Appendix B – Create a Safe Medicine List Together Implementation Guidance

 Review intervention and training n Understand the purpose, use, and benefits of Course a Safe Medicine List Together. 	
Make decisions for your implement	
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To help you plan and design your Create a Safe Medicine List Together implementation, a Quick Start Guide (QSG) is available. The Create a Safe Medicine List Together QSG has six stages.

1. Review the Intervention and Training Materials

Before you implement Create a Safe Medicine List Together, the practice champion needs to understand the materials, their intended use, and strategies for success.

Create a Safe Medicine List Together Patient Reminder Card

This postcard-sized reminder card provides patients with a visual cue to bring in their medicines to their next appointment.

Your practice may consider:

- Mailing the reminder card to patients 1 to 2 weeks before their scheduled appointment.
- Giving the card to patients at the end of their visit to remind them to bring their medicines to their next visit.
- Using English and other language versions of the reminder card.

Practices also found that adding a message to bring in medicines to the auto-call appointment reminder script helped encourage and reinforce the need for patients to bring in their medicines.

Create a Safe Medicine List Together Patient Poster

The patient poster can be hung in an examination room or in the waiting room to help patients understand what they are being asked to do. When planning the implementation, you may want to consider including posters where they will be most visible to patients and their family members. Consider whether you will need English and other language versions of the patient poster.





Procedure To Create a Medicine List

The Procedure To Create a Medicine List provides the steps to take to create a safe medicine list together. This procedure includes steps to take before the appointment, to create the medicine list if the patient has brought in the medicines, and to create the medicine list if the patient has not brought in the medicines. It also includes steps for the clinician during the appointment.

Create a Safe Medicine List Together Checklists

The Create a Safe Medicine List Together strategy has two checklists: one checklist to use when patients bring in their medicines and another checklist to use when they do not. These checklists are based on the procedure, which provides more detail if needed.

The checklists will be helpful when first adopting the intervention in practice. Once your team is comfortable with the process, they may need to use the checklists less often, but keeping them on hand attached to the computer station for quick reference may support consistent application of the strategy.

Create a Safe Medicine List Together Training Toolkit

The training toolkit provides slides, scripts to use for what to say to patients about bringing in their medicines, role play scenarios to practice the strategy, and a training guide ("How To Use the Training Toolkit") to help with training and adoption. The training toolkit should be used by the practice champion and would be most successfully used in collaboration with a clinical and staff champion.

Overcoming Barriers to Medicine Adherence

This job aid provides some quick tips on how to overcome some of the most common barriers to medicine adherence. This tool can be used during the training as a handout and kept on hand for quick reference. It will be particularly useful during the early adoption phase of the strategy.



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Ch	ec	klist: Creating a Medicine List
Whe	n pat	inst dass NOT being medicines
	ting t Use th	
	cking	
	For ca For ca patient	Checklist: Creating a Medicine List
Con	spleti	When patient brings medicines
	Ask if	Starting the Process
	If ther Updat	Thank the patient for bringing in his or her medicines. Use the word "medicine" instead of medication.
_		
	shing Check	Creating the Medicine List With the Medicines One by one, compare cach medicine to what is in the EHR.
	Tell th	Discuss each medicine with the patient; ask the patient to show you how he or she takes the medicine.
		Checking the Medicine List in the EHR
		For each medicine listed in the EHR that the patient did not bring in, ask if the patient is still taking it.
		For each medicine the patient is still taking, discuss the medicine with the patient; ask the patient how he or she takes the medicine.
		Completing the Medicine List
a.	ANR	Ask if there are any more medicines that the patient forgot to bring in or did not want to bring in.
A	Kanot at	If there are additional medicines, ask the patient how he or she takes the medicines.
		 Update the EHR as necessary.
		Finishing the Process
		Check whether any refills are needed. Tell the clinician of any medicines that are not being taken as directed or as listed in
		La Ten the current of any measures that are not being taken as directed or as insee in the EHR.
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		Create a Safe Medicine List Together New To Use the Training Toolkit

List Together			
How To	Use the Training Toolkit		
What is	the Create a Safe Medicine Li	t Together strategy?	
to actively bring in al	participate in developing a complete an II the medicines they take, both prescrib to such as injections, inhalers, ointment	r is an effort to engage patients and families d accurate medicine list. Patients are asked to eed and over the counter, including non-oral s, and drops, as well as medicines they only	
Staff with and accura	in your practice will work with the patie the medicine list, and clinicians will con	nts and their families to develop a complete duct medication reconciliation based on the li-	
What is	the training toolkit?		
Helg Give Inch	ng toolkit: s you understand the strategy to Creats s you the tools to help you train your p dee Training slides with speaker notes. Role play scenarios for practice. Socius that care tear mombers can u	ractice in the strategy.	
How sh	ould I train my practice?		
	tomize the slides, role play scenarios, an it how you will implement the strategy.	d scripts to reflect the decisions you have made	
2. Dec and train	staff together, or you may want staff tra	training. You may want to train clinicians ining to have a different focus than clinician	
	dule a training meeting (or several meetings of at least 15 minutes.	tings). If possible, try to schedule training	
	ent the training.		
	duct role play scenarios to give your sta		
6. Pros	ide staff with copies of the scripts you h	ave chosen.	
3. A	Ra	The Guide to Importing Patient Solity in Primary C Scringe by Engaging Patients and East	



2. Make Decisions for Your Implementation

You will need to make several decisions to support the design of your Create a Safe Medicine List Together implementation. These are listed in the Quick Start Guide and include decisions on:

- How you will obtain materials,
- What the scope of your implementation will be,
- What the workflow will be in your implementation,
- How you will encourage and reinforce the use of the strategy, and
- Who will champion the implementation.

3. Customize the Training for Your Practice

The Create a Safe Medicine List Together strategy includes a training guide, slides, scripts, and role play scenarios for you to use for team training. You will need to customize the slides and the scripts to reflect the decisions you make on how to implement the strategy in your practice.

It is important to practice the approach to Create a Safe Medicine List Together for when patients brings in their medicines and for the cases when patients do not. This way your team members will be able to handle any scenario they are presented with.

4. Train Team Members

You should organize initial training sessions to inform staff and clinical teams of the implementation, its goals, and the processes that will be piloted during the initial adoption.

Ideally, trainings should be between 15 and 30 minutes and leverage existing meetings to minimize disruption. Make sure you have copies of the materials for everyone who is attending the training session so they can practice and feel comfortable with the strategy and how to use each material during implementation. Provide enough time to answer questions and discuss any concerns.

Practicing through role play is very important. Try to find opportunities to practice, such as staff meetings, huddles, and "Lunch & Learns."

5. Go Live With Implementation

Once your team is trained and materials are obtained and ready to use, it is time to go live with the Create a Safe Medicine List Together strategy.

- Inform staff and clinical teams of the go live date and timelines for initial adoption and evaluation.
- Reinforce the training by using staff meetings and huddles to discuss challenges to implementation and share success stories. These discussions should be held at least weekly during the initial implementation period. This will promote the Create a Safe Medicine List Together strategy and encourage its sustained adoption.

 Identify good implementors and use them as peer coaches or mentors. Share stories of "Safety Catches" revealed through using the strategy.

6. Evaluate Your Progress

In addition to the practicewide evaluation of patient safety, it is important to select one or two evaluation measures or metrics specific to the Create a Safe Medicine List Together strategy. Examples of these are provided in the Quick Start Guide.