

**Improving Over the Counter Medication Safety for Older Adults
Participatory Design: Older Adults**

Meeting 3

Part I. Welcome Statement and Introduction (5 minutes)

Hello and welcome. Thanks for joining us again this week.

Last time we brainstormed solutions and this session we are going to focus on the ideas your group and the pharmacist group brainstormed and start to talk about the pros/cons and feasibility of these ideas, as well as how we might be able to combine some of them.

Once again we'll be audio recording this session because we don't want to miss any of your comments or input. No names will be used in any reports or publications. Your comments are confidential.

If you have a cell phone, please put it on quiet mode. If you need to take an important call, please step out in the hall and rejoin us as soon as you're able. Feel free to get up and get some more snacks if you'd like as well.

Part II. Review Solutions and Rank by Feasibility

Review Older Adult Solution powerpoint slides.

Overall Goal: How well does this solution help you to achieve safe use of an OTC med by an older adult?

Remember safety = no interactions with drugs, health conditions, or age and within usability guidelines of drug

Complete worksheet

Suggestions as rows and criteria as columns

Criteria

- **Anticipated pharmacy staff buy-in**
 - o 1 – low buy in, 3 high buy in
- **Relative advantage**
 - o better than what is happening now
 - o 1 – low advantage, 3 – high advantage
- **Likelihood to be used by an older adult**
 - o 1 - low likelihood, 3 - high likelihood
- **Effectiveness at addressing problem**
 - o drives behavior change

- o 1 – low effectiveness, 3 – high effectiveness
- **Universality (works for all different types of older adults)**
 - o 1 - low universality, 3 – high universality
 - o works for many different groups of older adults and for a variety of pharmacists
 - High/Low Tech Savvy
 - Low SES
 - Health Literacy level
 - Accessibility
 - OTC medication knowledge/belief (safe vs. unsafe)
 - Assessment of ailment (low vs. high urgency)
 - Medical constraints (absent vs. present)

Reverse Scored Items

- **Time**
 - o effort/time
 - o 1 - low time, 3 – high time
- **Complexity**
 - o difficult to understand and use
 - o 1 – low complexity, 3 – high complexity

Part VI. Combining ideas

Can any of these ideas be combined into larger solution?

Part VII. Wrap Up (10 minutes)

Thank you for your participation in tonight’s session. Before we go, I’d like to summarize what we learned today. [Summarize]. Please take a moment to provide comments on things we missed or need to be clarified.

Now that we have talked about some of the pros and cons of these ideas, we will use this information to help us transition to the next phase of the design sessions.

Our next meeting will be January ... at 10:00am