

# Optimization of medication in long term care facilities specific to mental health

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Context analysis to design an interprofessional intervention

## Background

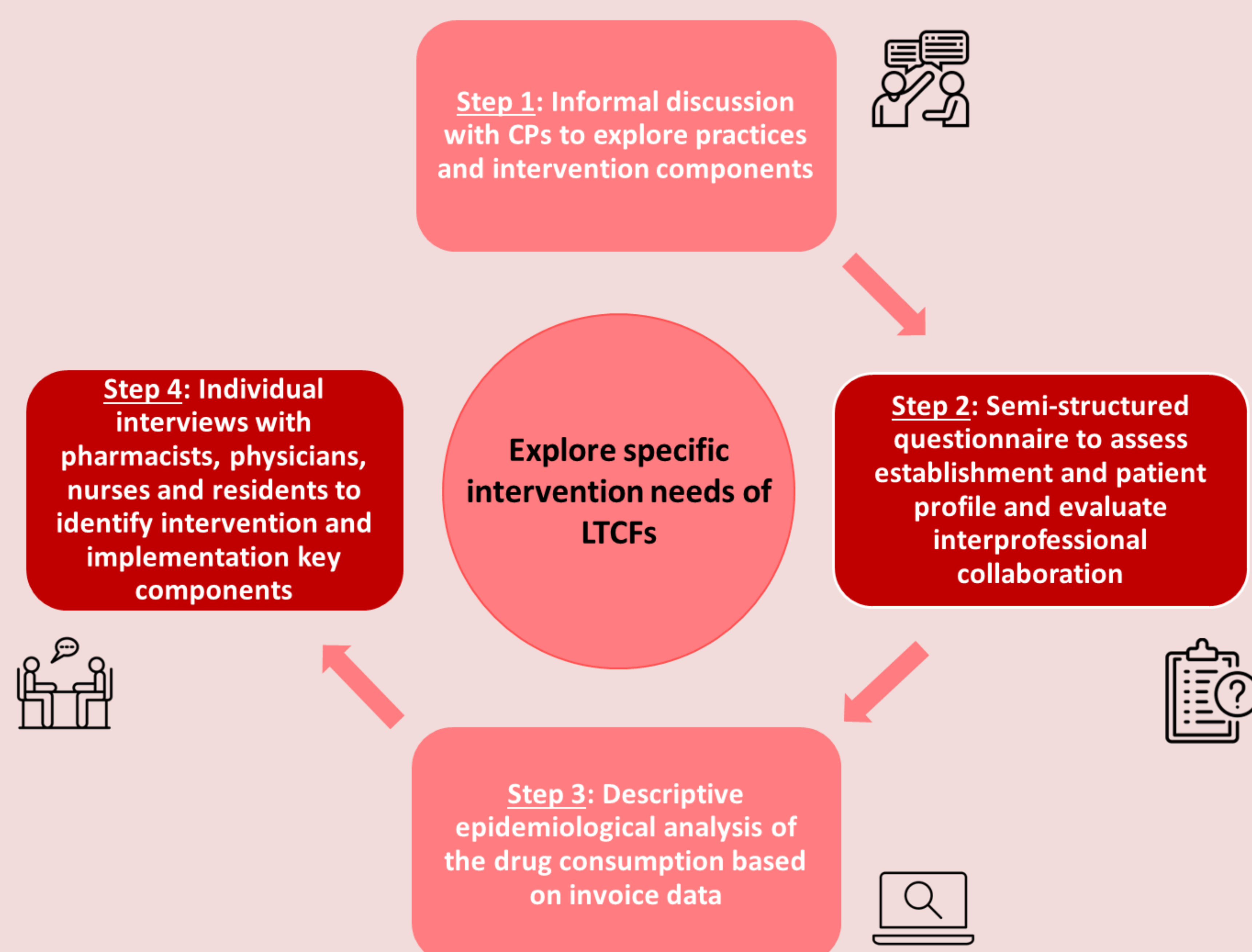
- The drug burden in care institutions such as nursing homes or long-term care facilities (LTCFs) specific to mental health is important.
- While a number of studies have been conducted in nursing homes to optimize the medication use, need and impact of interprofessional approaches in LTCFs have not undergone thorough study.

## Objectives

Gain insight for the design of a **tailored interprofessional intervention** of medication optimization that can be delivered to residents of mental health institutions in adequacy with the needs of the field and **elaborate an associated Implementation Research Logic Model**.

## Methods

**Contextual analysis** through a 4-step process is currently conducted in 20 LTCFs in canton of Vaud to better understand the medication use within these institutions and **evaluate need of intervention perceived by community pharmacists (CPs), other health professionals** collaborating with LTCFs as well as residents, and help tailor an efficient intervention :



## Results

- **Step 1 - Informal discussions** were conducted with 4 CPs, which highlighted specific interventions already conducted in these structures (e.g. monitoring of metabolic adverse effects), and supported the questionnaire construction.
- **Step 2 - A semi-structured questionnaire** was sent to 11 CPs collaborating with the 20 LTCFs. Time to gather data was set at 1 month. 7 CPs responded to the questionnaire, accounting for 11 LTCFs, representing 89 beds. The main elements highlighted were:



Big **gap between establishment** in terms of specific mission and then patient clinical profile and age, ranging from young adults to geriatric populations



**Good interprofessional collaboration** already in place, though room for improvement, notably for collaboration between CPs and psychiatrist physicians



Individual **medication reviews** seem to be particularly of interest, among other interventions



Identification of CP's **perceived barriers for implementation** of a new intervention in LTCFs specific to mental health:

- Time-consuming
- Lack of knowledge on mental health medication
- Multiplicity of contributors

- **CPs perceive the need for new interprofessional interventions in LTCFs specific to mental health** to optimize medication and enhance patient safety.
- Step 3 - Analysis of drug invoice data to objectify the potential of prescribing improvement and Step 4 - Conduction of individual interviews with pharmacists, physicians, nurses and residents to define specific intervention process including adequate implementation strategies are currently underway.

## Conclusion

Preliminary results helped us **assess perceived barriers by CPs** for implementation of new medication optimization interventions tailored to mental health and highlighted **good established interprofessional collaboration** already in place as well as their **interest in such approaches**.

The third step will facilitate a more comprehensive understanding of the quality of the prescription and the potential for enhancement. The fourth step will guarantee that the intervention to be piloted is considered appropriate and acceptable for other healthcare professionals and, most importantly, residents.