

CP 4.6: Home Medication Self-Management

Updated:
Reviewed:

Purpose

- To determine if the patient and/or caregiver is managing their home medications
- To refer any concerns or questions about the patients medication self-management to the health care team

Policy Statements

The Community Paramedic (CP) will respond to a request for CP care and will assess a patient's ability to self-manage their medications as part of the initial home visit assessment screen or as specifically requested on the Community Paramedicine Request for Service.

CPs are not authorized to administer medications to a patient or advise the patient with respect to any changes. It is expected that the CP will document findings and report them to the primary health care provider and collaborate with other health care team members to provide support as appropriate.

Procedure

1. **OBTAIN** and **REVIEW** patient's health history, current medication list (if available), and care plan prior to appointment.
2. **ASK** patient and/or caregiver questions re: medication self-management as outlined on Initial Assessment Screen form. Use open-ended questions to elicit responses. Some examples include:
 1. What medications do you take?
 2. How do you take your medications? Is that different from how you took them before? How is it different?
 3. What changes have there been to your medications in the last month?
 4. How many times per week do you skip, miss or forget to take your medications?
 5. Which medications do you take more than 3 times/day?
 6. When was the last time your doctor/NP or pharmacist went over your medications with you?
3. **GENERATE** list of medications (name, dosage, frequency) patient is currently taking and compare to current medication list provided to detect any discrepancies. **NOTIFY** health care provider/team if discrepancies found.

NOTE: Client may report their medications using brand names and medication list provided by HCP may use generic names.
4. **ASK** the patient and/or caregiver if there are any other medications, vitamins or herbal supplements they take that might be from another health care provider or self-prescribed over the counter and include these on list as well.
5. **ASK** patient and/or caregiver to show you their medications and system they use for organizing them.
6. **CONTACT** referring health care provider if paramedic or patient and/or caregiver have any concerns.

Documentation

DOCUMENT on appropriate records;

- Medication self-management section on Community Paramedicine Initial Assessment Screen form.
- Medication list and discrepancies on Progress Notes.

References

1. Dorman M, et al. Medication Management of the Community-Dwelling Older Adult. In *Patient Safety and Quality. An Evidence-Based Handbook for Nurses*. 2008.
2. Eagle County Paramedic Services. Community Paramedic Protocols Manual. 2013. [\[Link\]](#)

3. Tri-County Health Care Emergency Medical Services. Community Paramedic Policy & Procedure Manual. 2016.
[\[Link\]](#)
4. Vancouver Coastal Health. Vancouver Community AOA Practice Guidelines. Initial Assessment Tool – Guidelines for Use. March

