

THE IALH UPDATE

In this issue:

E-Prescribing in Canada:
Pharmacists' Perceptions

Minister of Seniors
Kamal Khera Visits IALH

Resources

Upcoming Events

Research
Opportunities

E-Prescribing in Canada: Pharmacists' Perceptions



Photo: National Cancer Institute, Unsplash

Pharmacist and IALH Student Affiliate Amr Farghali (School of Health Information Science) was the lead author on a recent publication examining pharmacists' perceptions of the impact of electronic prescribing on medication errors and productivity. Co-authors included IALH Research Fellow Elizabeth Borycki and Professor Emeritus Scott Macdonald.

Electronic prescribing (e-prescribing) has been developed to address several challenges associated with handwritten and computer-generated prescriptions. These include poor legibility, missing information, and the use of non-standard abbreviations. The goals of this research were to: a) examine community pharmacists' perceptions of the impact of e-prescribing on their practice; and b) assess the extent to which e-prescribing has been adopted by healthcare practitioners in Canada.

Approximately 96% of pharmacies in Canada are located in community settings. The researchers noted that "Community pharmacists are one of the most trusted healthcare professionals as they are very accessible and have an integral role in the patient care plan."

Survey data from 450 pharmacists in community practice in British Columbia, Alberta, Saskatchewan, Ontario and Quebec were analyzed in this project. The data were collected as part of the *2016 National Survey of Community-Based Pharmacists: Use of Digital Health Technology in Practice*.

Overall, 66% of the pharmacists thought that the use of e-prescribing would reduce the number of medication errors experienced by patients. Differences among the provinces were statistically significant, with 52% of pharmacists in Saskatchewan, 61% to 68% of pharmacists in Alberta, British Columbia and Quebec, and 73% of pharmacists in Ontario indicating that the use of e-prescribing would reduce the number of medication errors.

Most (70%) of the pharmacists also believed that the use of e-prescribing would have a positive impact on their practice, for example, because the amount of time spent clarifying prescriptions would be reduced. Differences among the provinces were not significant.

Continued on next page

Continued from front page

Despite these findings, pharmacists in Quebec estimated that about 77% of the prescriptions they received weekly were handwritten. By comparison, pharmacists in Saskatchewan estimated that about 24% of the prescriptions they received weekly were handwritten and pharmacists in Alberta, British Columbia and Ontario estimated that approximately 40% of the prescriptions they received weekly were handwritten. Differences among the provinces were statistically significant.

Further, pharmacists in Saskatchewan estimated that approximately 57% of the prescriptions they received weekly were generated via an electronic medical record (EMR) and then faxed directly to a pharmacy. Pharmacists in Ontario estimated that this was the case for about 27% of the prescriptions they received weekly. Pharmacists in Alberta, British Columbia and Quebec estimated that approximately 11% to 13% of the prescriptions they received weekly were generated through an EMR and then faxed. Many of the differences between provinces were statistically significant.

In summary, although most pharmacists believe that e-prescribing is a “useful tool to reduce medication errors and improve efficiency in pharmacies...the largest proportion of prescriptions...continue to be in paper form, whether handwritten or computer-generated.” The researchers concluded that “further research is needed to investigate the barriers to the adoption of e-prescribing systems ... in Canada”.

To access the full paper, go to <http://www.kmel-journal.org/ojs/index.php/online-publication/article/view/495>.

For more information on the 2016 National Survey of Community-Based Pharmacists, go to <https://www.infoway-inforoute.ca/en/component/edocman/resources/reports/3256-the-national-survey-of-canadian-pharmacists-use-of-digital-health-technologies-in-practice>

Minister of Seniors Kamal Khera Visits IALH



Federal Minister of Seniors, the Honourable Kamal Khera, recently met with IALH research cluster leads at Hut R to learn about IALH affiliates' research. During her visit, she expressed great interest in the diverse research of IALH affiliates and highlighted the federal government's top three priorities as they relate to seniors. These include: a) increasing funding for seniors; b) encouraging seniors to age in place at home; and c) making long-term care safer.

With respect to funding, the federal government has reduced income taxes and made changes to the Canada Pension Plan, Old Age Security pension and Guaranteed Income Supplement. For more information, go to <https://www.canada.ca/en/employment-social-development/news/2022/07/background-er-govern-ment-of-canada-financial-supports-for-seniors.html>

With respect to aging in place, the government has introduced a Home Accessibility Tax Credit as well as a Multigenerational Home Renovation Tax Credit. For more information, see https://budget.gc.ca/2022/report-rapport/tm-mf-en.html#a2_3.

With respect to long term care, the Standards Council of Canada, Health Standards Organization and Canadian Standards Association are working together to develop standards to address infection prevention and control practices in long term care homes as well as the delivery of safe, reliable and high-quality services in these settings. For more information, go to <https://longtermcarestandards.ca/>



Resources

Falls Among Older Adults in Canada

In Canada, falls are the primary cause of injury-related hospitalizations and deaths among individuals 65 years of age and older. Fall-related injuries can decrease seniors' quality of life, increase demands on caregivers, and result in admissions to long term care.

The Public Health Agency of Canada has recently released a surveillance report on falls among older adults. Data from four sources (self-reports, hospitalization statistics, emergency department visits, and mortality data) were used to develop the report. Key findings included the following:

- Fall-related injuries were more common in older women than in older men. They were also higher in individuals 80 years of age or older than in those 65 to 79.
- Most falls (61%) occurred while individuals were walking.
- The majority of older adults who experienced a fall-related injury (70%) sought medical attention. Of these, 72% received treatment in an emergency department.
- Over half of falls resulting in hospitalization occurred in a household residence; another 17% occurred in a residential care facility.
- Data from 2019-2020 indicated that 34% of hospitalizations involved a hip fracture.
- Hospitalization rates were higher for women than for men and increased with age.

For more information, go to <https://www.canada.ca/content/dam/hc-sc/documents/research/surveillance/senior-falls-in-Canada-en.pdf>

Upcoming Events



17th Annual & Final Lafayette Health Awareness Forum: *Our Planet, Our Health*

October 6, 2022 7:00 pm to 9:00 pm

Christ Church Cathedral, 930 Burdett Avenue, Victoria or Livestream

After nearly 20 years of bringing top experts in all fields of health to the Victoria community, this evening will mark the final forum for the Lafayette Health Awareness series as the Lafayette String Quartet will be playing their final concert together in August 2023. *Our Health, Our Planet* will explore our existence and the connections of our health and that of our precious planet.

Host:

Shelagh Rogers, CBC host, former UVic Chancellor

Guest speakers:

Suzanne Simard, author, UBC Professor in Forest and Conservation Sciences

Valeria Stoyanova, MD, General Internal Medicine

Katlia Lafferty, author, Climate Writer in Residence, West Vancouver Library

With performances by the Lafayette String Quartet

The Lafayette String Quartet will perform several times throughout the evening. This forum will be live-streamed for those who are unable to attend in person. For those attending in person, all health protocols will be followed strictly, masks will be encouraged and Christ Church Cathedral has ample space for proper distancing.

For more information, see <https://finearts.uvic.ca/music/calendar/events/17th-annual-lafayette-health-awareness-forum/>

To register to attend in person, or online, visit <https://www.eventbrite.ca/e/lafayette-health-awareness-forum-tickets-392934165667>

Upcoming Events (Cont'd)

Dementia and Alzheimer's Disease: Current Research and Early Detection Methods

Tuesday, Nov. 1, 2022 6:30 pm to 8:30 pm, Online

Dementia is not a natural part of aging. It is an umbrella term that encompasses all types of neurodegenerative diseases that affect memory, judgement, and cognitive skills severely enough to impact daily life. Alzheimer's disease is the most common form of dementia and comprises nearly 70% of all cases. During this course you will find out what researchers currently know about the disease as well as new methods for early detection.

Instructor: Jamie Knight, PhD.

Dr. Knight has been awarded the Canadian Institute of Health Research (CIHR) Graduate Scholarship and the AGE-WELL Graduate Student Award in Technology and Aging for her research on the feasibility of olfactory testing as an early marker for dementia.

To register, see continuingstudies.uvic.ca/health-wellness

Course Code: HPHE307 2022F

Fee: \$40 + GST

****Note:** this course is offered through University of Victoria Continuing Studies Community Health and Wellness Series, and is not hosted by IALH.

For any questions about the course or registration, please contact 250-721-8558 or hsadmin@uvic.ca

Strategies and Actions for Independant Living (SAIL): Fall Prevention and Training for Home Care Aides

October 14 - November 7, 2022, Online

Older adults and persons with disabilities often wish to live independently in their own homes, but falls in the home are a major health threat. The practical SAIL tools help home care aides and community support workers help clients live at home more safely by preventing falls and fall injuries. This NEW instructor-facilitated, three week course offers case studies, videos, discussion and interactive assessments. You'll learn how to apply the following tools in your work:

- A specially developed, three-level, home-based exercise program that includes videos and handouts for client use, and training for you on how to motivate and support clients to use the program
- A detailed risk factor checklist
- An action plan framework with numerous strategies and actions to reduce each risk factor
- Fall tracking and reporting tools
- Optional ongoing yearly access to the SAIL tools and videos available on a sliding scale. Includes additional guidance for home care service supervisors to manage a SAIL program.

To register see continuingstudies.uvic.ca/SAIL

Code: HPCF200 2022F D01

Fee: \$210 plus \$10.50 GST

Instructor: Bobbi Symes (MA)

Delivery style: Online Asynchronous

****Note:** this course is offered through University of Victoria Continuing Studies, and is not hosted by IALH.

For any questions about the course or registration, please contact 250-721-8558 or hsadmin@uvic.ca

Research Opportunities

Visualization of Event Schedules Involving Constrained Prescription

IALH Student Affiliate, Maybins Lengwe, a doctoral student in the Department of Computer Science, is looking for participants for a study entitled *Visualization of Event Schedules Involving Constrained Prescriptions*. The purpose of the research is to understand how people read and interpret calendars that are annotated with medication entries.

Individuals will be asked to participate in a one-hour interview session on Zoom. During the interview, they will be presented with three calendars that reflect the schedule of an individual with various activities and one or more medication schedules. Participants will be asked questions about the calendars and their responses will be recorded.

To be eligible for this study, potential participants must be:

- a) between 35 and 65 years of age; and
- b) taking medications alongside a busy schedule OR assisting someone managing medications with a busy schedule.

To recognize their contribution, participants will receive a \$20 Amazon gift card.

The study is being supervised by Dr. Jens Weber (jens@uvic.ca) and Dr. Charles Perin (cperin@uvic.ca) and has been approved by the Human Research Ethics Board at the University of Victoria (Approval #22-0033).

If you have any questions or would like to participate in this study, please contact the researcher directly at mlengwe@uvic.ca

Creating Dementia Friendly Neighbourhoods

The Alzheimer Society of BC has partnered with researchers from Simon Fraser University, UBC and the University of Northern British Columbia to explore how people living with dementia use their streets and how outdoor spaces can be made more dementia friendly. The researchers are looking for individuals with mild to moderate dementia living in Metro Vancouver or Prince George. Individuals will be asked to participate in three 45 to 60 minute interviews regarding how outdoor spaces can be made more accessible. The study also includes a walk-along interview (which is like a tour of a chosen route). Participants must be able to meet before the end of October, speak conversational English, and walk or wheel about three blocks with or without mobility aids. Participants will receive a \$200 cheque as thanks for sharing their perspectives to create more dementia-friendly communities across Canada through the development of a design guide for city planners and a neighbourhood audit tool. For more information, go to <https://bit.ly/3bFejbY>.

Stay connected
with IALH



250-721-6369



IALH@uvic.ca



www.uvic.ca/aging



[@UVicAging](https://twitter.com/UVicAging)



UVic Institute on
Aging and Lifelong
Health