

Initial Use of the Home Medication Evaluation (HOME) Questionnaire Matthew Witry, Kassi Pham, Korey Kennelty, William Doucette

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Background and Rationale

- The goal of most self-reported medication risk questionnaires is to identify the highest risk patients
- In contrast, <u>the goal</u> of the Home Medication Evaluation Questionnaire (HOME-Q) is to allow patients to report barriers to safe and effective medication that are personal and not readily discerned from analyzing medication records
- HOME-Q assesses beliefs, issues, and practices that can be problematic for taking medicines at home
- The HOME-Q is based on research about safe medication use among ambulatory patients who take medications chronically

Results

- 33 Patients included in interim analysis of the HOME-Q
- The mean number of 'yes' HOME-Q responses was 4.5 (range 0-10)
- 49 coded interventions, 9 types
- Interventions per patient ranged 0 to 3
- 23 of the interventions (47%) appeared to be maintained at ~3 months
- 3 patients not reached for ~3 month call
- No significant change in HOME-Q total at ~3 month call – some items carried forward, some emerged, some went away

Table 1: Participant Characteristics

Baseline Mean (SD)	~3 month Mean (SD)
70.6	
(11.1)	
17 (52%)	
7.4 (3.5)	
1.5 (1.3)	
4.5 (2.8)	4.3 (3.0)
	70.6 (11.1) 17 (52%) 7.4 (3.5)

Table 3: Pharmacist Interventions

Pharmacist Intervention/Action	Made N	Maintained/Adopted N
Print, share medication list	8	3
Recommend takeback	8	2
Pill box, phone reminder	8	3
Medication packaging, EZ cap	7	0
Medication side effect, low need counseling/action	6	3
OTC recommendation	5	4
Timing recommendation	4	3
Medication synchronization	3	3
Cost problem solving	2	2

Objectives

- 1) Describe participant responses to the HOME-Q
- 2) Describe the resulting pharmacist interventions

Figure 1: Study Overview

Training

Intervention

Two independent harmacies trained to use HOME-Q

In-person, phone recruitment of patients taking 4+ meds, 55+

items followed by discussion with RPh

RPh & Pt discuss 'yes'

responses, agree on plan

20-self-administered

Follow up

Research team calls pt at 3 months to readminister HOME-Q

Table 2: HOME-Q Frequencies from 33 initial workups

#	ltem	Yes	
4	More than one doctor prescribes medicines for me	25	
1	In addition to my prescriptions, I regularly take other pills for my health like	24	
	vitamins, supplements, herbals and other OTC medicines		
10	Sometimes I forget to take my medications on time	14	
15	Sometimes I feel like I am taking too many medications	14	
14	I keep old prescription medicines just in case	13	
12	Sometimes I wonder if my medications are doing more harm than good	9	
16	I'm not sure some of my medications are working	7	
6	Sometimes my medication containers are hard to open	5	
11	Sometimes I run out of my medications	5	
9	In the past 6 months, I have not filled a medication because of the cost	5	
5	Sometimes it is hard for me to keep all my medicines straight	4	
2	I use more than one pharmacy to get my prescriptions	4	
17	Sometimes I need help understanding the handouts from my dr, pharmacy	4	
19	Sometimes it is hard for me to read the labels on my medicines	4	
7	I wish I had a better way to organize my medications	3	
18	I am unclear about some of my medication directions	3	
20	I could use some support managing my medications at home	2	
3	The timing of my medication schedule is inconvenient	2	
8	Sometimes I cut my medicines in half or take less so they last longer	1	
13	Sometimes I use someone else's prescription medicines	0	

Discussion

- HOME-Q total did not significantly decrease on follow up as hypothesized
- About half of actions were adopted/ maintained at ~3 months
- Expectation for measuring HOME-Q effects appears different than traditional DTP categories
- Patients seemed to view the HOME-Q as a tool to start a dialog rather than a list of problems to resolve
- Several changes were made to the HOME-Qv2 prior to the second pilot
- Items with few 'yes' responses, subject to social desirability bias replaced
- A middle option was included to increase disclosure
- 10 items on HOME-Qv2 phrased positively to represent best practices

Limitations

• The use of a convenience sample likely led to selection bias

Next Steps

- HOME-Qv2 being trialed in a new group of patients in a pharmacy that serves a more economically diverse patient population
- HOME-Q may be suited to supplement RPh workups like chronic care management, comprehensive medication reviews, etc
- Research is needed to determine if HOME-Q identifies medication use barriers that would not be identified without the questionnaire **Funding:** Community Pharmacy Foundation #194