






## Defining Characteristics of a BID Medication Program

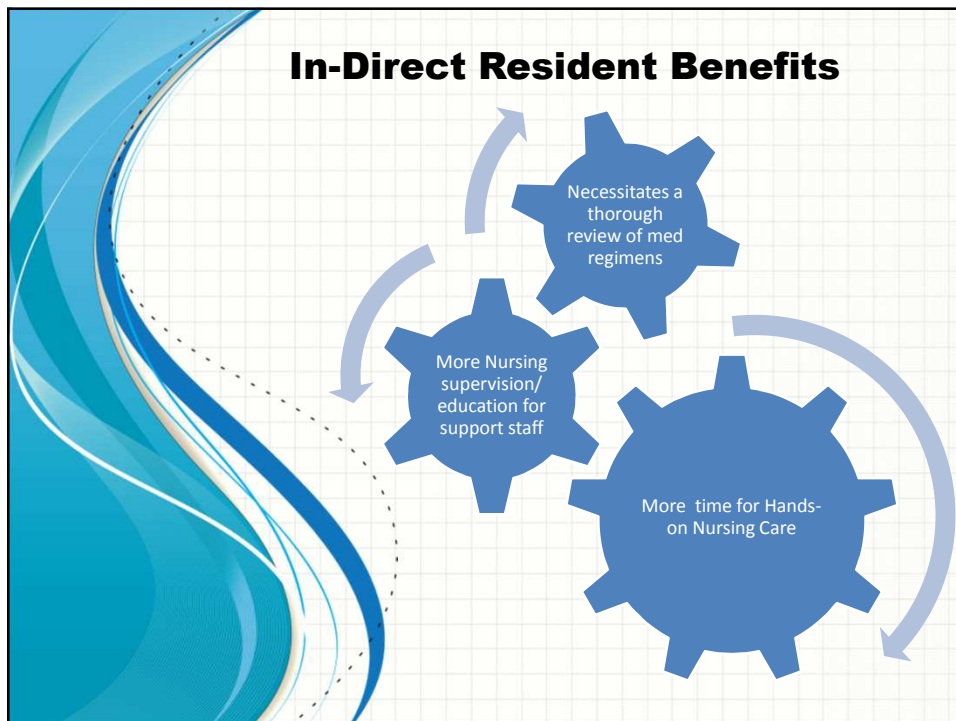

The BID Medication Initiative is a project developed to consolidate medication administration times for long term care Residents.

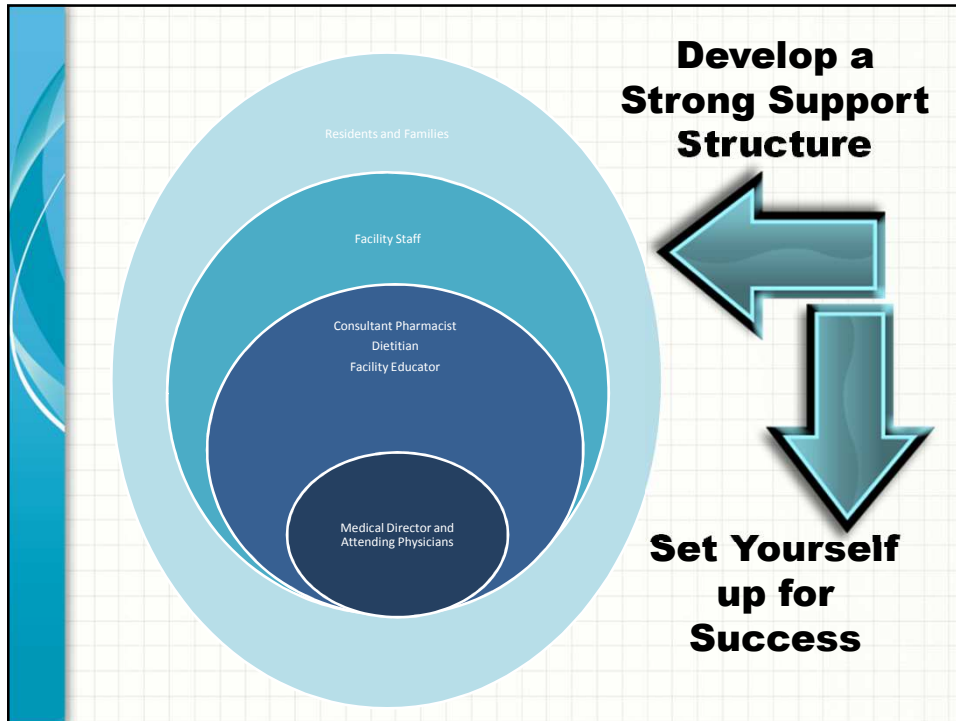
- Only clinically appropriate changes will be recommended knowing that all medications may not fit into a BID schedule.
- Change recommendations will be made based on individual resident assessments.
- No changes will be made without attending physician authorization.

### Direct Resident Benefits


- *Decreased interruptions for Residents* 
  - Improved Sleep contributes to physical, mental and psychosocial well being...Quality of Life.
  - Uninterrupted family/visitor time
  - Uninterrupted activity/social time
- *Increased Resident/Family satisfaction* 
- *Increased staff: resident non clinical interactions; Increased staff satisfaction* 

SOFTENS THE "TASK DRIVEN" ENVIRONMENT







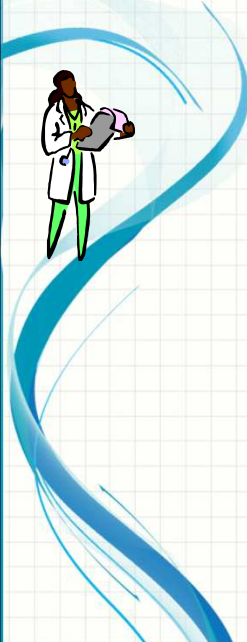
**Leadership Team Tasks**

 Communicate and Engage **Physicians**  
Physician endorsement is essential

- Utilize the services of the **Consultant Pharmacist**  
Clinical resource for medication schedules  
Can provide guidance on administration times and dosing consolidations
- Utilize the services of the **Dietitian**  
Can provide input for ongoing value of vitamin/minerals and supplements;  
Resource for Resident preferences and meal times



## Leadership Team Tasks



- ✓ •DON to attend **Resident Council** to educate Residents on the benefits
- Administrator to include BID initiative information in quarterly/seasonal **Family Letter** ✓
- ✓ •Facility Educator to **“create the buzz”** among staff  
Develop poster boards for nursing units
- Write a **policy addendum** to explain initiative process and how it will differ from standard policy. Choose BID and TID and HS times. ✓
- ✓ •Choose a **“pilot unit”**; possibly the strongest unit or unit mgr or most organized unit

## Implementation Team


Physician and/or Medical Director

Pharmacy Consultant

Dietitian

Unit Manager

DON and/or ADON



## Implementation Process

### Review each Resident's Medication Record

- Choose BID and TID times; write interim policy; choose unit to start.
- Reschedule doses according to new med pass times.
- Eliminate duplicate drug therapies; vitamins/minerals; supplements.
- Propose safe changes of any existing TID or QID orders to long acting BID dosage if available.
- Address Resident specific needs, e.g. timing of tube feeding; medication crushing requirements, etc.
- Complete physician orders for dosage form/drug changes.
- Recommend making changes at Re-cap time.
- Plan to procure lab monitoring as indicated.
- Monitor for side effects, adverse drug reactions and communicate to physician.
- Provide appropriate follow-up education to unit staff/all shifts.

## Special Considerations

- Timing of meal carts to each unit.
- Also a good time to evaluate PPI utilization; accu-check schedules and blood pressure monitoring.
- What medications ordered has the highest frequency?
- Are there any medications that cannot be given together; or while lying down?
- Avoid dosing any medication at the 5-6PM time (unless required with meal).
- Coumadin may be given HS to avoid the 5PM pass (dinnertime)
- Guidance with regard to administration of medications with food.
- Medications with a narrow therapeutic index (e.g. digoxin, levothyroxine, theophylline, and warfarin) should be dosed consistently on a scheduled basis.
- Nitrate products require a "nitrate free" period of at least 8-12 hrs.

## Appendix Resources

- Interim Policy Addendum
- Sample Physician Letter
- Sample Family Letter

## Sample Policy Addendum

### Medication Administration Times

NURSING NSG-CL 19-1

NESHAMINY MANOR BID MED PASS INITIATIVE MAY 1, 2010

The BID Med Pass is a project developed to consolidate medication administration times for long term care patients, working toward a BID Med Pass schedule, where clinically appropriate, to minimize the numbers of medications which require administration outside existing policy schedule.

#### OBJECTIVE:

- Helps restore patients' morning routine, decreases daily interruptions and allows good sleep To contribute to physical, mental and psychosocial well being.
- Reduces time nurses spend on labor intensive med pass activities.
- Gives nurses more time for care giving and hands-on supervision and support of staff.
- Focuses attention on the principles of medication management (F329) and supports the "bigger picture" of integrating medication review into ongoing clinical processes.
- Necessitates a thorough review of medication regimens which may result in the elimination of unnecessary medications and reduction of ADR risk.

#### CRITICAL CONTINGENCIES:

- It is understood that not all medications will fall into a BID schedule depending on their drug classification and dosing schedule and will be ordered to fit the individualized need of the resident.
- Also it is understood that the C1 and D1 units operate slightly different given their specific populations and the BID times might vary depending on what works in the best interest of their residents.

Only clinically appropriate changes will be recommended. Using the Medication Administration Resources, routine review by Consultant Pharmacists and communication with physicians, all efforts will be made to facilitate appropriate dosing and timing changes for each medication. Change recommendations will be made based on individual resident assessment and no changes will be made without attending physician authorization. Follow up monitoring with attending physician communication will be in place as we track patient response to any and all medication regimen adjustments.

For the purpose of this initiative, BID will be 0830/1830; TID will be 0830/1200/1830. C1 and D1 units may vary slightly until conclusion of initiative.

## SAMPLE PHYSICIAN LETTER

Dear Dr. \_\_\_\_\_

Under the direction of \_\_\_\_\_ the facility has undertaken a project to consolidate medication administration times for long term care patients. The goal is to work toward a BID Med Pass Schedule, where clinically appropriate, and to minimize the numbers of medications which require administration outside this schedule.

Reasons behind these efforts include the following:

- Adjusting medication schedules to account for patient preferences and sleep/wake schedules can help restore patients' morning routine, decrease daily interruptions and allow good sleep to contribute to physical, mental and psychosocial well being.
- Consolidating med pass times reduces the time nurses spend on the labor intensive med pass activity, giving them more time for care giving and hands-on supervision and support of staff.
- Thoroughly reviewing medication regimens results in the elimination of unnecessary medications which may reduce the risk of adverse drug reactions and be cost effective.

Many long term care facilities have already successfully undertaken this project as a cooperative effort of nursing staff, the consultant pharmacist and the attending physician and have benefited from its success. In addition to increased time for nurses to provide direct care, patients and family have expressed increased satisfaction with fewer daily interruptions as the program facilitates the reduction in the number of meds administered.

As stated, clinically appropriate changes will be recommended knowing that all medications may not fit into a BID schedule. All efforts will be made to facilitate appropriate dosing and timing on an individual basis. Change recommendations will be communicated to you and no changes will be made without attending physician authorization. Follow up monitoring with attending physician communication will be in place as we track patient response to any and all medication regimen adjustments.

Should you have specific questions or issues, please do not hesitate to contact either me or the Director of Nursing.

Sincerely,  
Medical Director

## SAMPLE FAMILY LETTER

Dear Family Member,

Finally, Spring is here! The precipitation, both snow and rain this winter presented many challenges and I wanted to take this opportunity to thank you for your support and patience. You may have noticed contractors and machinery in our parking lot as we are in the process of sealing/waterproofing the building. There are a few other projects that will take place this season to secure the building for any unpleasant weather to come.

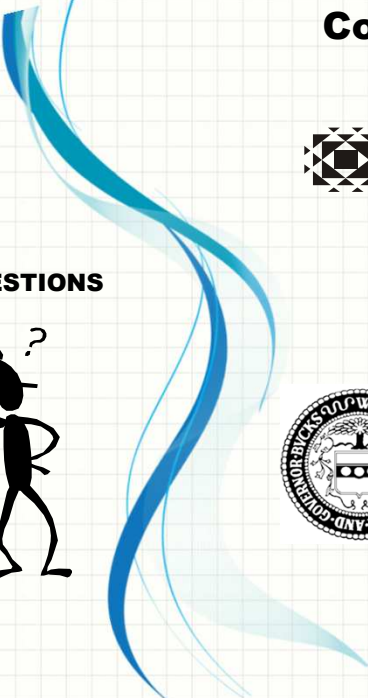
In the next few months the facility will be embarking on a medication initiative whereby the physician with the appropriate interdisciplinary team including the expertise of a consultant pharmacist will be reviewing each resident's medication profile in an effort to decrease the daily resident interruptions, improve resident sleep, time for personal activities and overall quality of life. Only clinically appropriate changes will be made by the physician to each individual's profile as it relates to the resident's schedule, preferences and effectiveness. As always the responsible parties will be kept informed of changes.

Over the last two years we have forged ahead with infection control initiatives, hand hygiene programs and vaccination clinics for both residents and staff. We had a few precautionary events this season when residents were restricted to their units to reduce the risk of viral/bacterial transmission. Our efforts were successful in that the restrictions were short lived and we were able to return to daily schedules rather quickly due to the diligence of our facility staff and with your overwhelming support.

As always, our Unit Managers, Department Directors, or any of the Administrative staff, the Director of Nursing, the Associate Administrator and myself are here to assist you in any way we can. Thank you for your partnership and for allowing us the opportunity to care for your family member.



Sincerely yours,  
Evelyn M. Kozlowski, RN, NHA  
Administrator  
Neshaminy Manor

Encl: Nursing Home Week Brochure  
cc: Joseph Funk, Director of Health and Human Services




## Contact Information

**QUESTIONS**




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Neshaminy Manor**



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