

# QUALITY STANDARDS

## Placemat for Medication Safety

This document is a resource for health care providers and summarizes content from the [Medication Safety](#) quality standard. It can be used to support health care providers in the provision of care, but does not override their responsibility to make decisions with patients, after considering each patient's unique circumstances.

### Patient Involvement in Decision-Making

#### Quality Statement (QS) 1: Involvement in Decisions About Medication

People (or their substitute decision-makers) are involved in making informed decisions about their medications.

Offer people (or their substitute decision-makers) the opportunity to make informed decisions whenever medication is started, stopped, changed, or deprescribed. Involve caregivers in these discussions, with the person's permission.

To facilitate decision-making:

- Use the most effective method of communication for the person

- Consider using decision aids (if available)
- Ask open-ended questions to understand the person's preferences, concerns, and expectations; answer any questions they may have about the medication
- Present evidence-based information in a format suitable for the person's needs and preferences
- Avoid making assumptions about the person's treatment-related values and preferences, which may be different from your own
- Ensure that, at a minimum, the information you provide addresses the reason for use, potential benefits and harms, and anticipated out-of-pocket costs

### Medication Prescribing and Review

#### QS 2: Prescribing Practices

Prescriptions are sent to the dispensing pharmacy via e-prescribing software embedded in the patient's electronic medical record, which allows for two-way communication between the prescriber and the pharmacist. Effective clinical decision support systems are used to aid prescribing.

Use the e-prescribing software (e.g., [PrescribelT](#)) in your patient's electronic medical record (EMR) to ensure that their medication information can be stored, accessed, and shared with their pharmacy, and to facilitate two-way communication with the pharmacist.

Along with your clinical experience, use a computerized clinical decision support system or a system with those functionalities to help guide prescribing of the optimal medication and dosage and to reduce the risk of adverse effects and harms associated with prescription errors and faults. Use the structured data fields of the e-prescribing software, rather than free-text fields, to ensure that clinical decision support rules are activated.

If you are sending the prescription to a community pharmacy, send it to the patient's pharmacy of choice.

Encourage patients to use only one pharmacy, if possible, to enable checking for drug interactions and keep their medication records (including allergy information) in one place.

#### QS 3: Accurate and Up-to-Date Medication List

An accurate and up-to-date list of medications is available to people taking medication (and their families and caregivers, as appropriate) and to relevant health care professionals.

Engage people in creating and updating their medication list with all the medications they take regularly or as needed (including prescription medications, over-the-counter medications, vitamins and minerals, herbal and natural health products, traditional medicines, medication samples from prescribers, etc.), and ensure they understand all medications they are taking, and why. Encourage

people to keep an up-to-date copy of their medication list with them and to share it with their health care providers.

#### QS 4: Structured Medication Review

People taking medication have structured medication reviews, especially during health care visits when medications are a major component of their care, or as clinically indicated.

Identify people who may benefit from a structured medication review. Undertake medication reviews regularly with people taking medication or refer people to a specialist in this area. Work with people to address any individual issues or concerns they raise about their medications.

A structured medication review takes into account the following:

- All medications a person takes regularly or as needed (see QS 3, medication list), and what they are for
- The appropriateness, safety, and effectiveness of the medications
- The person's risk for or history of adverse drug reactions
- The person's views and understanding of their medications, and any concerns or questions they may have (including those of family members or caregivers, where appropriate)
- Any monitoring needed to evaluate the effectiveness or safety of their medications

## Reporting Patient Safety Incidents

#### QS 5: Medication-Related Patient Safety Incidents

Patients, caregivers, health care providers, and organizations recognize, report, and learn from medication-related patient safety incidents. Health care providers and organizations support a patient safety culture that is person-centred, just, and trusting.

Offer information to people taking medication (and their family and caregivers) about how to identify and report medication-related patient safety incidents.

When incidents are identified, take action to reduce further risk. Report incidents in a consistent and timely manner, in line with existing reporting systems. Apply and share learnings with others.

## Resources

- *Medication Safety* [quality standard](#) and [patient guide](#) [bit.ly/3GDV7J0](https://bit.ly/3GDV7J0)
- *Transitions Between Hospital and Home* [quality standard](#) and [patient guide](#) [bit.ly/3gw26ce](https://bit.ly/3gw26ce)
- [Best Possible Medication Discharge Plan](#) [bit.ly/3mOQDrs](https://bit.ly/3mOQDrs)
- [Canadian Incident Analysis Framework](#) [bit.ly/3Fx9j5z](https://bit.ly/3Fx9j5z)
- [Health Canada's MedEffect Canada Program](#) [bit.ly/3V3iUqc](https://bit.ly/3V3iUqc)
- [Institute for Safe Medication Practices Canada High-Alert Medication List](#) [bit.ly/3MX4Eoh](https://bit.ly/3MX4Eoh)
- [Medication Error Reporting Program](#) <https://bit.ly/46g0Uic>
- [Ontario MedsCheck](#) [bit.ly/3OB8oDV](https://bit.ly/3OB8oDV)
- [Ontario Primary Care Medication Reconciliation Guide](#) [bit.ly/3EXkjsG](https://bit.ly/3EXkjsG)
- [Patient-Oriented Discharge Summary](#) [bit.ly/43On0qG](https://bit.ly/43On0qG)
- [5 Questions to Ask About Your Medications](#) [bit.ly/3yi1PPF](https://bit.ly/3yi1PPF)

Additional tools and resources are on [Quorum](#) [bit.ly/3gtbLR3](https://bit.ly/3gtbLR3)

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