

Transitions, Medication
Management and
Advanced Care Planning
for Aging Individuals:
The Role of the
Pharmacist

Angela M. Hill, Pharm.D.,
CRPh, FAACP

Professor, USF Taneja
College of Pharmacy



Learning Objectives

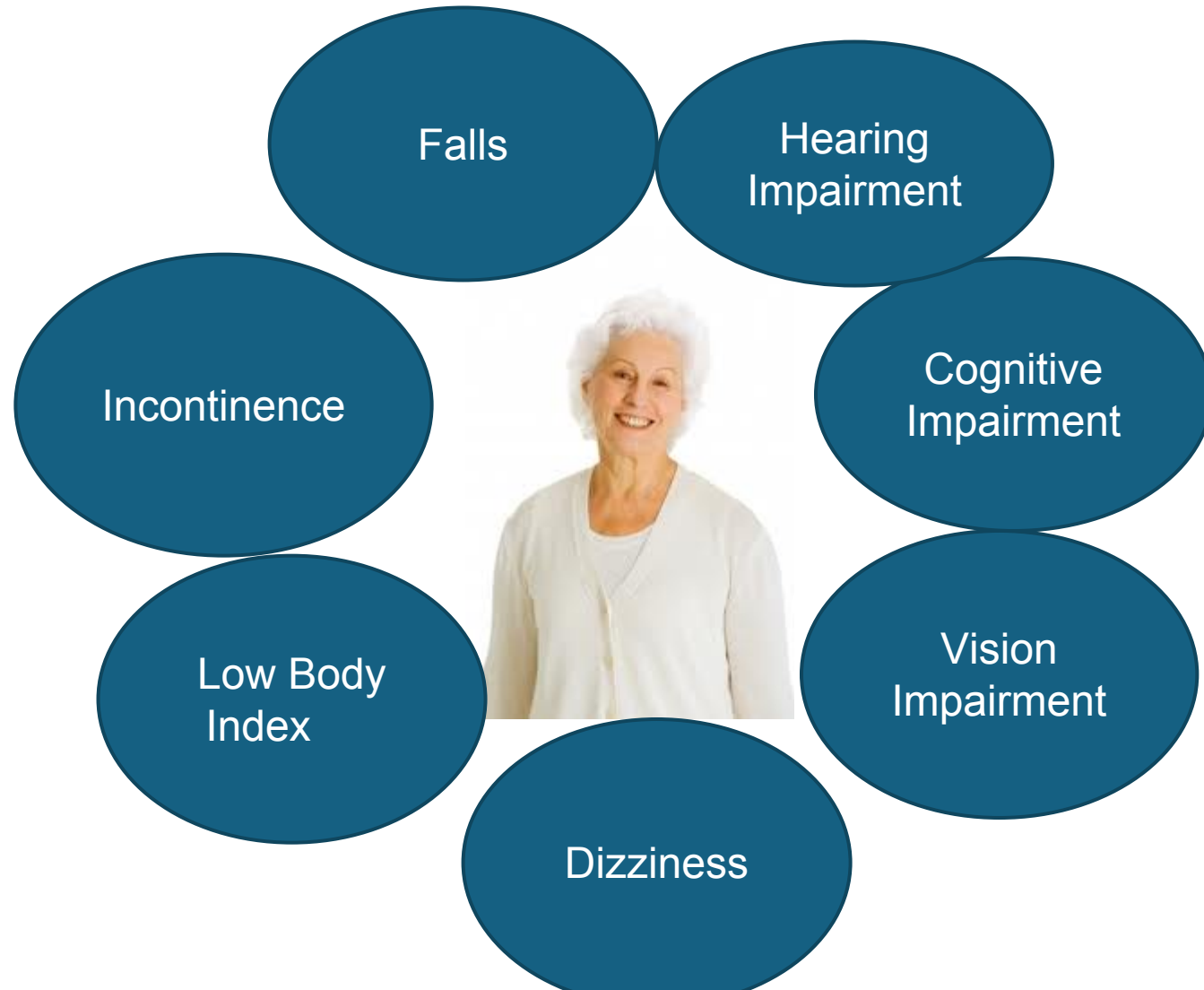
- Demonstrate and discuss the process of addressing medication management during care transitions.
- Describe Important advanced care planning considerations for aging individuals.
- Apply polypharmacy management strategies, medication reconciliation practices, and advanced care planning tactics to a case-based scenario.

Key Issues Affecting Geriatric Patients

- Polypharmacy
- Chronic Health Conditions
- Financial Challenges
- Geriatric Syndromes
- Technology Literacy
- Social Isolation & Loneliness
- Limited social support



Geriatric Syndromes



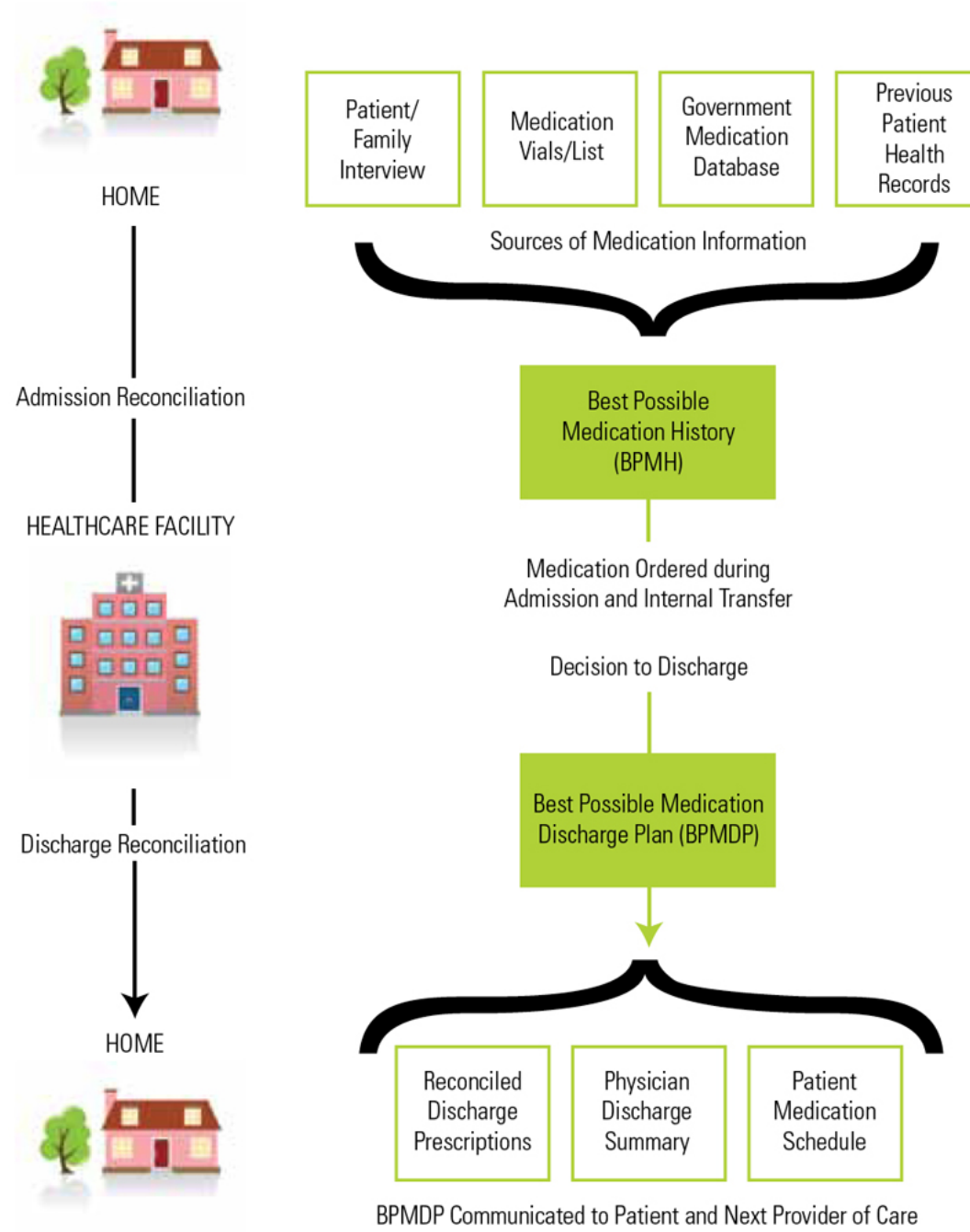
Facts on Medication Errors and Reconciliation

- According to the Institute of Medicine's Preventing Medication Errors report, the average hospitalized patient is subject to at least one medication error per day.
- More than 40 percent of medication errors are believed to result from inadequate reconciliation in handoffs during admission, transfer, and discharge of patients.
- Of these errors, about 20 percent are believed to result in harm. Many of these errors would be averted if medication reconciliation processes were in place.

When Should Medication Reconciliations be Performed?

- Doctors' visits
- Therapy visits
- Emergency room visits
- Admission to hospitals
- Discharge from hospitals
- Transitions from home to institutional care
- Transitions from institutional care to rehabilitation centers
- Home based care
- Others.....

FIGURE 1.
Overview of medication reconciliation – what, where, when and how



Steps for Medication Reconciliation

- **Collect** all pertinent patient medication history
- **Compare** this history to all transfer points
 - Admission
 - Transfer
 - Discharge
- **Correct** all discrepancies

How do you perform a Med Rec?

Added	Omitted	Changed	Not Changed



Strategies for Managing Polypharmacy

- Check medication administration timing
- Check for potential drug interactions
- Identify duplication of therapy
 - Vitamins
 - Nonprescription vs prescription
 - Herbals vs prescription
- Check doses of each medication
- Perform side effect inquiries
- Identify medications that can affect the brain
- Identify fall-risk medications
- Identify swallowing-risk medications

Who Did IT? Activity

- Did a medication cause it?
- Can a medication fix it?

Case 1

- A 73 y.o. patient taking Hydrochlorothiazide, Zolpidem, and Alprazolam comes to pick up their monthly refills from your pharmacy. They tell you that they are going to the bathroom at least three times during the night.
- Looking at this patient's regimen... **Who Did IT?**

Case 2

- A 73 y.o. patient taking HCTZ, Zolpidem, Tylenol PM, and Alprazolam tells you that they have constipation all of the time.
- Looking at this patient's regimen... **Who Did IT?**

<http://www.acbcalc.com/>

Case 3

- A 73 y.o. patient taking HCTZ, Zolpidem, Chlordiazepoxide/Clidinium, Ibuprofen, Methocarbamol, and Alprazolam tells you that they have fallen three times over the last month.
- Looking at this patient's regimen... **Who Did IT?**
- Identify the inappropriate medication(s) in the case.

Strategies to address MRPs

- Modify dosing of medication
- Change administration time of medication
- Replace problematic medication with alternative medication
- Discontinue medication (deprescribe)

Ethical/Legal Challenges Affecting the Elderly

Care Planning	Estate Planning	Care Challenges
Advanced Directives	Wills Trust Health Care Surrogate/Proxy Power of Attorney	Elder abuse

For more information:

- **For more information about advance directives**
- **Administration for Community Living (ACL)**
202-401-4634
<https://www.acl.gov>
- **Department of Veterans Affairs**
877-222-8387
www.va.gov/geriatrics
- **OrganDonor.gov**
Health Resources & Services Administration
www.organdonor.gov
- **American Bar Association**
800-285-2221
www.americanbar.org
- **CaringInfo**
National Hospice and Palliative Care Organization
800-658-8898
caringinfo@nhpco.org
www.caringinfo.org
- **The Conversation Project**
866-787-0831
<https://theconversationproject.org>
- **National POLST**
202-780-8352
info@polst.org
www.polst.org
- **PREPARE for Your Care**
info@prepareforyourcare.org
<https://prepareforyourcare.org>

Polypharmacy Management Reminders

- Use Tools to identify inappropriate medications
 - BEERS
 - START/STOPP
 - Anticholinergic Burden Scale
- Evaluate timing of administration of medications
- Cross-check doses
- Check for drug interactions
- Minimize duplication of therapy
- Don't forget vitamins & herbals

Care Planning

- Advance care planning involves discussing and preparing for future decisions about medical care if a person becomes seriously ill or unable to communicate their wishes.

Types:

- Advanced Directives
- Do Not Resuscitate Orders





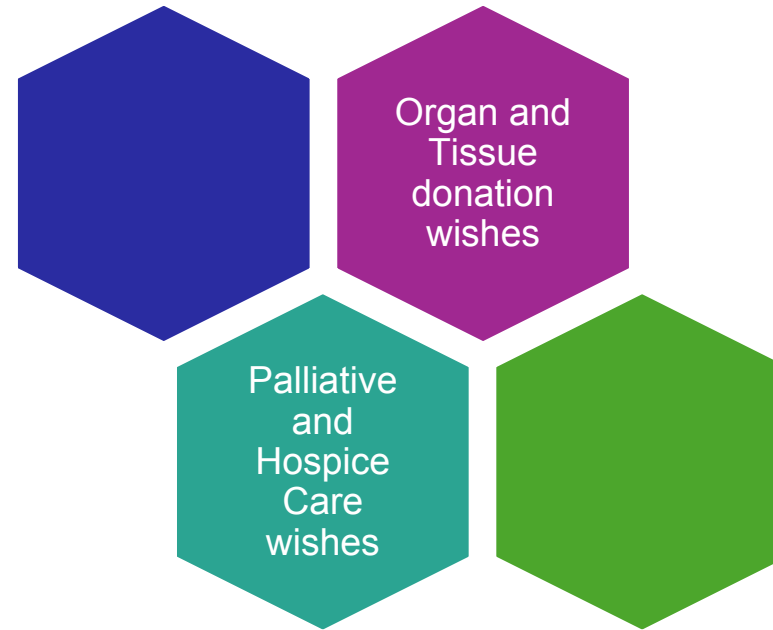
End of Life Wishes

- Do Not Resuscitate (DNR)
- Do Not Intubate (DNI)
- Do Not Hospitalize (DNH)
- Out of Hospital DNR
- Physician orders for life-sustaining treatment (POLST) and medical orders for life-sustaining treatment (MOLST) forms

<https://www.nia.nih.gov/health/advance-care-planning/advance-care-planning-advance-directives-health-care>

<https://www.nia.nih.gov/health/advance-care-planning/advance-care-planning-advance-directives-health-care>

Additional Considerations



Essentials for Estate Planning



<i>Advance Directive</i> NOTIFICATION	
_____	_____
Name	Number
_____	_____
Name	Number
_____	_____
Name	Number
_____	_____
Print name	Signature
<input type="checkbox"/> I have a health care power of attorney	<input type="checkbox"/> I have an advance directive
I have talked with my family and my doctor about the care I want. If I am unable to speak for myself, please contact:	
_____	_____
Name	Number
	(Additional names on back)

Your life. Your terms.

For more information visit:
www.aha.org/putitinwriting

How do you find the forms for Estate Planning?

- Contact your State Attorney General's Office.
- Contact your [local Area Agency on Aging](#). You can find your area agency phone number by visiting the [Eldercare Locator](#) or by calling 800-677-1116.
- Download your state's form online from one of these national organizations: [AARP](#), [American Bar Association](#), or [National Hospice and Palliative Care Organization](#).
- If you are a veteran, contact your [local Veteran's Affairs \(VA\) office](#). The VA offers an [advance directive specifically for veterans](#).



Types of Elder Abuse

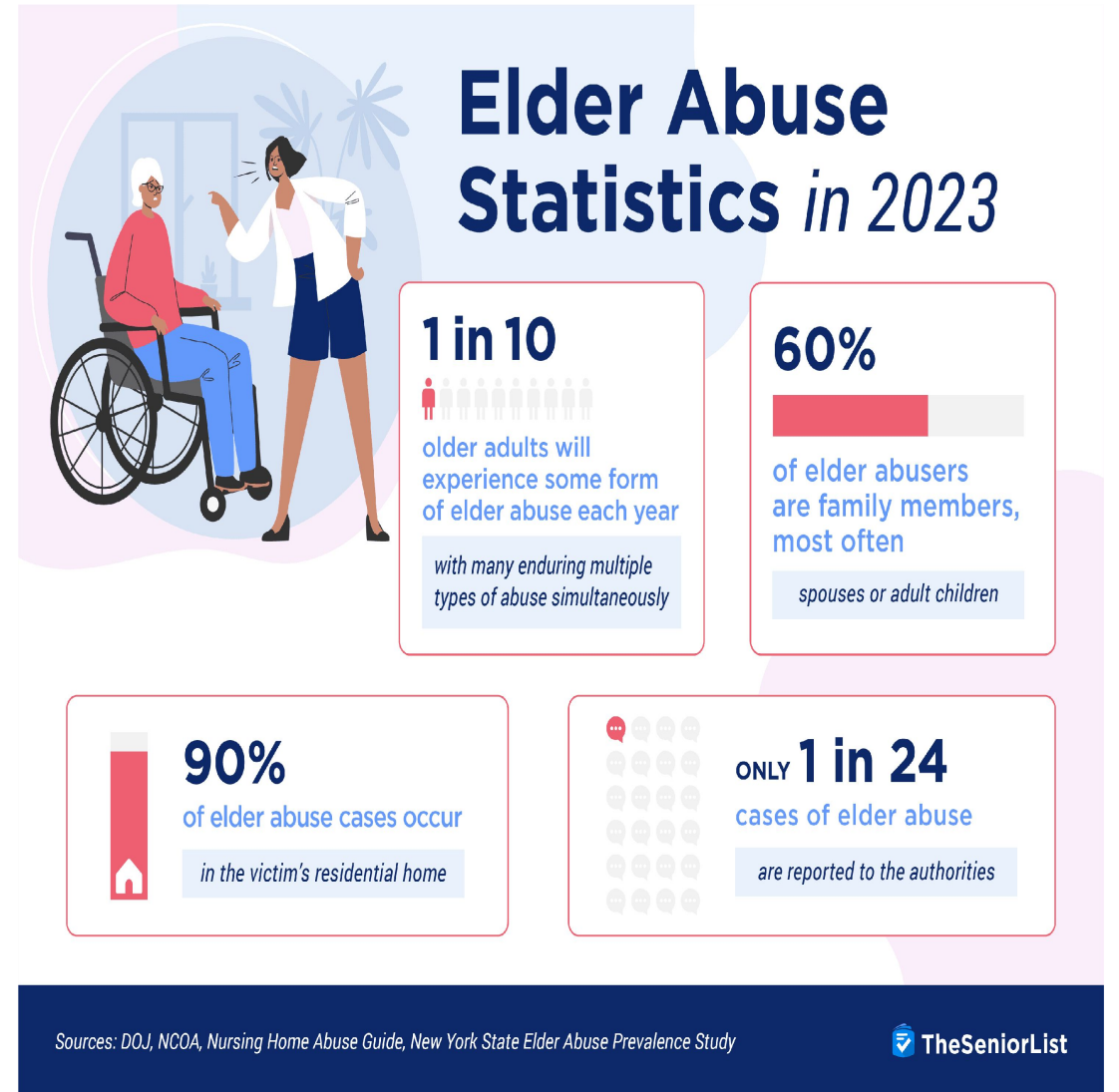
Caregiver Neglect

Financial Fraud & Exploitation

Psychological Abuse

Sexual Abuse

Physical Abuse



<https://bit.ly/3u8kvm7>

<https://bit.ly/4b6Dyhg>

<https://www.justice.gov/file/1098056/download>



Red Flags of Nursing Home and Assisted Living Abuse

- **Bedsore**
More than 1 in 10 nursing home residents have bedsore.
- **Medication Errors**
In 2020, it was estimated that over 750,000 medication errors occurred in nursing homes.
- **Untreated Infections**
Nursing home acquired infections are one of the most common injuries resulting in lawsuits
- **Unexplained Broken Bones**
Unreported broken bones may indicate a concealed fall, or worse yet, physical abuse.
- **Weight Loss & Dehydration**
A recent investigation by the Federal Government found 43% of nursing home residents sampled to be critically underweight.
- **Falls**
Patient falls are the #1 cause of deaths and serious injury in the elderly.



Questions Before Simulation?



Case

- Mr. Porter Brees is a 76 y.o. male who was Baker Acted and admitted to NorthBay Mental Health Hospital. He is transitioned several times over a few months.
- Your academic groups are responsible for answering the assigned questions.

Case Discussion

- Identify and critique the medication discrepancies for Mr. Porter Brees between his home medications and admission to Happy Days Assisted Living and Memory Care Facility on March 1, 2016 (Look at pages 1 & 3)
- Identify and critique the medication discrepancies for Mr. Porter Brees between Happy Days Assisted Living and Meridian Palms on March 21, 2016.
- Identify and critique the medication discrepancies for Mr. Porter Brees between his admission to Meridian Palms on 3/21/2016 to Meridian Palms North on 3/22/2016.
- Identify and critique the medication discrepancies for Mr. Porter Brees between Meridian Palms North on 3/22/2016 and his readmission to Happy Days Assisted Living and Memory Care Facility on April 6, 2016.(Pages 4 to 5)
- Prior to the surgery, the doctor and case manager inquire about whether Mr. Porter has a living will. She tells them that she her sons have Power of Attorney for the two of them and they have a will. In the event that Mr. Porter requires resuscitation after his surgery, is his wife in a position to make decisions regarding his healthcare?

Case Discussion

- Mr. Porter has his wife as his health care proxy. What will this allow her to do?
- Mr. Porter's admission to the assistant living facility, they are asked what financial "collateral" they have besides Medicare. What document(s) would prevent the facility from considering the boxing gyms as collateral?
- In his younger years, Mr. Porter always said he wanted to donate his brain to research to his wife's concern. She said she couldn't stand the thought of her husband being cut open for any reason, not even an autopsy. What legal document(s) should be in place to ensure that his wishes are followed?
- Based on the medications he was taking on March 22, 2016, which medication(s) could cause medication-related problems or be deemed inappropriate for this patient based on his age?
- Based on the medications he was taking on April 6, 2016, which medication(s) could cause medication-related problems or be deemed inappropriate for this patient based on his age?

Questions?

