

Medication Reconciliation and Polypharmacy Committee DRAFT Meeting Minutes

Meeting Date	Meeting Time	Location
December 21, 2020	3:30 pm	Virtual only

Committee Members			
p	Nitu Kashyap	p	Lesley Bennett (2038297650)
p	Sean Jeffery	p	Margherita Giuliano
	Alejandro Gonzalez-Restrepo		Marie Renauer
	Amy Justice		Mark Silvestri
p	Anne VanHaaren		MJ McMullen
p	Diana Mager	p	Nate Rickles
	Ece Tek	p	Patricia Carroll
p	Elizabeth Taylor		Rachel Petersen
p	Jason Gott	p	Rod Marriott
p	Jennifer Osowiecki		Stacy Ward-Charlerie
	Jeremy Campbell	p	Dr. Valencia Bagby-Young
	Kate Sacro		

Supporting Leadership				x – in person; p – via phone
p	Adrian Texidor, OHS	P	Tom Agresta, UConn	Terry Bequette, CedarBridge
	Allan Hackney, OHS	P	Ryan Tran, UConn	Kassi Miller, CedarBridge
p	Rebecca Burke, UConn	p	Rachel Rusnak, UConn	Craig Jones, CedarBridge

Minutes			
Topic	Responsible Party	Time	
Welcome and Roll Call	Nitu Kashyap, Sean Jeffery	3:30 pm	
Review and Approval of November 2020 Minutes	All	3:35 pm	
<ul style="list-style-type: none"> Motion to approve the minutes – Nate Second- Leslie 			
Public Comment	Public	3:40 pm	
None			
Final Report Comments & Discussion	All	3:45 pm	
<ul style="list-style-type: none"> Sean & Nitu thanked the committee for their feedback Summary of comments that were received Dr. Valencia Bagby Young has comments, but she didn't submit them, she has concerns about ensuring that we keep in mind those with intellectual disabilities. She will submit them to Sean & Nitu Sean raised a comment that was received from Lesley that would raise a new business requirement, re; alerting patients to medication recalls and shortages Lesley noted that this is a problem that is becoming more common, and there is a need for consumers and providers to be alerted to recalls and shortages. These should be included in the BPMH. Nate noted that he has mixed feelings, and wonders if this is expanding the scope to be too burdensome. Jennifer noted that there are legal repercussions associated with recalls and can lead to patients not taking their medications. There are different classes of medication recalls. 			

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- Lesley noted that when a drug was removed from the market it should be readily available and simple.
- Nitu summarized the main points of the conversation and asked if this language might work “a best possible medication history must be capable of annotating a reason for discontinuances”
- Sean noted that we might need to gain a better understanding of the current state of these types of issues.
- Lesley recognized that this may be difficult but it is essential to patients. There should be an easier way to alert of shortages.
- Tom noted that this is a challenge and a gap that creates risk in the management of medications
- Jen asked about the sustainability of the BPMH
- Tom noted that this is a good question, and something that we will have to answer as we move from recommendations into development
- Lesley asked if changing the language from recalls to discontinuations would make it more agreeable
- Nitu noted that discontinuation makes it broader and more doable.
- “The best possible medication history should be capable of capturing discontinuation reason”
- Tom noted that there may be a similar requirement that we can tack this on to – we can do that (review 5.1)
- Diane made a motion for the administrative team to determine where this language should be included
- Margie seconded the motion
- Dr. Bagby Young will submit her comments and she is fine with the administrative team identifying how to incorporate them
- Nate asked if the committee is looking to do call outs to specific populations at this time or if that is a future activity?
- Nitu noted that there may be an opportunity to note that there are many groups with intense needs and multiple medications
- Tom noted that a global set of statements may address this, noting that we should consider these groups as we design and implement solutions, include a paragraph or 2 that we are cognizant of this issue and that we will need to consider special needs populations as we consider solutions
- Sean noted that this may be an opportunity to the breakout groups and something that we can do to ensure we are not disenfranchising any population of individuals
- Nitu asked if the group was ok with this solution?
- Diane agreed
- Rod seconded
- Lesley agreed
- Diane noted that it’s important to use broad terms while also avoiding using “all”
- Nitu noted that this should be a guiding principle of the ongoing work, solve for the 80% to start with and identify a solution that works for a large group to stand up a structure and work towards the 100% solution

MRPC 2021 Goals	Nitu Kashyap, Sean Jeffery	4:10 pm
<ul style="list-style-type: none"> • Sean walked the committee through the goals for 2021 • He discussed the changes that the co-chairs anticipate for 2021 including bringing in subject matter experts and allowing for more active working time within the meetings • There were no additional comments from the committee 		

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MRPC 2021 Meeting	Nitu Kashyap, Sean Jeffery	4:20 pm
<ul style="list-style-type: none"> • Sean raised the survey results and the proposed 2021 schedule • Virtually for the foreseeable future • Sean asked for the committee to reach out with any issues with the proposed schedule 		
Other Announcements	All	4:30 pm
<ul style="list-style-type: none"> • Tom mentioned that January 13th UConn Health will be hosting a 90-minute presentation on Pain Management • Ryan will send out a save the date to the committee members • Tom noted that Rod & Marghie from the MRPC will speak, as well as Oregon Health and a representative from the AHRQ 		
Meeting Adjournment	All	4:34pm

DRAFT