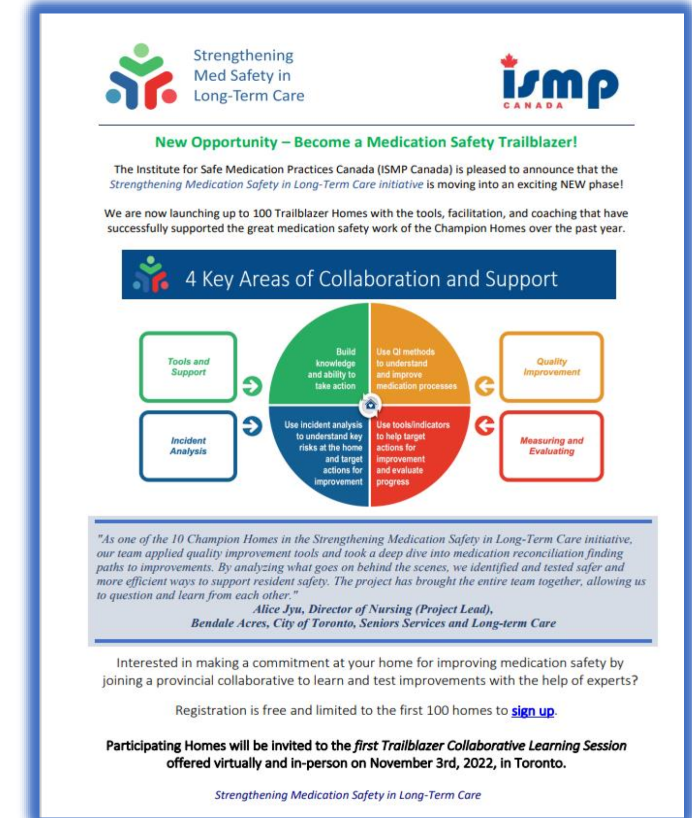
NEW Trailblazer Homes

- *Step 1 –* Register online at ismpcanada.ca or send an e-mail to LTC@ismpcanada.ca
- *Step 2 –* Submit data for 4 Core Med Safety Indicators
- *Step 3 –* Select from new menu of project(s) options
- *Step 4 –* Participate in the November 3 Online Conference
- *Step 5 –* Participate in regular online learning events to develop, implement, and evaluate project(s)



Strengthening Med Safety in Long-Term Care

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New Opportunity – Become a Medication Safety Trailblazer!

The Institute for Safe Medication Practices Canada (ISMP Canada) is pleased to announce that the *Strengthening Medication Safety in Long-Term Care initiative* is moving into an exciting NEW phase!

We are now launching up to 100 Trailblazer Homes with the tools, facilitation, and coaching that have successfully supported the great medication safety work of the Champion Homes over the past year.

4 Key Areas of Collaboration and Support

"As one of the 10 Champion Homes in the Strengthening Medication Safety in Long-Term Care initiative, our team applied quality improvement tools and took a deep dive into medication reconciliation finding paths to improvements. By analyzing what goes on behind the scenes, we identified and tested safer and more efficient ways to support resident safety. The project has brought the entire team together, allowing us to question and learn from each other."

Alice Jyu, Director of Nursing (Project Lead),
Bendale Acres, City of Toronto, Seniors Services and Long-term Care

Interested in making a commitment at your home for improving medication safety by joining a provincial collaborative to learn and test improvements with the help of experts?

Registration is free and limited to the first 100 homes to sign up.

Participating Homes will be invited to the *first Trailblazer Collaborative Learning Session* offered virtually and in-person on November 3rd, 2022, in Toronto.

Strengthening Medication Safety in Long-Term Care

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Thank you for listening.

Any Questions?