# **THE QUARTERLY CONNECTION**

Quarterly Report from Pharma-Care, Inc., Health Care Consultation Specialists

First Quarter 2016

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### Introducing HG+: New Software Application Designed to Improve Reporting

Pharma-Care, Inc. is pleased to announce the roll-out of our new software application, *Health Generations Plus* (*HG+*). This application was designed to improve accessibility to data and reporting for our clients.

This new web-based, HIPAA/HiTECH compliant system, was developed by PCI for use by our consultant pharmacists to meet the current and changing needs of our clients in the field of long-term healthcare. HG+ provides improved accessibility to patient and facility data and reports and allows for greater analytic capabilities.

Clients that use EPIC, our fax-based medication review system, have benefitted from the use of the HG+ application since 2014. Mid-year 2015, HG+ was implemented for use at our adult medical day care centers, assisted living facilities, clinics, group homes, pediatric long-term care facilities, pediatric medical day care centers, personal care homes, rehabilitation centers, residential centers, and sub-acute facilities. In October of 2015, the HG+ system began rolling out for use in our adult long-term care facilities as well. It will be fully implemented by the end of 2016.

It should be noted that the appearance of the Monthly Action Reports and Quarterly P&T Summary Reports that clients receive will mostly remain unchanged. Some reporting improvements are scheduled to be added during 2016.

If your consultant has not already done so, they will be asking you some questions concerning internet connectivity at your facility. Please provide them with information regarding the internet options available at your facility and whether they can perform their duties with direct cable connection, WiFi access, or some other password-protected product.

In the future, the HG+ application will also allow clients to access reports via the internet.

## Important Medication Issues to Note

Please note the following areas of concern that have been frequently noted by our consultant pharmacists on their rounds.

- Midodrine, used to treat orthostatic hypotension, has caught a lot of surveyors attention recently. The drug is usually ordered with a parameter to "hold" if the blood pressure is ABOVE a specific blood pressure range. Nurses are typically used to holding antihypertensive drugs, which work opposite Midodrine, when the blood pressure is BELOW a specific blood pressure range, so this can be confusing. Surveyors are finding that this medication is not always appropriately held per parameter. Nurses are used to orders the other way around. *Please look carefully at the parameter when administering Midodrine, and hold the medication when appropriate.*
- Incorrect rotation and application of the Exelon Patch. Examples of <u>incorrect</u> usage:
  - Use of the site sheet as a MAR or as a reference without consistent use throughout the facility.
  - The patch is removed at night.
  - The patch is switched from left to right instead of following the proper rotation schedule which allows for the 14-day break required before reusing an application site.
- PRN (as needed) Clonidine used without documentation of the blood pressure at that parameter.
- Nitroglycerin patch documented as LC (left chest) and RC (right chest) instead of using the key printed on the MAR.
- Refrigerator temperatures not recorded as per facility policy. Also, not documenting if temperature is out-of-range or when it has been adjusted.
- Not following up on pharmacy consultant recommendations in a timely manner. Some facilities can take two months or more to address our reports. The issues cited in our reports should be addressed immediately upon receipt and be treated as an urgent matter.
- Calcium and iron not being administered separately. Also, calcium and iron not being given apart from Synthroid.
- Acidophilus not being stored in refrigerator.





## CDC Recommends All Nursing Homes Improve Antibiotic Use

New recommendations from the CDC advise all nursing homes to improve antibiotic prescribing practices and reduce their inappropriate use to protect residents from the consequences of antibiotic-resistant infections such as C. difficile.

To guide these improvements, the CDC has released a new resource, "*Core Elements of Antibiotic Stewardship for Nursing Homes*". The guide provides practical ways for nursing homes to initiate or expand antibiotic stewardship activities such as examples of how antibiotic use can be monitored and improved by nursing home leadership and staff. A companion checklist can be used to assess policies and practices already in place or ways to initiate new ones.

At a minimum, the guide notes the following activities to be included:

- 1. Leadership commitment: Demonstrate support and commitment to safe and appropriate antibiotic use.
- 2. Accountability: Identify leaders who are responsible for promoting and overseeing antibiotic stewardship activities at the nursing home.
- 3. Drug expertise: Establish access to experts with experience or training in improving antibiotic use.
- 4. Action: Take at least one new action to improve the way antibiotics are used in the facility.
- *5. Tracking:* Measure how antibiotics are used and the complications (e.g., C. difficle infections) from antibiotics in the facility.
- *6. Reporting:* Share information with healthcare providers and staff about how antibiotics are used in the facility.
- 7. *Education*: Provide resources to healthcare providers, nursing staff, residents and families to learn about antibiotic resistance and opportunities for improving antibiotic use.

#### For more information see:

www.cdcgov/longtermcare/prevention/antibioticstewardship.html.

Or call the Director, Health Facility Survey and Field Operations, NJ Dept. of Health at (609) 292-9900.



PCI consultants show off a portion of the food items, hats, gloves and scarves collected by staff for the needy at December's staff meeting. From left are: Jean Abdou, Tracy Lao, Shellie Brooks, Belinda Cella, Sue Serubo, and Darlene Paro-An.

# **EPIC Corner**

ELECTRONIC PHARMACIST INFORMATION CONSULTANT (MEDICATION REVIEWS WITHIN 48 BUSINESS HOURS)

## EPIC Phone: 732-943-3573 EPIC Fax: 732-574-3469

## Do You Know Your CSID Number?

During this past year, you may have noticed Pharma-Care

representatives have been asking you where your fax machines are located. This is being done to make sure all outgoing faxes have a CSID number posted on the top of the page. The CSID number indicates the sending fax number, the name of



the facility and the unit. A CSID number should always be posted on an outgoing fax.

EPIC uses the CSID number to process incoming faxes in an efficient manner. The computer which receives the incoming faxes scans the CSID number allowing immediate placement into your facility's folder. This process allows a seamless flow of information to the EPIC office.

This flow is interrupted when a transmission is received without a CSID number. The information processing must be done manually and this creates both a delay in receipt at the EPIC office and a delay in return of the EPIC review to your facility

When a fax machine is replaced in your facility, remember to ask the technician to update the CSID information. If this does not happen, not only may your review be delayed, but the incoming transmission may even indicate a different facility.

The EPIC team at Pharma-Care Inc. wishes you a healthy and happy new year.

# Welcome to Our Newest Clients

Autumn Lake Healthcare at Oceanview Barclay Rehab and Health Care Center CareOne Assisted Living at Evesham Core Health Services Garden State Kidney Center Greenfield Senior Living at Cross Keys Majestic Rehabilitation & Nursing Center, Red Bank



