Letters to the Editor

Disjointed medication management systems in aged care

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In the February 2017 issue of Australian Prescriber, John Jackson and Elspeth Welsh discussed medication charts used in residential aged-care facilities. They highlighted the advantage of having prescribers, aged-care staff and pharmacists working from a single record of medication order information. Their article focused primarily on problems with paper medication charts, and suggested that electronic charts may address the problems.

We wish to highlight issues with currently available electronic medication charts, also known as electronic medication administration records. Unfortunately, these are usually not integrated with GPs’ clinical software. It is common practice for GPs to handwrite medication orders on paper charts which are copied and faxed or emailed to the residential aged-care facility’s pharmacy. There the order is transcribed into an electronic system to populate the electronic medication administration record. When a dose is altered or a drug is stopped the same process has to occur to update the electronic medication administration record. GPs usually also prepare separate Pharmaceutical Benefits Scheme (PBS) prescriptions via their clinical software or by hand.

These processes lead to the following:

- multiple, sometimes conflicting, medication records
- delays in medication administration (or cessation) for unwell patients
- medication errors
- major inefficiencies for GPs, aged-care staff and pharmacists.

What is needed are fully integrated electronic medication management systems, in which GPs (and other prescribers) can initiate, modify and cease medications electronically, with the order automatically transmitted to the electronic medication administration record and the pharmacy, while also fulfilling PBS prescription requirements and linking with GPs’ clinical records. This would be more efficient and have safety benefits.

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REFERENCES


John Jackson and Elspeth Welsh, the authors of the article, comment:

The letter highlights the risks associated with disjointed medication management systems whether they be hard copy, digital or hybrid systems. The official hard copy National Residential Medication Chart, developed to facilitate PBS prescribing and incorporating proven patient safety features, can only address some of the issues identified in the letter (e.g. multiple, sometimes conflicting, medication records). However, the current level of implementation has limited these benefits.

We agree that fully integrated electronic medication management systems are required in residential aged care. Some of the delays and inefficiencies will only be fully addressed by real-time, comprehensive electronic communication between aged-care staff, prescribers and pharmacists.