ASSESSING VETERAN’S ABILITY TO SELF ADMINISTER ORAL MEDICATIONS IN HOME BASED PRIMARY CARE

Kathryn Astin, BSN, RN; Lynn Fredrickson, BSN, RN, CRRN; Michael Eskau, RN; Lauren Saddy, MSN, RN; Mary Hagle, PhD, RN, FAAN
Clement J. Zablocki VA Medical Center; Milwaukee, WI
Office: 262-878-7033; email: lynn.fredrickson@va.gov

Background and Significance: Prior to the initiation of this quality improvement project, the Veteran’s ability to self-administer oral medications was not objectively measured in Home Based Primary Care. It was hypothesized that nurses could improve care for Veterans and enhance medication safety by evaluating the effectiveness of interventions using a standardized assessment tool and comparing outcomes to other home care providers on a national level.

Purpose of the Project: Use a standardized tool to assess 100% of Veterans in Home Based Primary Care on their ability to self-administer oral medications.


Sample Description/Population/Setting: In Home Based Primary Care, the majority of Veterans are older males with multiple co-morbid conditions. At the time of the project, the average daily census of Home Based Primary Care was approximately 200 Veterans. Milwaukee VA Home Based Primary Care includes two satellite Community Based Outreach Centers in Union Grove and Green Bay, WI.

Method/Approach: The Center for Medicare and Medicaid’s Outcome and Assessment Information Set multiple choice question for self-administration of oral medications was implemented into the documentation template. Minimally, RNs conduct home visits initially, every 90 days and at discharge to assess the Veteran’s ability to self-administer oral medications. This project evaluated the use of a standardized assessment for self-administration of medications into the documentation template. Tracking and reporting of this data was summarized and discussed monthly at RN team meetings.

Results: About 100 Veterans are assessed monthly, either initially, 90-day assessment, or for discharge. Overall, there was a 4% improvement in proportion of Veterans able to self-administer their medications if the medications were set up by a clinician or caregiver.

Conclusions/Implications: With this nursing sensitive outcome measured and the current data reported, Home Based Primary Care has seen an increase in Veteran independence with self-administering oral medications. The majority of the nursing staff felt it was helpful in their practice and worthwhile to implement. Future plans include refining the reporting format and identifying benchmarks. Additionally, medication errors will be evaluated in relation to this assessment.