Reducing Ward Return in United Christian Hospital
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Introduction
The pharmacy department of United Christian Hospital received a great volume of ward return, causing much wastage and considerable manpower to handle with them.

Objectives
To reduce ward return and unnecessary dispensing through streamlining the existing medication supply processes.

Methodology
In-house rules of in-patient dispensing were modified. The supply of adjustment dose of prescribed drugs and long term injections with prolong dosing intervals was reduced. Two surgical and medical wards were chosen respectively for investigation. Cost and quantity of returned reusable injections, quantity of unserviceable items, time spent on ward return, were measured and recorded for a three-week period before and after the intervention. In order to examine the impact of intervention, and reveal any seasonal fluctuation in consumption of medicines, occupied bed days, dispensing expenditure and quantity were compared with past records.

Result
For the cost of the returned injections, there were 72.5% and 80.1% reductions in medical and surgical wards respectively. The quantity of returned injections decreased by 65.2% in medical and 50.3% in surgical ward. For selected injections which included frusemide, tranexamic acid injection and injections with prolonged dosing interval, the cost and quantity of returned injections was reduced by 85.2% and 56.7% respectively in medical wards. No selected injections were returned in surgical wards. There was 17.7% reduction of time spent on handling ward return. The quantity of the unserviceable oral solid medications decreased by 54.2% in medical wards and 11.9% in surgical wards. No seasonal fluctuation was observed in 2013 in terms of bed occupancy in the selected wards. Comparing 1st and 3rd quarter in 2014, the overall occupied bed days decreased by 0.7%, while dispensing quantity decreased by 15.2%.