

ON THE JOB SAFETY BEGINS HERE

Royal Perth Hospital

has been 0 days without a Medication Error

Record 0 days



For LaRC Hazardous Weather info call 864-2111/1-888-664-2111



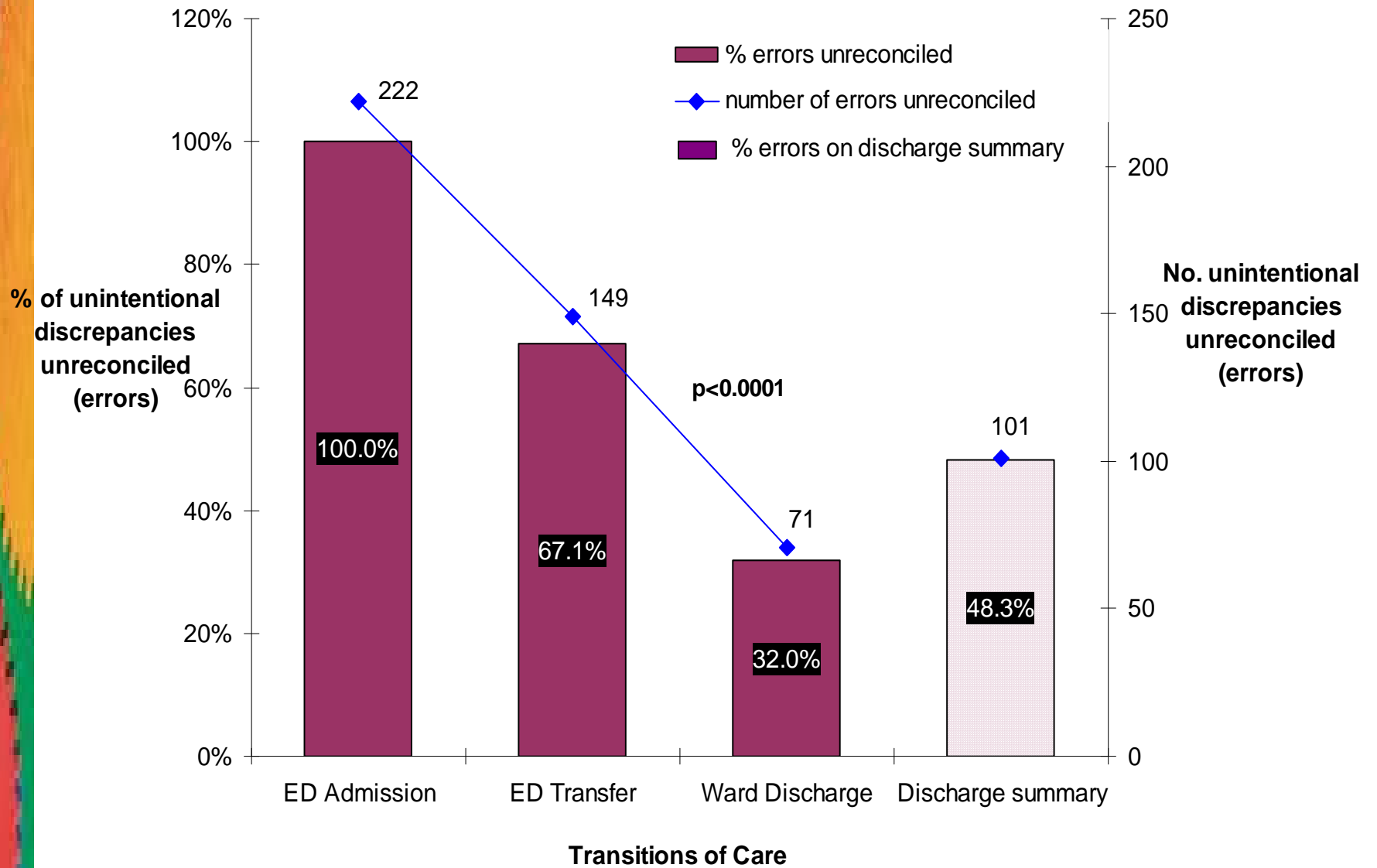
Integrated Medication Management to Prevent Errors



Barry Jenkins

RPH Data

Unreconciled Unintentional Discrepancies at Transitions of Care



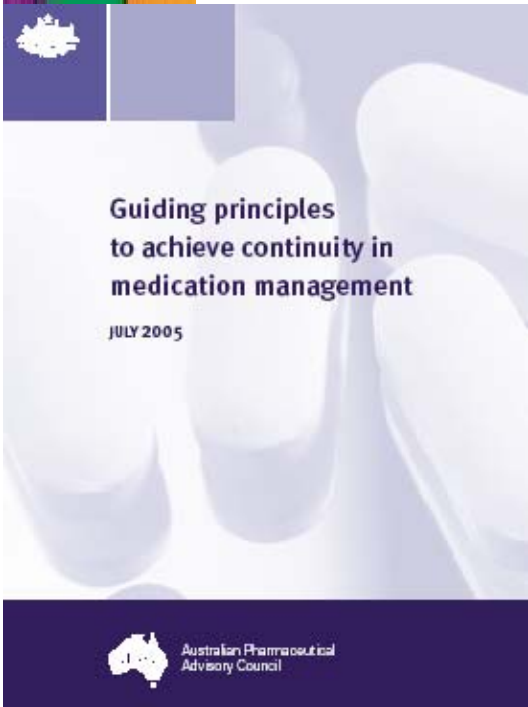


Recipe for IMM

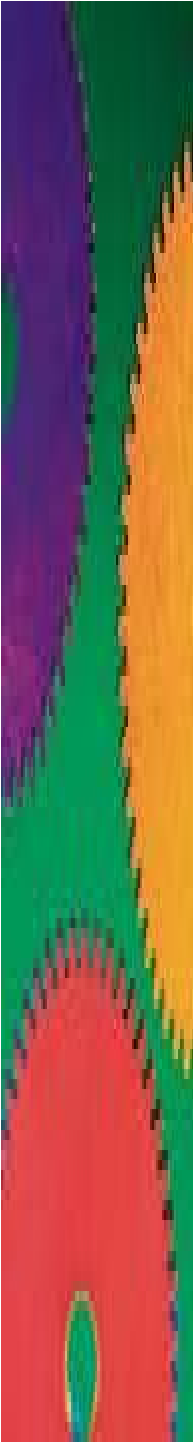
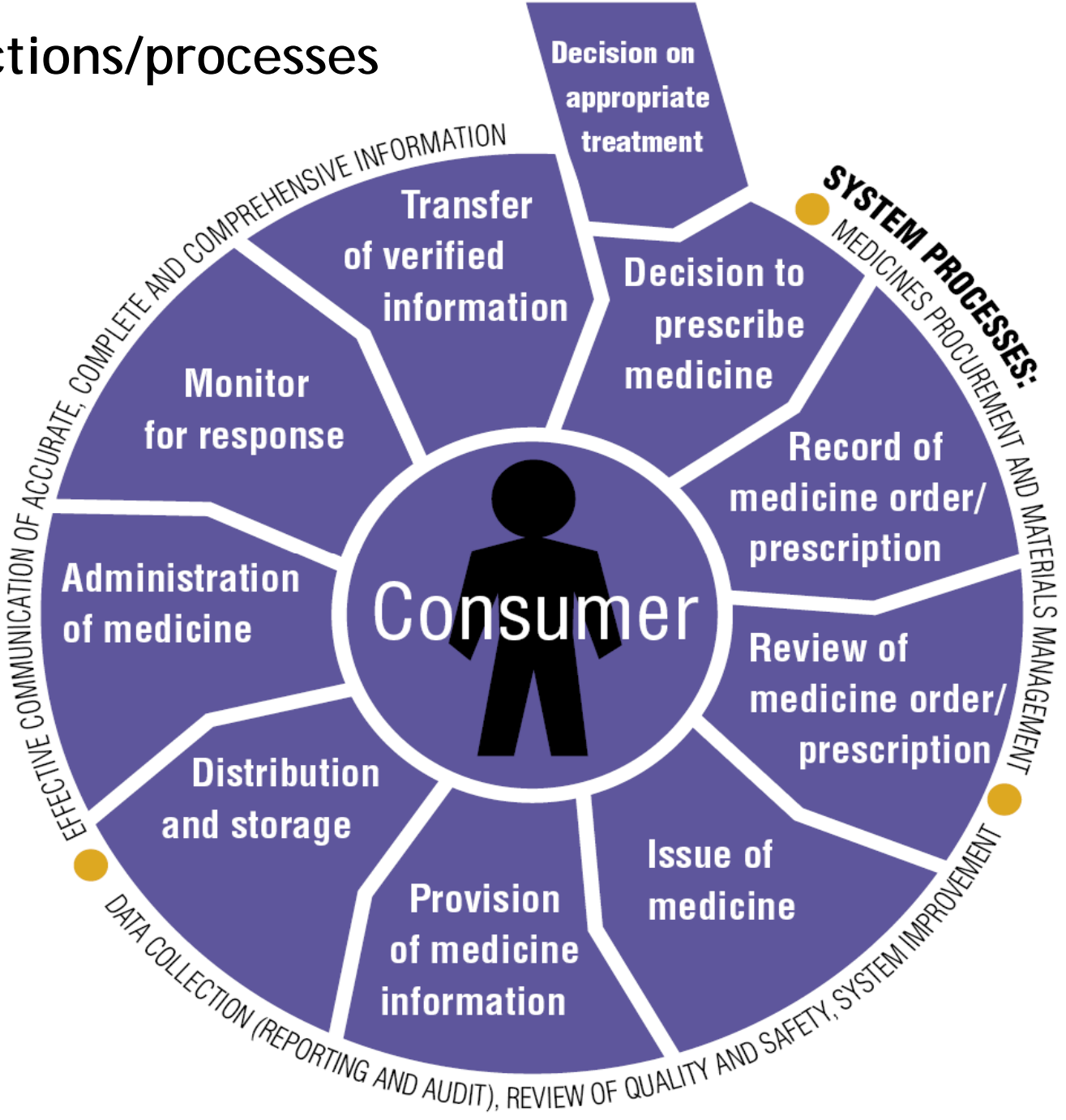
- Performance Targets (APAC/PR/SQUIRE)
- Functions & processes (Who does what)
- Integrators (Brings people together)
- Resources (mostly staff)
- Monitor and evaluate (KPIs, surveys)

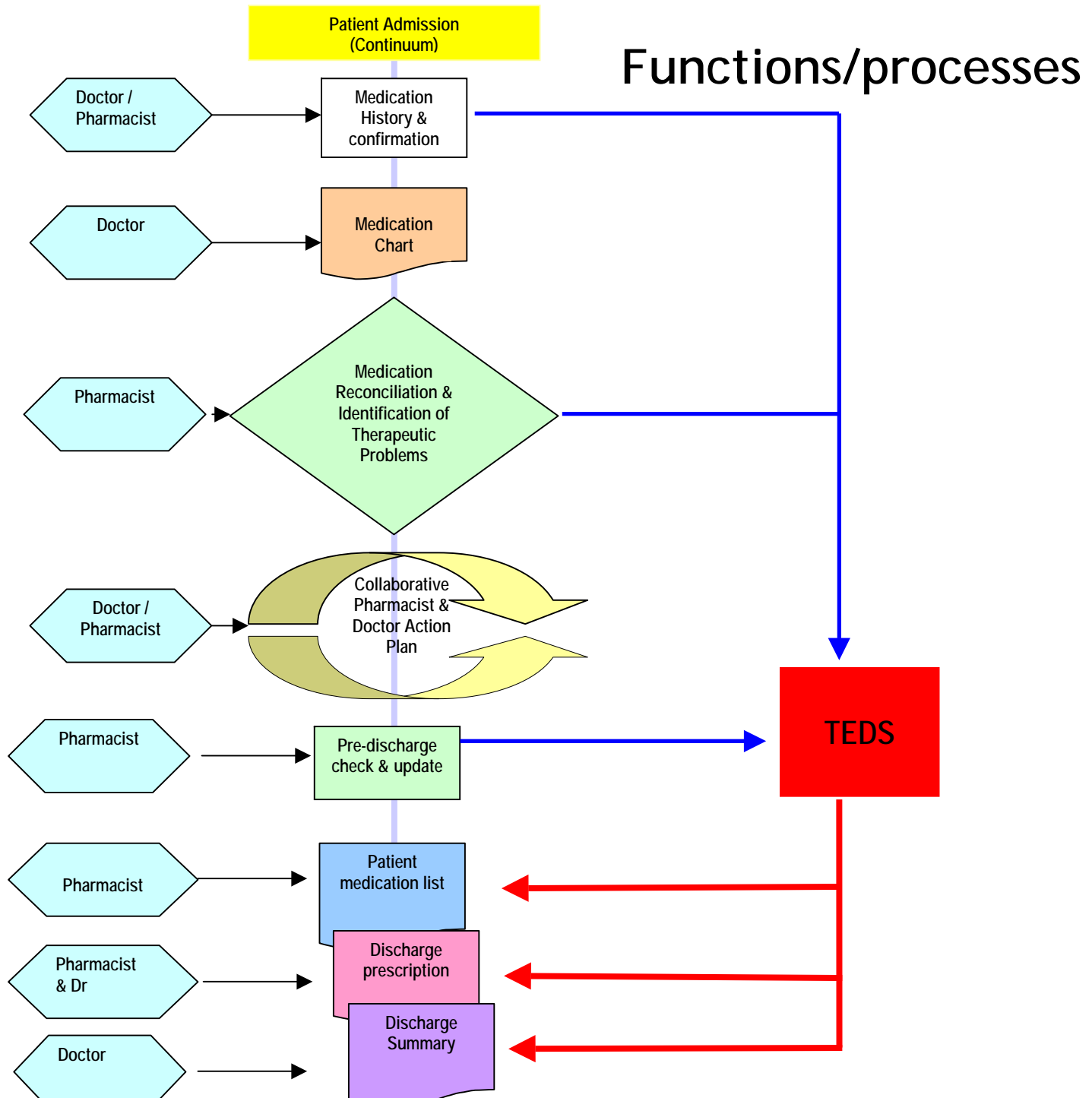
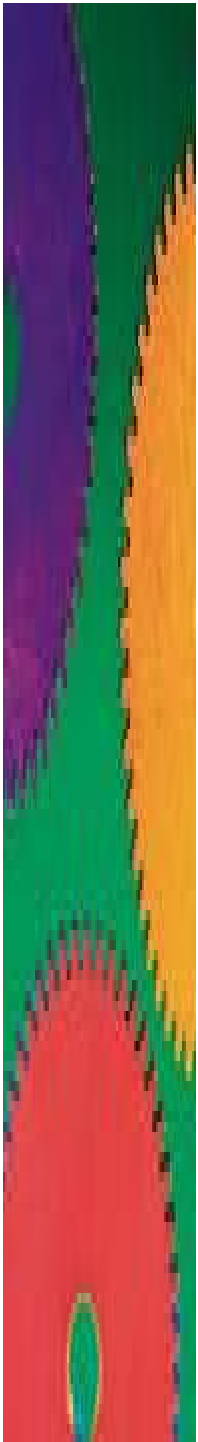
Performance Targets

Guiding Principle 1 Leadership for medication management 20		
Guiding Principle 2 Responsibility for medication management23		
Guiding Principle 3 Accountability for medication management 25		
Guiding Principle 4 Accurate medication history 27		< 3%?
Guiding Principle 5 Assessment of current medication management 31		32.1%
Guiding Principle 6 Medication Action Plan..... 34		
Guiding Principle 7 Supply of medicines information to consumers 37		16.7%
Guiding Principle 8 Ongoing access to medicines 41		
Guiding Principle 9 Communicating medicines information43		< 3%?
Guiding Principle 10 Evaluation of medication management45		



Functions/processes



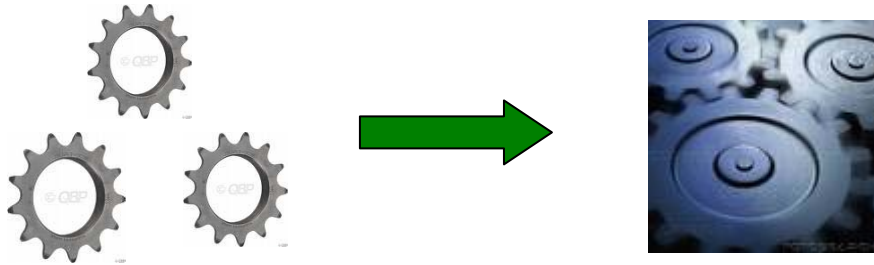




Functions & processes (Who does what)

- Who is the most effective?
- Who needs the least training?
- Which professional most suits the task?
- Legislation?
- Hospital characteristics?
- Preferences and work-arounds

Successful integrators



- Software
 - TEDS (Dr and Pharm)
- Ward round attendance (Dr/Pharm/Nurse)
- Patient white board (Nurse/Pharm)

OLD TEDS

Discharge Medications

Medication	Dosage
1. <u>NICORANDIL</u>	10 MG BD
10. <u>GLICLAZIDE</u>	40 MG MANE
11. <u>GLICLAZIDE</u>	80 MG NOCTE
12. <u>ANGININE</u>	1 TAB SL PRN
2. <u>IMDUR</u>	128 MG MANE
3. <u>ASPIRIN EC</u>	150 MG MANE
4. <u>QUININE</u>	300 MG NOCTE PRN
5. <u>EFORMOTEROL</u>	2 PUFFS BD
6. <u>PULMICORT</u>	2 PUFFS BD
7. <u>CLOPIDOGREL</u>	75 MG MANE
8. <u>PERINDOPRIL</u>	2 MG MANE
9. <u>FRUSEMIDE</u>	180 MG BD

Medication History

Discharge Medications

NEW TEDS

<input type="checkbox"/>	Dr Auth	Medication	Morning	Midday	Evening	Bedtime	Dosage	Purpose	Status	Supply	Quantity	Comments	Amended By	Remove
<input type="checkbox"/>	Y	<u>RISPERIDONE</u> 500microgram TABLETS			1/2			Agitation	New Medication	Websterpak			Langdon, Fiona	Remove
<input type="checkbox"/>	Y	<u>ASPIRIN 100mg</u> TABLETS	1				Take with food	To thin the blood	Unchanged	Websterpak			Langdon, Fiona	Remove
<input type="checkbox"/>	Auth	<u>CALCIUM</u> <u>CARBONATE 1.5g</u> (600mg ELEMENTAL CALCIUM) TABLETS	2					Calcium supplement	Unchanged	Own Supply			Mern Low (Pharmacist)	Remove
<input type="checkbox"/>	Auth	<u>CHOLECALCIFEROL</u> 25mcg (1000units) CAPSULES	1					Vitamin D supplement	Unchanged	Own Supply			Mern Low (Pharmacist)	Remove
<input type="checkbox"/>	Y	<u>GLIPIZIDE 5mg</u> TABLETS	1		1		Take with food	Diabetes	Unchanged	Websterpak			Langdon, Fiona	Remove
<input type="checkbox"/>	Auth	<u>INSULIN HUMAN</u> <u>MIXTARD 30/70</u> 100u/mL INNOLET PEN (3mL)	16 units		4 units		By subcutaneous injection ~15-30 mins before meals	Diabetes	Unchanged	Own Supply			Mern Low (Pharmacist)	Remove
<input type="checkbox"/>	Y	<u>METFORMIN 1000mg</u> TABLETS	1		1		Take with food	Diabetes	Unchanged	Websterpak			Langdon, Fiona	Remove
<input type="checkbox"/>	Y	<u>PIOGLITAZONE 30mg</u> TABLETS	1					Diabetes	Unchanged	Websterpak			Langdon, Fiona	Remove
<input type="checkbox"/>	Auth	<u>SERTRALINE 50mg</u> TABLETS	1					Depression	Unchanged	Websterpak			Mern Low (Pharmacist)	Remove

Add Medications

Import Medications

Authorise Medications

Remove Medications

Medication History

Save Discharge Summary

Stopped Medications

No Stopped Medications

TEDS outputs

Discharge Summary

Royal Perth Hospital INPATIENT DISCHARGE LETTER
 Wellington St Campus, PO Box X2213, Perth WA 6847, (08) 9224 2244
 Shenton Park Campus, 6 Selby Street, Shenton Park WA 6008, (08) 9262 7171

General Practitioner: [Redacted] REET
 GP Ph: 94451994
 Patient: [Redacted] EAST PERTH 6004
 L0375560
 Gender: F

Home Phone: 92218921
 Contact Phone: 0417091874
 Consultant: DR DAVID RANSOM
 Other Professional:
 Specialty: ONCOLOGY
 Date of Admission: 25/10/2006
 Date of Discharge: 1/11/2006 DECEASED
 Discharge Ward: 10A

Past Medical History

Order	Date	Past Medical History
1.00	7/07/2004	Recurrent metaplastic colorectal adenocarcinoma
2.00	11/2002	Adenocarcinoma of descending colon
3.00	12/2003	Left hemicolectomy, partial omentectomy, and BBO
4.00		Chemotherapy for seven months post-operatively

Allergies: NKDA
 Adverse Drug Reactions: ENALAPRIL - COUGH

DISCHARGE MEDICATIONS

Name of Medication	Morning	Midday	Evening	Bedtime	Purpose	Status	Supply	Quantity
PREGABALIN 75mg CAPSULES	1			1	NERVE PAIN (New Medication)	Hospital	5 Days	
AMLODIPINE 10mg TABLETS	1				High Blood Pressure (Unchanged)	Hospital	5 Days	
PARACETAMOL 500mg TABLETS	2	2	2	2	Pain Relief (Unchanged)	Hospital	24	
DOCUSATE 50mg SENNA 8mg TABLETS	2			2	Constipation (Unchanged)	Own Supply	Nil	
OXYCODONE 10mg MR TABLETS	1				Pain Relief (Unchanged)	Own Supply	Nil	
OXYCODONE 5mg CAPSULES					Pain Relief (Unchanged)	Own Supply	Nil	
ENALAPRIL 10mg TABLETS	2	2	2	2	Pain Relief (Unchanged)	Hospital	24	

STOPPED MEDICATIONS

Name of Medication	Status	Stopped Reasons
ENALAPRIL 10mg TABLETS	Stopped	cough

Follow Up Appointments: (Ward Clerk to complete)

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Patient Medication List

Patient Medication List
 Royal Perth Hospital

Consultant: [Redacted]
 Other Professional:
 Specialty:
 Date of Admission: 25/10/2006
 Date of Discharge: 1/11/2006 DECEASED
 Discharge Ward: 10A

Home Phone: 92218921
 Contact Phone: 0417091874

Allergies: NKDA
 Adverse Drug Reactions: ENALAPRIL - COUGH

#	Name of Medication	Morning	Midday	Evening	Bedtime	Purpose	Status	Supply	Quantity
1	PREGABALIN 75mg CAPSULES	1			1	NERVE PAIN (New Medication)	Hospital	5 Days	
2	AMLODIPINE 10mg TABLETS	1				High Blood Pressure (Unchanged)	Hospital	5 Days	
3	PARACETAMOL 500mg TABLETS	2	2	2	2	Pain Relief (Unchanged)	Hospital	24	
4	DOCUSATE 50mg SENNA 8mg TABLETS	2			2	Constipation (Unchanged)	Own Supply	Nil	
5	OXYCODONE 10mg MR TABLETS	1				Pain Relief (Unchanged)	Own Supply	Nil	
6	OXYCODONE 5mg CAPSULES					Pain Relief (Unchanged)	Own Supply	Nil	

***** STOPPED MEDICATIONS *****

Name of Medication	Status	Stopped Reasons
ENALAPRIL 10mg TABLETS	Stopped	cough

Dr's Name: _____ Discharge medications discussed: Yes / No

Pharmacist: _____

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Prescription

Rx: Discharge Prescription
 Royal Perth Hospital
 Wellington St Campus, PO Box X2213, Perth WA 6847, (08) 9224 2244
 Shenton Park Campus, 6 Selby Street, Shenton Park WA 6008, (08) 9262 7171

Consultant: [Redacted]
 Other Professional:
 Specialty:
 Date of Admission: 25/10/2006
 Date of Discharge: 1/11/2006 DECEASED
 Discharge Ward: 10A

Home Phone: 92218921
 Contact Phone: 0417091874

Allergies: NKDA
 Adverse Drug Reactions: ENALAPRIL - COUGH

#	Name of Medication	Morning	Midday	Evening	Bedtime	Purpose	Status	Supply	Quantity	Pharmacy Use
1	PREGABALIN 75mg CAPSULES	1			1	NERVE PAIN (New Medication)	Hospital	5 Days		
2	AMLODIPINE 10mg TABLETS	1				High Blood Pressure (Unchanged)	Hospital	5 Days		
3	PARACETAMOL 500mg TABLETS	2	2	2	2	Pain Relief (Unchanged)	Hospital	24		
4	DOCUSATE 50mg SENNA 8mg TABLETS	2			2	Constipation (Unchanged)	Own Supply	Nil		
5	OXYCODONE 10mg MR TABLETS	1				Pain Relief (Unchanged)	Own Supply	Nil		
6	OXYCODONE 5mg CAPSULES					Pain Relief (Unchanged)	Own Supply	Nil		

***** STOPPED MEDICATIONS *****

Name of Medication	Status	Stopped Reasons
ENALAPRIL 10mg TABLETS	Stopped	cough

Dr's Name: _____ Page: _____ Signature: _____ Date: _____

Pharmacist: _____ Page: _____ Signature: _____ Date: _____

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Resources:

How many staff are needed?



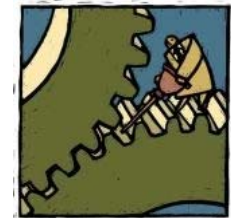
- SHPA stds - bed:pharmacist ratio based on ward type.
Eg. medical ward is category 4 = 30 beds/FTE
- Only a guideline, no std or allowance for;
 - ED (RPH:10-15 med. history interviews & confirmations/day)
 - Pre-admission clinics?
 - Short stay medical wards?
 - PBS Reform.
 - Admission/discharge rate.
 - Mixed staffing models

Mixed pharmacy model

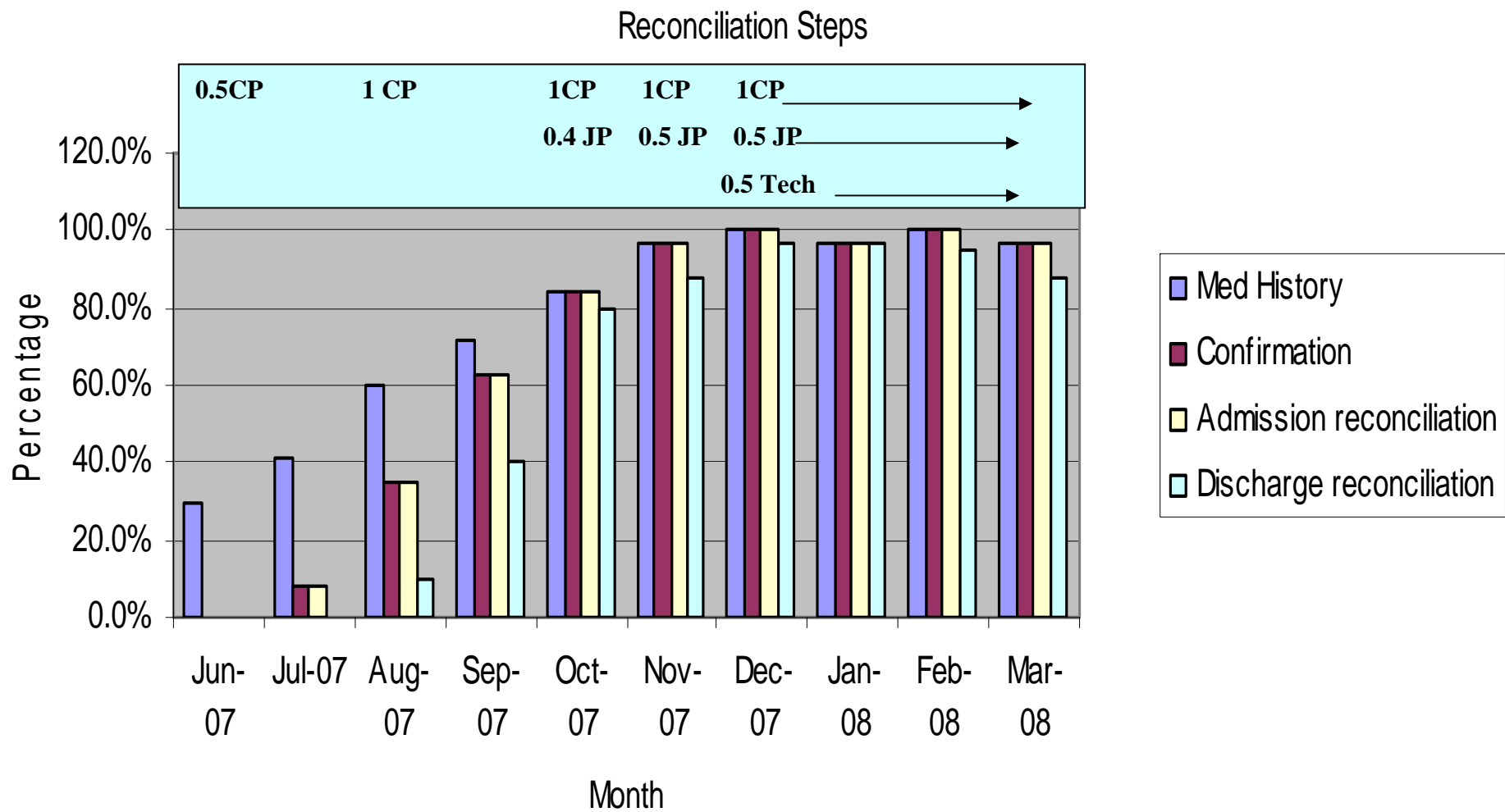
Duty	√* = Main duty	Clinical Pharm.	Junior Pharm.	Pharmacy Tech.
Validation/docum. of pat. med. hx		√	√*	
Assist in obtaining pat. Med. hx info.				√*
Reconciliation of medications on adm.		√*	√	
Entry of patient medications into TEDS		√	√*	
Co-ordination of medication supply				√
Ward round (collaborative action plan)		√*		
Clinical review		√*		
Reconciliation of medications on DC		√*	√	
Generate DC prescription from TEDS		√	√*	
Organise PBS and/or RPH output. Rx		√	√*	
Liaison with community care providers		√*	√	
Assist in discharge process				√*
Provide pat. med. list & advice on DC		√*	√	

Monitoring and evaluation

- Main aim is to track progress whilst making changes.
- KPIs to measure effectiveness of changes/system
- Medication reconciliation is the best stand-alone KPI
- Survey for staff acceptance of process changes
- Commitment to increase resources to reach target



The 4 stages of reconciliation KPI



Satisfaction Survey questions

Medication Reconciliation Program on SSMU – Satisfaction Survey

1. Are you aware of the Medication Reconciliation Program on SSMU? **YES / NO**

For the statements below please select the response you believe to be true for the pharmacy service provided over the last 3 months.

2. The pharmacist has been useful in confirming accuracy (validating) of the medication history for most patients admitted to SSMU.

Strongly agree	Agree	Unsure	Disagree	Strongly disagree
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3. It is helpful and efficient when the pharmacist inputs validated drug information into TEDS on admission and prior to discharge.

Strongly agree	Agree	Unsure	Disagree	Strongly disagree
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4. The accuracy of drug information in TEDS has improved since the introduction of increased pharmacist resources to support the doctor.

Strongly agree	Agree	Unsure	Disagree	Strongly disagree
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5. The attendance of the clinical pharmacist on the morning ward round is helpful in clarifying medication matters and facilitating efficient discharge.

Strongly agree	Agree	Unsure	Disagree	Strongly disagree
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6. Having the pharmacist more accessible (rather than by pager) has increased my likelihood to ask them questions.

Strongly agree	Agree	Unsure	Disagree	Strongly disagree
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7. Having the pharmacist involved in coordinating medications prior to patient discharge has improved the quality of discharge processes.

8. I believe the support provided by pharmacy to improve medication management and the processes that surround admission and discharge should be continued.

Strongly agree	Agree	Unsure	Disagree	Strongly disagree
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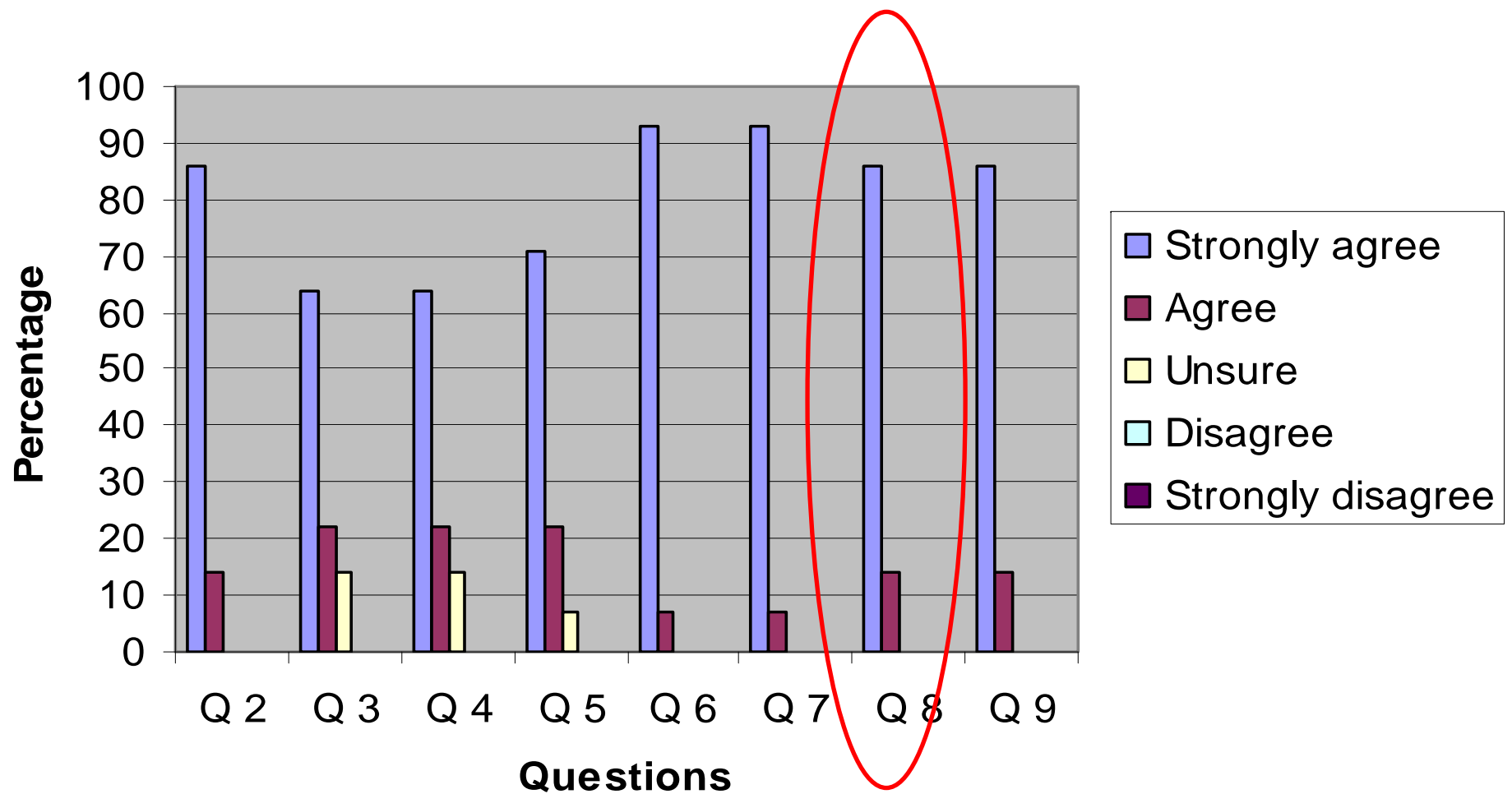
Any other comments:

Position Title

Date

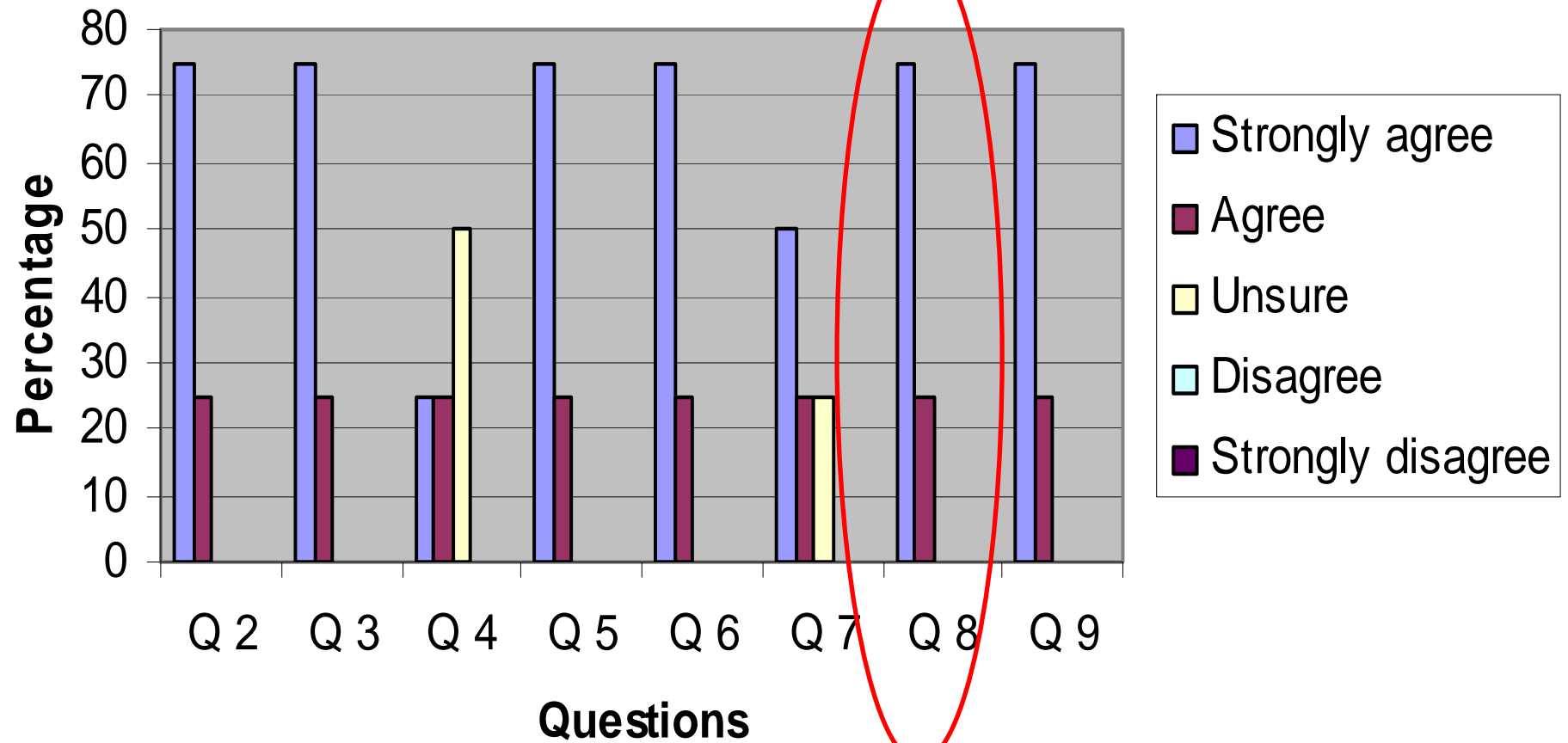
Nursing

Medication Reconciliation Program on SSMU



Medical

Medication Reconciliation Program on SSMU





Conclusion

- “Invaluable” Registrar
- “Excellent service; improves patient outcomes” Registrar
- “Huge improvements. Best thing since sliced bread!!!” RN

Acknowledgments

Mern Low

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