



Service Priorities and Programmes Electronic Presentations

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Proactive Approach to Promoting Private Medication Management Safety

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Introduction

The most frequent errors were in dosing, timing of administration, omission and unauthorized drug use. To ensure safe medication control in hospital, a CQI program has been executed in PMH M&G Department to enhance safety management in private medication. Risk reduction strategies were introduced and current practice of private medication handling was simplified and streamlined. In order to create safety team dynamic, apart from distributing program information in formal meeting and management level, a CQI monitoring team was developed to assist and facilitate the implementation of the program.

Objectives

1. To sustain effective communication among patients, caregivers and staffs; 2. To enhance medication reconciliation safety; and 3. To maintain safety team dynamics.

Methodology

The CQI program on private medication management was fully implemented in M&G department from September 2015. At the beginning, three monitoring teams were developed among 13 M&G wards. Each team included one APN and one senior RN. Strategies were focused on four aspects: early risk assessment, effective clinical handover, staffs awareness strengthening and communication enhancement. The details of the program, implementation tools and structured strategies were first introduced in formal department meeting. Ward managers and wards representatives distributed information to wards after the meeting. CQI monitoring team members further elaborated the information to their responsible ward staffs. Random and causal ward round was performed periodically by CQI monitoring team and feedback from frontline was collected. Prompt suggestion was given directly. The effectiveness of the program and the introducing of CQI monitoring team will be assessed by staff satisfactory survey, patient satisfaction survey, documentation audits and retrospective review of MI via AIRS. CQI monitoring team will continue the role of facilitator and maintain random ward visit after the completion of the program. The effectiveness of the team will be reviewed again by staff satisfaction survey and MI review.

Result

Program objectives were achieved and the introducing of the CQI monitoring team was proven to be a proactive approach in facilitating the promulgation of CQI project. To sustain the effectiveness of the program, conducting regular site visit will be continue by team members. Evidently, a good teamwork is the core element in medication safety culture promotion.