# Medication Reconciliation Experience in Psychiatric Hospitals, Saudi Arabia

**CPC-083** 

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### **Background:**

In 2006, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) started the new year with a mandate for accredited organizations to implement an innovative initiative: Medicine Reconciliation. The mandate attempted to address the 1.3 million iatrogenic adverse events that occur annually, many of which are related to medicines.

Medicine reconciliation is an effective process of reducing errors and harm associated with loss of medicines information, as patients transfer between wards (handovers). It may prevent up to 70% of all potential errors and 15% of all adverse drug events.

Literature investigation of medicines reconciliation is minimal in psychiatric hospitals.

Limited information is available about medicines reconciliation in psychiatric hospitals in Saudi Arabia.

# Purpose :

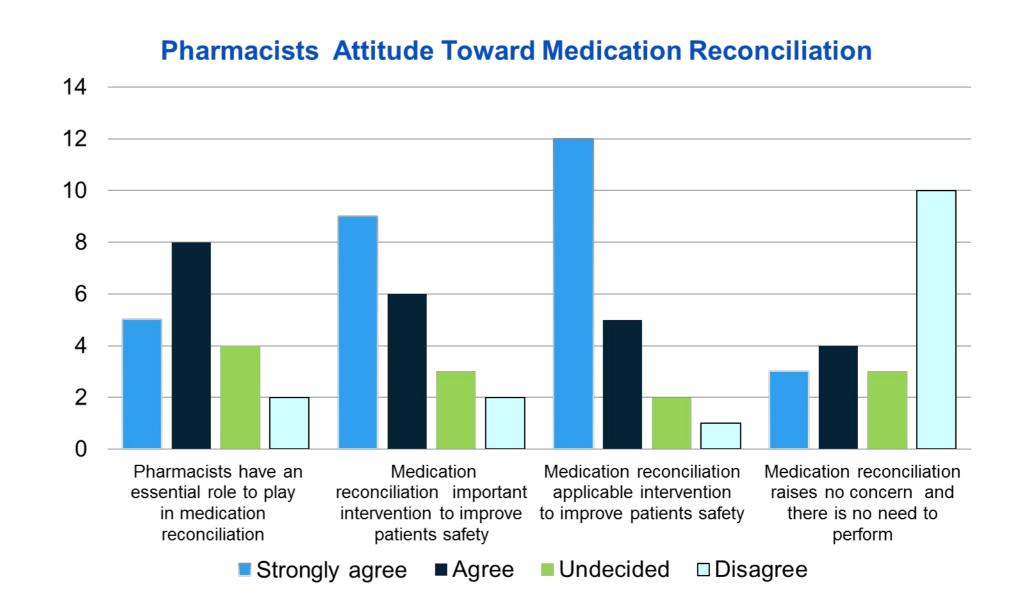
To gain an insight into pharmacists' practice, knowledge and attitudes toward medicine reconciliation in psychiatric hospitals and the most common challenges and barriers.

#### **Methods:**

We developed and administered a survey to the Director of Pharmacy at all psychiatric hospitals in Saudi Arabia (20 hospitals), The questionnaire was modified after piloting on 10 randomly-selected pharmacists working in psychiatric hospitals. The survey included scales measuring (1) pharmacists' attitudes towards medicine reconciliation, (2) pharmacists awareness of medicine reconciliation and (3) local practice in Saudi psychiatric hospitals.

## **Results (continue):**

Only 25% of pharmacy director had initiated medicine reconciliation in practice, and 40% did not believe that they had the necessary resources to manage discrepancies.



**Medication Reconciliation Practice in Psychiatric Hospital** 

	Yes	No
Medication Reconciliation services in pharmacy	10%	90%
Medication Reconciliation policy in pharmacy	10%	90%
Future plans for implementation of Medication Reconciliation services in pharmacy	25%	75 %
Medication errors related to loss of medication information during patients transfer in service	80 %	20 %
Medication errors related to therapeutic duplication?	70 %	30 %

#### **Conclusion:**

Pharmacists had a mixed attitude toward implementation of medicine reconciliation services due to the limited patient transfer between wards or between care (acute and ambulatory) in psychiatric hospitals; on the other hand they believed that medicines reconciliation would improve patient safety and result in a better therapeutic outcome. Pharmacists were willing to practice medicine reconciliation if they

#### could be trained.

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**Results:**