

## APPENDIX M: FOCUS GROUP QUESTIONS AND SUMMARY REPORT



### Medication Safety Research Report /July 2006

#### Background & Purpose

In coordination with the Agency for Healthcare Research and Quality (AHRQ) Grant Aurora Health Care implemented a patient partnership model as an intervention to improve safety in the outpatient setting. The partnership joins Aurora Health Care, patients, health care providers, and the community in a collaborative effort to develop and implement strategies to improve medication list accuracy in five AMG clinics in Walworth County. As part of this partnership a focus group with Aurora Health Care patients was held in Walworth County on June 20, 2005. There were three topics the discussion was centered around: current medication management, feedback on the medication safety bag and feedback on the medication safety list.

#### Methodology

- As part of the AHRQ Grant Project in Walworth County a focus group was held at the Aurora Lakeland Medical Center.
- Ten Aurora Health Care patients were recruited and participated in the group.
- The respondents were paid a sum of \$75 for their participation.
- Qualifications to participate included:
  - Have a primary care physician at an Aurora Health Care site in Walworth County.
  - Had an appointment with their primary care physician in January, February or March 2006.
  - Age 55 or older.
  - Take 5 or more prescription medications daily.

#### Executive Summary

##### *Observations*

- Patients in the group were comfortable managing their medications overall.
- The medication bag was seen as a storage place and transportation device for their medications and pill bottles.
- In general the group has not been asked by their physicians to bring in their actual medications.
- All of the patients currently use some form of a medication list, they were impressed by the format of the medication safety list.

##### *Suggestions*

- Patients said to help distribute and encourage the use of the medication bag and list the following should be done:
  - Someone at the physician's office should give the medication bags to patients who take 5 or more medications.
  - The nurse should give instructions before the patient leaves the physician's office.



- Posters and signs at the physician's office asking patients if they brought their medication bag in would encourage use. Patients should be asked to bring in all current medication bottles at every appointment.
- The medication lists should be available to every patient and distributed at pharmacies, physician offices and hospitals.
- An 800 number or other contact information for help completing the medication list should be available to patients.

## **Detailed Findings**

### **Topic 1: How do you currently manage the medications you take?**

The group began with an introduction by each of the respondents and an answer to the question "How do you currently manage the medications you take? Considering all prescription and over the counter medications/vitamin you take." A majority of the group handled their medications themselves using the prescription bottles or pill cases.

- *"I use a weekly pill case organizer, fill it once a week."*
- *"I live in assisted living and they set up a week of pills in a case for me."*
- *"I don't have a pill case, I just take the container out of the cabinet in the morning. The one I take at night isn't with the ones I take in the morning. They are big bottles, a 3 month supply."*
- *"I have baggies (the Ziploc kind) with my morning pills in one bag, the ones I take 2 times a day in one bag and the 6 I take at night in one bag. The prescription bottles are in the bags."*
- *"I take 20 in the morning, using a monthly pill case that I take them out of plus 5 bottles. At night I have the small ones (weekly pill cases) for my night pills."*

For the most part the group felt comfortable with the management of their medications. The group as a whole was on an average of 5 or 6 medications, this might have been the reason they felt comfortable managing medications themselves. Only one respondent had someone else filling his weekly pill case. Others in the group use pill cases that are filled either once a week or every night or the actual prescription bottles to dispense their medications. The pill box was also mentioned to serve as a memory tool, "sometimes I can't remember if I took them or not, so I check the box and if it's empty I must have taken them."

Generally the group did not have trouble managing their medicines. They were confident and comfortable with their current methods and organization. There were a few in the group who showed concern about adding new prescriptions to their current regimen.

- *"....my biggest concern is when a new one is added whether your doctor has any idea of the reactions that might occur when a new pill is added."*

### **Topic 2: Feedback on the Medication Safety Bag**

A majority of the respondents manage all of their own medications. One of the respondents lives in assisted living where they fill his pill case for him, but it is his job to make sure he is taking the medications daily. The patients had a positive feedback on the medication safety bag and how they could use it in their lives. The bag was seen as a storage device for medications while at home as well as a transportation device for bringing meds into their physician.



- *“It keeps all your pills together, all in one place, more convenient way to organize. My doctor does ask me to bring in my meds and this will help me to not have to show everyone what I’m carrying in. Even the dentist wants to know what I’m on-this would help.”*
- *“It is dark enough for pills to be in a dark cool area.”*
- *“If you were to keep all your meds in that bag, even at home, if the rescue squad came they wouldn’t have to hunt down all of your meds.”*
- *“I have a lot of bottles and they would fit nice in there, right now I have a plastic bag, and that would be a nice place for me to keep all my meds.”*
- *“Looks like a lunch bag, but makes it easier to leave in your car, something that looks like its got pills in it will be gone. The idea is if you have it in your car no one would break in if they think it’s your lunch.”*

When asked what would encourage/inspire them to use the medication bag the group felt the most impact would be made if the doctor reminded them to bring in their medications every time they come in for an appointment. They also mentioned placing reminders in the offices with pictures of the bag so that patients would remember to use the bags for their medications not their lunches.

- *“You are more likely to get something like this from a nurse than from a doctor or pharmacist because they have more time to spend with you and give you samples. I think the instructions should be presented to you as a bag that is meant for your pills, a first aid kit for your medications.”*
- *“Get the doctor to ask patients to bring in their pills.”*
- *“A sign at the doctors office and the pharmacy, telling you to use this bag to store your medicine in when traveling or driving, keep your medical records, doctors names or whatever is necessary so that wherever you are in a hotel, car or by the side of the road everyone can see what you are taking.”*

### **Topic 3: Feedback on the Medication Safety List**

The group as a whole was very excited and supportive of the medication safety list shown to them. Currently all 10 of them use some form of a medication list that they bring into their doctor. Nine of the 10 update (add/delete) the medication list themselves. They saw many benefits to the medication list.

- *“This can go with you anywhere you go and the rescue squad can tell exactly what you are on.”*
- *“Sometimes I can’t remember what I’m taking, so the list can tell me what I’m taking, when to take them and why I’m taking them.”*
- *“If the patient writes it on the sheet they have been reinforced with what to take and when.”*
- *“This list would fit very nicely inside that bag.”*

The group was asked to think about how the medication list should be distributed and who should fill out the medication portion of the list. Responses were mixed; some felt the physician should be in charge of the medications on the list others felt it was the patient’s responsibility.



- *“They should be available anywhere, the pharmacy, the doctors office or hospital. And a small statement that if you need help filling this out, here’s a number you can call for help. There are people that will not be able to fill this out so an option for help would be great.”*
- *“I don’t think the patients should write in their own prescriptions, the doctor or the nurse should fill it out.”*
- *“We have to be in charge of our own health these days and take responsibility for the medicines we are taking, I think it is our duty as a patient to fill out these lists, or at least make sure they are filled out.”*

### **Specific Questions**

#### Reasons patients stop taking prescribed medications

There were many reasons both physical and emotional that the group mentioned as to why patients stop taking medications that are prescribed to them. Cost was most mentioned (by five group members) as well as that they feel better or afraid of certain side effects.

- *“They are not feeling better and they are sick of taking all the medications.”*
- *“If you see a news report on the TV or newspaper that tells of adverse reactions to a medicine you get scared to take it anymore.”*
- *“A friend who is on a lot of pills one day just decided to stop taking all his meds for whatever reason.”*
- *“Pills do not necessarily produce a quality of life we are looking for, they can keep you alive but not at the status of life you would like.”*

