Home Medication Evaluation Questionnaire (HOMEQ) Training Resources

CPF Grant #194

December 2019

Matthew Witry, PharmD, PhD
Assistant Professor
PI HOMEQ
319.335.8763
matthew-witry@uiowa.edu

Korey Kennelty, PharmD, MS, PhD Assistant Professor Korey-kennelty@uiowa.edu Co-I HOMEQ

William Doucette, PhD Veale Professor in Health Policy William-doucette@uiowa.edu Co-I HOMEQ

Contents

- 2 Introduction to the HOME-Q
- 3 HOME-Qv2 Items
- 4 HOME Pharmacist Interventions
- 5 HOME Communication Approach
- 6..... HOME Action Plan Example
- 7 Encounter Flow
- 8 Options for Addressing HOME-Q Answers

What is the HOME-Q?

- The HOME-Q is a 20-item questionnaire that can be filled out by a patient about risk factors (10 items) and medication practices they may have related to their home medications
- The HOME-Q focuses on personal medication factors that can't be easily identified by prescription claims
- The HOME-Q items can provide cues to the pharmacist about beliefs and practices that could help the patient use their medications more safely and effectively

What makes this approach unique?

- Most traditional medication workups focus on the characteristics of medications and guidelines (drug interactions and duplications, out of range PDCs, and other drug therapy problems)
- These elements are important, and patients should have their medication list assessed routinely.
- The focus of the HOME program is on the patient's unique home environment, behaviors, beliefs and habits – these factors may not receive as much attention in today's data-driven health care environment but when addressed may improve patient outcomes.
- This questionnaire may serve as a valuable supplement or enhancement to more traditional medication workups like CMRs and MTM.

Questionnaire about how you take your medicines at home

Please mark yes, sometimes, or no for these statements. There are no right or wrong answers.

	Do you agree with the following statements?		Some- times	No
1	I am unsure about the best time to take my medicines			
2	I am interested in having my medicines packaged for me			
3	I get confused about if I took a medicine or not			
4	I have days where I have run out of my medicines			
5	Lowering my medicine costs would be helpful			
6	I miss doses of my everyday medicines			
7	I wonder if my medicines are doing more harm than good			
8	I wonder if there are medicines that I don't need to be taking anymore			
9	I use more than one pharmacy to get my everyday medicines			
10	I feel unsteady when standing or walking			

These next questions are about things people do to manage their medicines safely at home. And their feelings about their medicines. Which ones are true for you?

	Do you agree with the following statements?	Yes	Some- what	No
11	I have an up-to-date list of my medicines			
12	I use an organizer or pillbox for my medicines			
13	I take my medicines when there is a change to my schedule			
14	Taking my medicines has become part of my daily routine			
15	The cost of my medicines fits my budget			
16	My current medicines do not cause me problems			
17	I feel good about the medicines I take			
18	I know what to do if I miss a dose of my medicine			
19	I know how to dispose of medicines that I don't need			
20	My doctor and pharmacist know the vitamins and supplements I take			

Your feedback will help your pharmacist better understand you and your medicines.

HOME Interventions Aligning with HOME-Q items in Parentheses

Organization

Simplify Schedule (1.3)

Create medication list for patient (1,11)

Med box (3,12)

Packaging (2,3.6)

Education

Address misconceptions (7,8)

Discuss daily routine (1,6,13,14)

Educate on missed doses (6,18)

Explain medication warnings (7,16))

Discuss old medicines, disposal (8,19)

Reminders

Discuss medication timing (1,13.19)

Alarms and Calendars (1,3,19)

Automatic refills (4)

Synchronization (4)

Motivation

Assess frequency of missed doses (6)

Discover patient concerns (7,8,17)

Discuss pros and Cons (7)

Discuss medication goals (17)

Cost

Switch medication (5,15)

Discuss why medication beneficial (7,8)

Drug Utilization Review

Review OTCs & Medications from other pharmacies (9,20)

Assess fall risk (10)

Side Effects

Tips for reducing (7,10,16)

Pursue medication change

The HOME-Q Communication Approach

1) Setting the Agenda

HOME is a patient-centered tool

Ask the patient what answers they want to discuss first

2) Explore Patient Concerns and Needs

Be Curious - The patient is expert in their own approach, preferences, and experiences. What can you learn?

You might not get to every item - That's okay, it may be possible to follow up with patients later to see how things are going

3) Problem-Solving

Ask Permission before giving advice - This may reduce sounding critical of their current knowledge and habits

Integrate your feedback in the process - You may be able to relate the discussion to other items the patient has checked during the discussion

4) Wrapping up

Agree on actionable changes for the HOME Action Plan

Discuss follow up, as needed

	HOME Actio	on Plan		Date		
	Patient Name		Pt: ID	Total prescription medications		
Pharmacist Name						
+	You and you	ly.				
		Specific Concern	Strategy/Action	Follow up		

Thank you for participating in the HOME-Q Work-up. Please let us know what questions you have. We are here to help!

HOME Program Encounter Flow

- Have previewed the patient's profile and past drug therapy problems/issues
- Confirm consent document, HOME-Q, and demographic worksheet (back) have been completed
- Ask patient what questionnaire item they would like to discuss first
- The proceed with other items the patient and you the pharmacist are interested in discussing
- Take notes on the HOME Action Plan worksheet or on another sheet
- After items discussed, wrap up by reviewing action plan and new tasks or roles for the patient and pharmacist
- If all items checked such that there appear to be no issues, you could say "It looks like you didn't have any of the issues from the questionnaire, what other medication questions or challenges could I help with today that were not on the list?" "I want your medicines to be as safe as possible and work for you. What, if anything, is not perfect about your medicines?

Appendix – Options for Addressing HOME-Q Answers

DUR: OTCs and use of other pharmacies may warrant a DUR, particularly since these medications may not be in the computer system. Also, there is one question about fall risk, so you can look for contraindicated medications in the elderly, etc.

Education: Several of the items can be addressed through targeted education. Patients may have incorrect information about their medicines and offering patients new information can be helpful. **Consider asking "would it be all right if I gave you some more information?"** To ensure that patients are ready to listen. Taking other people's medications can be dangerous, as can taking old medications. Patients may benefit from warnings about taking other medications and tips on medication disposal.

Motivation: Sometimes patients have made evaluations of medicines that aren't grounded in the facts, and that's understandable with how many changes patients are often asked to make. Try to find openings to allow patients to consider benefits of the medication that they might not have thought about, or ways to decrease the side effects or perceived burdens of their medicines. Ultimately it's the patient's decision whether or not they're going to take their medicine, all we can do is try to give them the best information for making that decision.

Organization: patients may not have the safest strategy for organizing their medicines. Find out what they do, maybe they could benefit from a **med box** or a different med box, are one of the **prepackaging** services the pharmacy offers, synchronization, or other tips for keeping things organized. Patients also may be taking doses of multiple times during the day, there may be ways that they can condense the complexity of the regimen into fewer medication taking times. If this is not possible, like taking medicines with a meal is important, reinforcing that can be important to adherence.

Side effects: medications often have side effects, and these can be difficult to tell from the normal aging process or other factors. Some side effects can be reduced, for others you might help patient see that the benefits outweigh these side effects, but it's hard to tell if you don't know about the benefits.

Reminder: can recommend calendars, telephone alarms, behavioral cues in the schedule, or other strategies. Patients might benefit from being signed up for medication synchronization, auto refills, delivery, or other options.

Cost: pharmacists often can find ways to save patient's money on their prescriptions. Patients also may appreciate just knowing that the pharmacist has reviewed their medicines for cost savings and the assurance that they are on the most cost-effective regimen.