

Extendicare® Brampton

Streamlines Medication & Treatment Administration with PointClickCare

Challenge

Extendicare® Brampton needed to improve the efficiency of its Medication Administration Record (MAR) process, which was a time consuming effort for nurses and brought with it the potential for error.

Solution

On behalf of the 83 Extendicare homes across Canada, the Brampton home conducted a pilot implementation to automate manual, paper-based processes with PointClickCare's fully hosted, Web-based MDS, eMAR and Point of Care applications.

Results

PointClickCare gave Extendicare Brampton a true Electronic Health Record (EHR) environment that increased operational efficiency and accuracy of clinical documentation, reduced nursing time and effort, and improved the quality and safety of resident care.

Introduction

Extendicare® Canada Inc. (ECI), headquartered in Toronto, currently operates 83 facilities throughout Canada with nearly 12,000 beds. ECI has developed a reputation over the past 40 years for providing quality, clinically based services in a cost-effective manner. Its Extendicare Brampton facility is continuously striving to maintain this corporate goal, while providing the best possible quality of resident care. But the home's administration staff recognized that the efficiency of its Medication Administration Record (MAR) process and resident care tracking for RUGs scores was not conducive to this goal due to the time and effort that was consuming the home's staff and potential risks for error.

Results at a Glance

- Saved 4,745 hours annually in nurse time for meds passing
- Created true EHR environment with integrated applications
- Improved resident safety by reducing chance of medication errors
- Avoided missed treatments/follow-ups with automated workflow
- Enhanced staff productivity by 2,300 hours annually with Point of Care automation

Eliminating a Paper-based Environment

Nursing staff at Extendicare Brampton are very diligent about dispensing medications to residents in accordance with the Ontario College of Nurses' Rights of medication administration. In a traditional paper-based environment, this is a difficult and labor-intensive task that not only brings with it the potential for error but also consumes a considerable portion of nurses' time and effort.

Such was the case at the Extendicare home in Brampton, Ontario, where nurses on every floor had to wade through a hardcopy paper book of residents' charts during every



meds pass to see what medications and dosages should be administered to residents. A Medication Administration Record (MAR) then had to be completed for each resident to document that meds had in fact been administered.

“Our challenges related to medications went well beyond just manual charts and MARs,” admits Rosemary Crisp, DOC/ Acting Administrator of Extendicare Brampton. Nurses also had to manually record the observed effectiveness of those meds in the resident’s chart so that the data could be used for care planning and the Resident Classification System used for claiming cost reimbursement from the government.

In addition, re-ordering drugs was a very manual task. Nurses were required to fill out an order form and fax it to the pharmacy, where it would be filled and sent back to the home. The received drugs had to be reconciled against the original orders and then distributed throughout the home.

As with any paper-based MAR process, the facility also experienced documentation errors from time to time and missed physician signatures.

Streamlining Meds Passes through Automation

To address its many MAR-related challenges, Extendicare Brampton initiated a trial of PointClickCare’s electronic Medication Administration Record (eMAR) application, which would be rolled out to the other 80+ Extendicare homes across the country if successful.

“We already subscribed to PointClickCare but had not had an opportunity to use it to any great extent until the onset of Minimum Data Set (MDS) reporting, when PointClickCare became critical to our daily operation and flow of clinical and financial information,” claims Crisp, explaining that, “This is when we really started to embrace PointClickCare and how powerful an automation tool it really is.”

With PointClickCare eMAR, a tablet computer sitting atop a traditional meds cart automatically displays a photo of each resident, along with medication history and meds requirements (drug, dosage, timing, etc.), as nurses make their rounds.

“The application also provides the workflow to support a meds pass, directing nurses up one side of the hallway and down the other, guiding them in administering meds to residents along the way,” explains Crisp.

Based on eight nurses dispensing drugs, PointClickCare eMAR automation saves Extendicare Brampton 4,745 hours yearly in dispensing time alone. This does not include additional time saved by using the application’s automated drug re-ordering, done by simply hitting the “Re-order” button on the eMAR screen. There is no longer a need for nurses to manually fill out and fax an order form. And when drugs arrive from the pharmacy, Extendicare staff electronically scans the received meds and the system automatically reconciles the received drugs against the original order, in turn updating the inventory record for each cart.

Ensuring Medications/Treatments are Never Missed

The PointClickCare eMAR application also prompts staff to administer treatment to residents during their rounds (e.g. change dressings), which traditionally involved a different cart and an additional binder of hardcopy charts showing resident treatment plans. By automating this process, eMAR ensures that treatments and follow-ups are never missed; and because the application is better able to manage the inventory of drugs and supplies on the mobile carts, Extendicare Brampton has been able to combine drug and treatment carts into one.

As nurses enter drug and treatment administration information into the system, automatically updating residents’ charts, they can also chart the observed effectiveness. This information automatically flows from eMAR into the PointClickCare MDS application, which updates RUGs and RAPs information in the resident’s MDS file; including calculating the frequency meds or treatments are required and prompting for updates to care plans based on a resident’s progress.

“The application never takes away the nurses’ ability to do assessments and make decisions about care plans and treatment, but it does guide them through the entire administration and charting process so that nothing and no one is missed,” says Crisp.

Point of Care Application Delivers Big Results

The trial at Extendicare Brampton also included PointClickCare’s Point of Care (POC) application, which incorporates the use of wall-mounted touch screens by Personal Support Workers (PSWs) delivering daily care to residents.

Prior to implementing the PointClickCare POC, all information pertaining to resident care was found on paper plans. Now electronic care plans, along with resident photos, automatically show up on computer touch screens located in the hallways outside resident rooms. This setup enables PSWs to immediately document the care they have provided and respond to resident status/progress questions presented by the application. The data is used to automatically update resident charts and feed the MDS application, which uses it to calculate the RUGs scores that drive cost reimbursement for the home.

The POC application is saving the home approximately 2,300 hours per year in charting time across 150 residents. With this time savings, staff is spending more one-on-one time with residents to provide better quality of care.

“The MDS, eMAR and POC applications are working together seamlessly like a true ‘electronic health record,’” enthuses Crisp.

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