



Original Research

Med Wise: A theory-based program to improve older adults' communication with pharmacists about their medicines

B.A. Martin, B.S., M.S., Ph.D.^{a,*}, B.A. Chewning, Ph.D.^a,
A.R. Margolis, Pharm.D., M.S.^a, D.A. Wilson, M.S.^a,
J. Renken, M.P.H.^b

^aUniversity of Wisconsin-Madison School of Pharmacy, 777 Highland Avenue, Madison, WI 53705-2222, USA

^bCommunity Academic and Aging Research Network, 310 N Midvale Blvd, Suite 205, Madison, WI 53705, USA

Abstract

Background: The health and economic toll of medication errors by older adults is well documented. Poor communication and medication coordination problems increase the likelihood of adverse drug events (ADEs). Older adults have difficulty communicating with health care professionals, including pharmacists. As such, the theory-based *Med Wise* program was designed. Building on the Self-efficacy Framework and the Chronic Care Model, this program was tested with community-dwelling older adults.

Objectives: This study and its resultant paper: (1) describe the theory-based design of the *Med Wise* program; (2) describe the collaboration of multiple community partners to develop a sustainable model for implementing *Med Wise*; and (3) present findings from the *Med Wise* course evaluation.

Methods: *Med Wise* was designed to be a sustainable, skill-based educational and behavior change program consisting of two, 2-h interactive classes to enhance participants' medication communication skills and self-efficacy. To explore the potential to disseminate *Med Wise* throughout the state, a partnership was formed between the pharmacy team and the statewide Aging & Disability Resource Centers (ADRCs), as well as the Community-Academic Aging Research Network (CAARN). Over 30 lay volunteer leaders in 8 Wisconsin (U.S. State) counties were trained, and they delivered *Med Wise* through ADRC community centers. The CAARN staff evaluated the fidelity of the course delivery by leaders. To evaluate *Med Wise*, a quasi-experimental design using pre/post surveys assessed knowledge, worry and self-efficacy. A telephone follow-up three months later assessed self-efficacy and translation of medication management skills and behaviors.

Results: *Med Wise* programs were presented to 198 community-dwelling older adults while maintaining program fidelity. This evaluation found significant increases in older adults' knowledge about pharmacists' roles and responsibilities, likelihood of talking with a pharmacist about medication concerns, and self-efficacy for communicating with pharmacists. At the 3 month follow-up, participants reported increased interactions with pharmacists, with 29.2% of participants reported seeking medication reviews and 28.5% medication schedule reviews.

Conclusions: The two-class *Med Wise* program showed sustained impact at 3 months on key outcomes. Further, the community partners successfully implemented the program with fidelity across 8 counties suggesting its ability to be disseminated and sustained. Future directions include expanding the program

* Corresponding author.

E-mail address: beth.martin@wisc.edu (B.A. Martin).

to examine wider adoption, and measuring program impact on regimen safety and health outcomes linked to increases in patient engagement.

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Introduction

Substantial research suggests that older adults are less likely to take an active role in their encounters with health care providers.^{1–4} They require considerable support in developing the skills and motivation to ask questions, explore options, and share care decisions with their providers, including their pharmacist. Taking an active role to engage pharmacists is especially important for older adults, whose medication regimens are more likely to be complicated and most at risk of medication problems.^{5–7}

The Institute of Medicine (IOM) has documented serious threats to patients' medication safety and called for system-wide change to help protect against preventable harm.⁸ Patients were to be at the center and in control of their care.⁹ However, little was done to improve community-dwelling older adults' skills to manage their increasingly complex regimens, or to help them work with pharmacists as a largely untapped resource to address complex regimens. As documented by Boyd et al, people with comorbidities may experience negative interactions from evidence based guidelines for multiple conditions.¹⁰ An unresolved issue is how to promote a partnership where older adults understand why they are at risk, understand pharmacists as a key medication management resource, and have the confidence to seek medication information and assistance as needed. An additional challenge is identifying a mechanism to accomplish this task in a way that overcomes longstanding underestimates of pharmacist expertise.¹¹

As such, the primary objective was to develop a sustainable, skill-based training program to assist older adults with their medication management. The investigators drew on the Self-Efficacy framework within Social Cognitive Theory to design and test the *Med Wise* program. The goal of the *Med Wise* program was to improve older adults' medication-related communication with pharmacists and other members of the health care team to enhance safe and efficacious medication management. From the outset, a long-term goal was to develop the program

in such a way that it would be sustainable and could be disseminated through the community. It was hoped to create patients who would partner with their personal pharmacist with expectations and skills that align with the growing potential of community pharmacists' expanding cognitive services. A partnership outside of pharmacy was required to achieve a community-based course dissemination system. Therefore, the Community-Academic Aging Research Network (CAARN) and state Aging and Disability Resource Centers (ADRCs) became key partners in the program development, dissemination and evaluation.

Methods

Theoretical foundation

The *Med Wise* program builds on the Chronic Care Model, which posits that informed older adults themselves can be the key to successfully addressing serious health concerns.¹² This skill-based program was designed to increase older adults' knowledge and self-efficacy (confidence) to communicate effectively with pharmacists and other health care professionals about their medicines. Self-efficacy has its roots in Bandura's Social Cognitive Theory, which posits that adoption of a new behavior is enhanced with increased self-efficacy.¹³ The *Med Wise* program design incorporates adult learning theory and Bandura's key mechanisms for increasing adoption of new behaviors: 1) developing discrepancy between current behaviors and desired behaviors (i.e. safe medication use for older adults); 2) lay leaders modeling the desired communication behavior; 3) learners rehearsing the desired communication behavior; and 4) learners receiving constructive, positive feedback on their communication style to enhance their skills and confidence to communicate and to achieve their desired outcomes.

Med Wise description

The *Med Wise* program consists of two interactive sessions to improve patient encounters

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