

Rapid Medication Access in Supportive Living (SL4/4D) during a COVID-19 Outbreak

COVID-19 Medication Management Pandemic Planning for Supportive Living (SL4/4D)

Issue

SL4/4D facilities supporting residents with quickly changing conditions during a COVID-19 outbreak may require rapid medication access to provide appropriate and timely resident care. Rapid access to medications varies across the province and may not be routinely available in all SL4/4D facilities.

Goal

To ensure that rapid access to medications is available to all residents in SL4/4D facilities experiencing a COVID-19 outbreak. For the purposes of this document, rapid access means medications are available for nursing staff to administer at any time of day within the shortest time possible to a maximum of 3 hours of the order being processed.

Objectives

1. To support SL4/4D residents to be treated in place, where appropriate.
2. To describe an approach to collaborative and proactive planning between key stakeholders in developing a facility specific process for rapid medication when required.
3. To meet the needs of COVID-19 positive residents, or other residents exhibiting symptoms, with quickly changing or deteriorating conditions requiring urgent medication administration to manage symptoms or treat an underlying condition.
4. To meet legislation and professional standards for dispensing and providing clinical services.

SL4/4D Operator Expectations for Rapid Medication Access during a COVID-19 Outbreak

For an SL4/4D facility in COVID-19 outbreak, it is expected that rapid access to commonly used medications to manage residents with COVID-19 symptoms will be accommodated pursuant to an order and when determined to be clinically necessary.

SL4/4D operators are recommended to proactively develop a written plan that can be activated in the event of an outbreak to obtain urgently required medications as part of their COVID-19 pandemic planning process. Development of the plan should include representatives from the facility, contract/preferred/alternate community pharmacy, and medical prescribers at the site.

The plan should:

1. Identify required medications (See Appendix B for suggestions)
2. Describe the process on how the identified medications will be available on short notice
3. Detail how the plan will be activated; and
4. Describe how the medications will be delivered from the pharmacy to the site (if applicable).

Strategies and Considerations for Collaborative COVID-19 Pandemic Preparation for Rapid Medication Access in SL4/4D

The following should occur in sequential order:

1. As part of facility pandemic planning, the SL4/4D operator is recommended to meet with their preferred/ contracted pharmacy and any alternate pharmacies that residents might be using to discuss the pharmacy's ability to deliver rapid medication access to the facility during a COVID-19 outbreak within a maximum of 3 hours of being notified of the need.
 - A process, agreed upon by both parties, needs to be developed to properly notify the pharmacy of the request for rapid delivery.
 - Pharmacies will need to have processes to manage order limitations that may be in place by drug wholesalers or manufacturers and ensure that stock is on hand in the event of an outbreak.
2. If SL4/4D residents have selected to use an alternate pharmacy that is not able to provide rapid medication access, the SL4/4D operators pandemic plan should include requirements for proactive discussions with the residents/families/alternate decision-makers (ADM's) highlighting this concern and encouragement for the residents to use the contracted/preferred pharmacy for all medications as soon as possible and for the duration of the pandemic. The discussion should include awareness that the decision not to switch may mean that medications may not be available in a timely fashion, and may introduce a barrier to optimal care for the resident in the event they become symptomatic.
3. If the preferred/contracted/alternate pharmacy is not able to provide rapid access to medications from its own dispensary(ies) or from arrangements it has with other pharmacies;
 - The SL4/SL4D operator (or contracted/preferred pharmacy) should consider partnering with another community pharmacy with preference to those located in closer proximity to the SL4/4D facility.
 - If the contracted/preferred/alternate pharmacy is unable to provide rapid access to medications for SL4/4D spaces that are located in an integrated facility such as co-located with an acute care or long term care site, explore whether rapid access to medications may be available in another area of the building.
 - If medications are available, processes should be developed to ensure:
 - a) Medications are only administered pursuant to an order;
 - b) Medications are used in agreement with all stakeholders and include parameters for:

- i. Replenishment
 - ii. Payment; or
 - iii. Charging/Sale for used medications
- c) Notification of the contracted/preferred/alternate pharmacy of used medications such that they can appropriately process the medication and have it documented in Netcare.

APPENDIX A: Medication Management during a COVID-19 Outbreak

Issue

COVID-19 Outbreaks in continuing care facilities can lead to sudden and significant staffing shortages requiring the need to reduce the time it takes to administer medications.

Goal

To recommend that SL4/4D operators develop a plan to reduce medication administration burden in the event of a staffing shortage during a COVID-19 outbreak.

Objectives

1. To decrease nursing time required for medication administration during staffing shortages.
2. To encourage collaborative and proactive medication assessments between pharmacists, prescribers, operators and residents/ADMs to decrease medication administration burden in preparation for a potential staffing shortage.
3. To ensure that a resident-centered approach is taken to make clinically appropriate medication changes.
4. To utilize the time before a staffing shortage occurs to allow for appropriate assessment.
5. To meet prescribing and dispensing standards.

SL4/4D operator strategies to optimize medication management during a COVID-19 pandemic

As part of COVID-19 planning, SL4/4D operators should work with pharmacy and practitioners to develop a proactive resident centered plan to reduce medication administration burden in the event of decreased staffing levels due to COVID. The plan should include roles and responsibilities, communication to residents/ADM's, medication administration burden reduction strategies and when each part of the plan will be activated.

Using a resident centered approach, strategies should include:

- Consolidating medications to reduce pass times.
- Reviewing medications that could be discontinued or temporally held.

Useful Resources:

- [Field Guide to Reduce Medication Burden During COVID-19](#)
- [Optimizing Medication Management during the COVID-19 Pandemic: Implementation Guide](#)

Planning Considerations:

- Plans should be as proactive as the planning committee is comfortable with
- Reviewing medications prior to an outbreak and at full staffing will allow for improved assessments and will help to ensure that prescribing and dispensing standards are met

- Planning committees should determine timelines to activate medication changes with consideration to which medication changes can be implemented prior to an outbreak being declared and when other identified medication changes can be activated.
 - Medication orders for changes can be pre-written and triggered by an event.
 - Medication changes should be coordinated with medication batches to reduce workload or risk or error, even at the start of a COVID-19 outbreak.
- Planning committees should develop a process for medication changes to be reviewed upon resumption of staffing levels or at the end of the pandemic.

APPENDIX B: Commonly Used Medications for Residents with COVID-19

Representatives from the SL4 operator, contract/preferred/alternate community pharmacy, and medical prescribers at the site should identify which medications for residents with COVID-19 will be required at the facility for rapid access. The table and resources below include lists of commonly used medications and can be used as a guide.

Medication	Formulation
acetaminophen	Oral, Suppository
amoxicillin	Oral
atropine	Injection, eye drops
AZithromycin	Oral
cefTRIAxone	Injection
dimenhyDRINATE	Oral, injection
doxycycline	Oral
furosemide	Injection
glycopyrrolate	Injection
haloperidol	Oral, injection
hydration solution (hypodermoclysis)	Injection
HYDRomorphone	Oral, injection
LORazepam	Sublingual
methotrimeprazine	Injection
metoclopramide	Oral, Injection
midazolam	Injection
morphine	Oral, injection
nasal moisturizer	
Nitroglycerin	Sublingual
ondansetron	Oral, injection
ophthalmic moisturizer	
oral moisturizer	
salbutamol	Inhaler
scopolamine	Injection

SL4/SL4D operators should also ensure that supplies/consumables for medication administration are available.

Resources:

- [Symptom Management for Adult Patients with COVID-19 Receiving End-of-Life Supportive Care Outside of ICU](#)
- [Infection Medical Management Pathway](#)