

Overview of Polypharmacy Risk Reduction Initiative

Residential Care

The main goal of the Shared Care Polypharmacy Risk Reduction initiative, which is focused on the elderly, is to support physicians to be able to participate effectively in meaningful medication reviews, in order to develop the best medication plans for each patient/resident under their care, working with other health professionals, patients/residents and families.

In residential care, working through the Divisions of Family Practice and the specific Residential Care Initiative (RCI) leaders, the Polypharmacy Risk Reduction (PPhRR) team facilitated local workshops called 'Building Local Capacity and Sustainability (BLCS)' sessions. Two sessions were delivered at each site, a few weeks apart. Attendees included physicians, care home clinical leaders and pharmacists supporting the local care homes. The focus was on addressing 'meaningful medication reviews' as part of the RCI, identifying current approaches to medication reviews and where improvements could be carried out at each care home, with the support of the local RCI team.

The Shared Care Polypharmacy website, resources page-residential care section, has a specific document that highlights the medication review approach that was tested in and after the BLCS sessions. In addition, the website has the agendas and supporting documents for the BLCS sessions so that any local RCI group, or others who are interested, can run their own workshops and then continue to support their local physicians in their involvement for meaningful medications reviews and developing an effective medication plan.

Key lessons learned included:

1. The physicians are aware of the need to address polypharmacy, so it's less about providing clinical information and more about supporting physicians to working effectively for 'meaningful medication reviews'.
2. Relationships and working together as a team are important, including knowing and respecting the skills specific to each care provider, in particular recognizing the key specialized information that the pharmacist can provide and the current status information that the care staff and the resident's family can provide.
3. Understanding the current health status of the resident, in relation to resident/family goals of care, makes it easier to subsequently look critically at the medications, especially as many residents are frail and at in their 'end of life' stage.
4. Identifying and starting 'meaningful medication reviews' early in planning for care is important, particularly as the time a person will spend in a care home is often limited.