## International Medication Reconciliation websites

<table>
<thead>
<tr>
<th>Organisation Site/Name</th>
<th>URL</th>
<th>Content and function</th>
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<tbody>
<tr>
<td>Society of Hospital Medicine MARQUIS program</td>
<td><a href="http://www.hospitalmedicine.org/Content/NavigationMenu/QualityImprovement/QIResourceRooms2/MARQUIS/Medication_Reconciliation.htm">http://www.hospitalmedicine.org/Content/NavigationMenu/QualityImprovement/QIResourceRooms2/MARQUIS/Medication_Reconciliation.htm</a></td>
<td>In 2010, the Agency for Healthcare Research and Quality (AHRQ) awarded the Society of Hospital Medicine (SHM) a $1.5 million grant for a three-year Multi-Center Medication Reconciliation Quality Improvement Study (MARQUIS). The goal of MARQUIS is to develop better ways for medications to be prescribed, documented, and reconciled accurately and safely at times of care transitions when patients enter and leave the hospital. Resources include an implementation manual, white paper, videos on taking a Best Possible Medication History (BPMH) and discharge counseling, BPMH pocket cards and return on investment (ROI) calculations.</td>
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<td>Canadian Safer Healthcare Now! Medication Reconciliation Initiative</td>
<td><a href="http://www.saferhealthcarenow.ca/EN/Interventions/medrec/Pages/default.aspx">http://www.saferhealthcarenow.ca/EN/Interventions/medrec/Pages/default.aspx</a></td>
<td>Home page for the medication reconciliation initiative, part of the Canadian Patient Safety Institute’s Safer Healthcare Now! Campaign (from 2005 to present). The site contains information about the initiative as well as a number of resource materials including a Getting Started Kit, performance measures and audit tools, data entry tools, posters, reports and videos. It is also possible to join the Community of Practice, an online discussion forum for Canadian sites to share resources and information. The medication reconciliation initiative has been extended to include long term care and home care. Information about these initiatives and associated resource materials are also available on the site.</td>
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<td>Institute for Health Care Improvement</td>
<td><a href="http://www.ihi.org/IHI/Topics/PatientSafety/MedicationSystems/Measures/">http://www.ihi.org/IHI/Topics/PatientSafety/MedicationSystems/Measures/</a></td>
<td>A range of materials available from the 5 million lives campaign (2006 – 2008) including a medication reconciliation How-to-Guide, articles, educational leaflets, webinars and sample reconciliation forms. The site also provides a number of tools for measuring medication reconciliation including some performance measures and an improvement tracker tool which allows hospitals to create and chart their own performance measure results over time. IHI also has a mentor program for medication reconciliation. Organisations on the Mentor Hospital Registry volunteer to provide support, advice, clinical expertise, and tips to hospitals seeking help with their implementation efforts.</td>
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<td>Massachusetts Coalition for the Prevention of Medical Errors</td>
<td><a href="http://www.macoalition.org/reducing_medication_errors.shtml">http://www.macoalition.org/reducing_medication_errors.shtml</a></td>
<td>A range of materials available from the Reconciling Medications Collaborative (2002 – 2004) - a state-wide patient safety initiative for Massachusetts hospitals to reduce medication errors by reconciling medicines. Materials developed as part of the collaborative include policies, staff education materials, examples of successful implementation strategies, implementation worksheets, guidelines for getting started, and references. A set of measurement protocols and accompanying excel spreadsheets for collecting data and generating graphs of the core evaluation measure – Percent Medications Unreconciled are also available.</td>
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<td>Northwestern Memorial Hospital website</td>
<td><a href="http://www.nmh.org/nm/for+physicians+match">http://www.nmh.org/nm/for+physicians+match</a></td>
<td>Northwestern Memorial Hospital developed a comprehensive, multidisciplinary team effort to prospectively evaluate the extent of adverse medicine events and develop interventions to improve patient safety and quality of care. The result of their improvement efforts was the Medications at Transitions and Clinical Handoffs (MATCH) toolkit available for download from the AHRQ website (see AHRQ listing below). A white paper on making inpatient medication reconciliation patient centred is also available on this site.</td>
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<td><strong>Handoffs (MATCH) Toolkit for Medication Reconciliation</strong></td>
<td>This toolkit is based on the Medications at Transitions and Clinical Handoffs (MATCH) Web site. MATCH was developed by Gary Noskin, M.D., and Kristine Gleason, R.Ph., of Northwestern Memorial Hospital in Chicago, Illinois, through the support of Agency for Healthcare Research and Quality (AHRQ) Grant No. 5 U18 HS015886 and collaboration between Northwestern University Feinberg School of Medicine and The Joint Commission. This toolkit incorporates the experiences and lessons learned by health care facilities that have implemented the MATCH strategies to improve their medication reconciliation processes.</td>
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<td><strong>Better Outcomes for Older adults through Safe Transitions (BOOST) project website</strong></td>
<td><a href="http://www.hospitalmedicine.org/ResourceRoomRedesign/RR_CareTransitions/html_CC/01HowtoUse/00_HowtoUse.cfm">http://www.hospitalmedicine.org/ResourceRoomRedesign/RR_CareTransitions/html_CC/01HowtoUse/00_HowtoUse.cfm</a></td>
<td>The Better Outcomes for Older adults through Safe Transitions (BOOST) initiative, organised by the Society of Hospital Medicine in the US, provides resources to optimise the hospital discharge process. The resource room includes expert- and evidence-based interventions to promote a safe and high quality hospital discharge as patients’ transition out of the hospital setting. Although not specific to medication reconciliation the Care Transitions implementation Guide provides valuable guidance on using quality improvement methodology in effecting changes in discharge practices in an organisation.</td>
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<td><strong>National Institute for Health and Clinical Excellence (NICE) website</strong></td>
<td><a href="http://www.nice.org.uk/guidance/index.jsp?action=byID&amp;o=11897">http://www.nice.org.uk/guidance/index.jsp?action=byID&amp;o=11897</a></td>
<td>Provides details on the NICE patient safety guidance 1: Technical patient safety solutions for medicines reconciliation on admission of adults to hospital a policy which required all public hospitals in the UK and Wales to put in place formal systems for admission reconciliation by December 2008. As well as the guidance document the site provides an audit tool, PowerPoint® presentation, costing tools and other useful information</td>
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