

Medicines Management

'getting the right medicine in the right place'

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2. Nursing staff, Ward 5C Ulster Hospital

3. Lead Nurse Surgical Specialities

BACKGROUND:

The right medicine should be in the right place at the right time so patients get the treatment they need in a timely manner. Delays in the supply of medicines can potentially cause patient harm.

Adhoc (as needed) computer orders are up to 4 times slower for Pharmacy to process compared to a once a week supply on the ward top up (stock items). The large number of medicines (8000 per month) supplied via computer orders had become unsustainable for Pharmacy.

Ward 5C (elective surgery) received **42%** of medicines via the weekly top up (Sep 18).

Problems:

- Inefficient use of Pharmacy robot to supply items to ward once a week on top up
- Out of date ordering system (PILs system and paper orders)
- Recent move to new inpatient ward block resulted in reduced storage space for medicines
- Top up method using tickets / barcodes not working effectively
- Large amount of waste accumulating creating extra work for Pharmacy staff
- Large orders requiring delivery to wards multiple times per day

AIM:

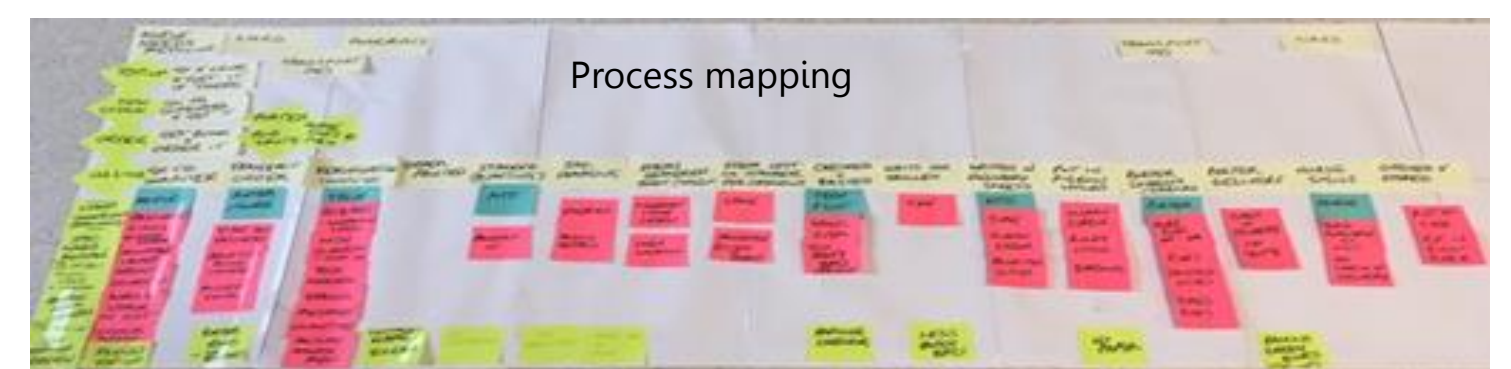
- To increase to **70%** the percentage of medicines supplied to Ward 5C via weekly bulk issue (top-up) by April 2019



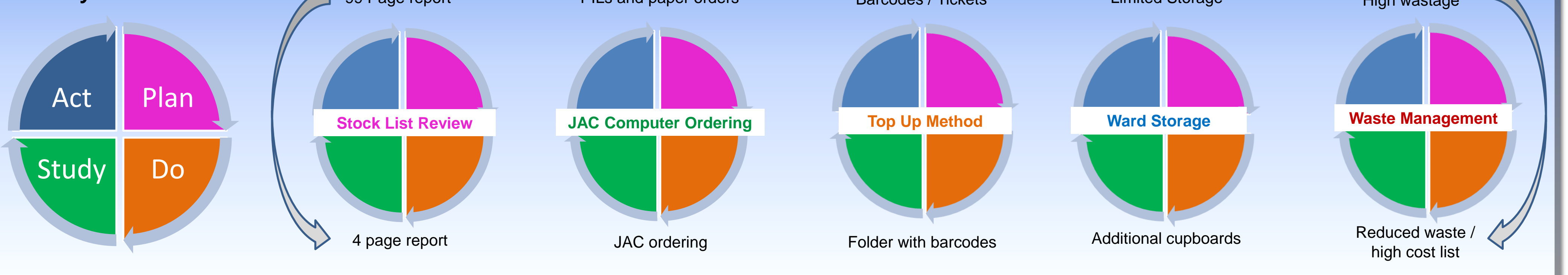
right medicine
right place

METHOD:

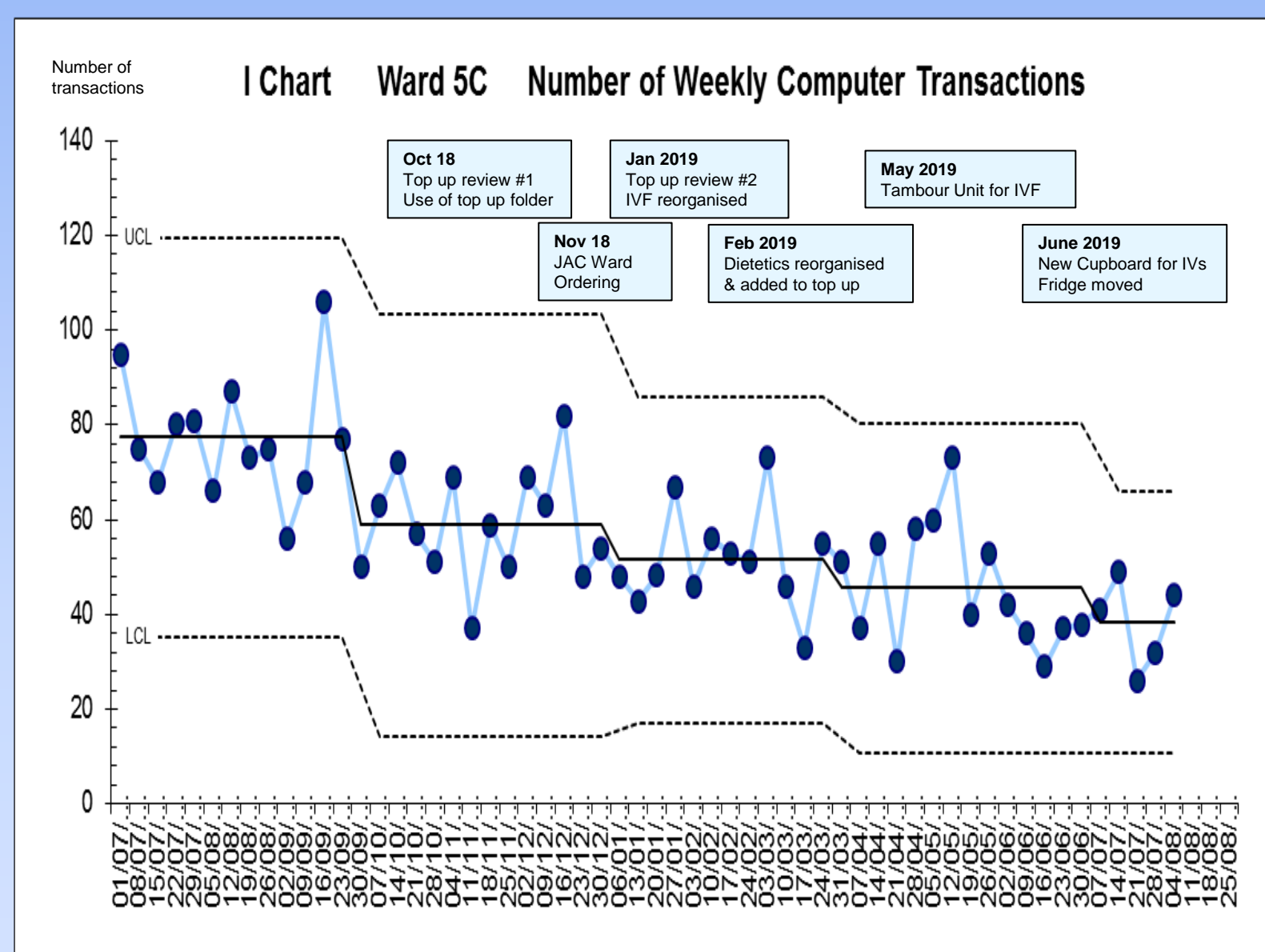
- A multidisciplinary **project team** with representatives from ward nursing staff and Pharmacy was assembled.
- A **project charter** was agreed outlining appropriate measures and roles and responsibilities of team members.
- Process mapping** was undertaken & changes ideas sought from the immediate project team & wider staff groups in Pharmacy and ward 5C.
- PDSA cycles** were commenced initially for the changes that did not require additional resources e.g. stock list review.
- Weekly reports** were created from the Pharmacy JAC system giving real time feedback on the % of medicines supplied to the ward via computer orders and on top up.
- A minor capital works request was submitted for an **additional storage cupboard** and this was funded by the Directorate charitable funds.
- Regular **team meetings** were held and the wider nursing and Pharmacy teams kept up to date via **newsletters**.



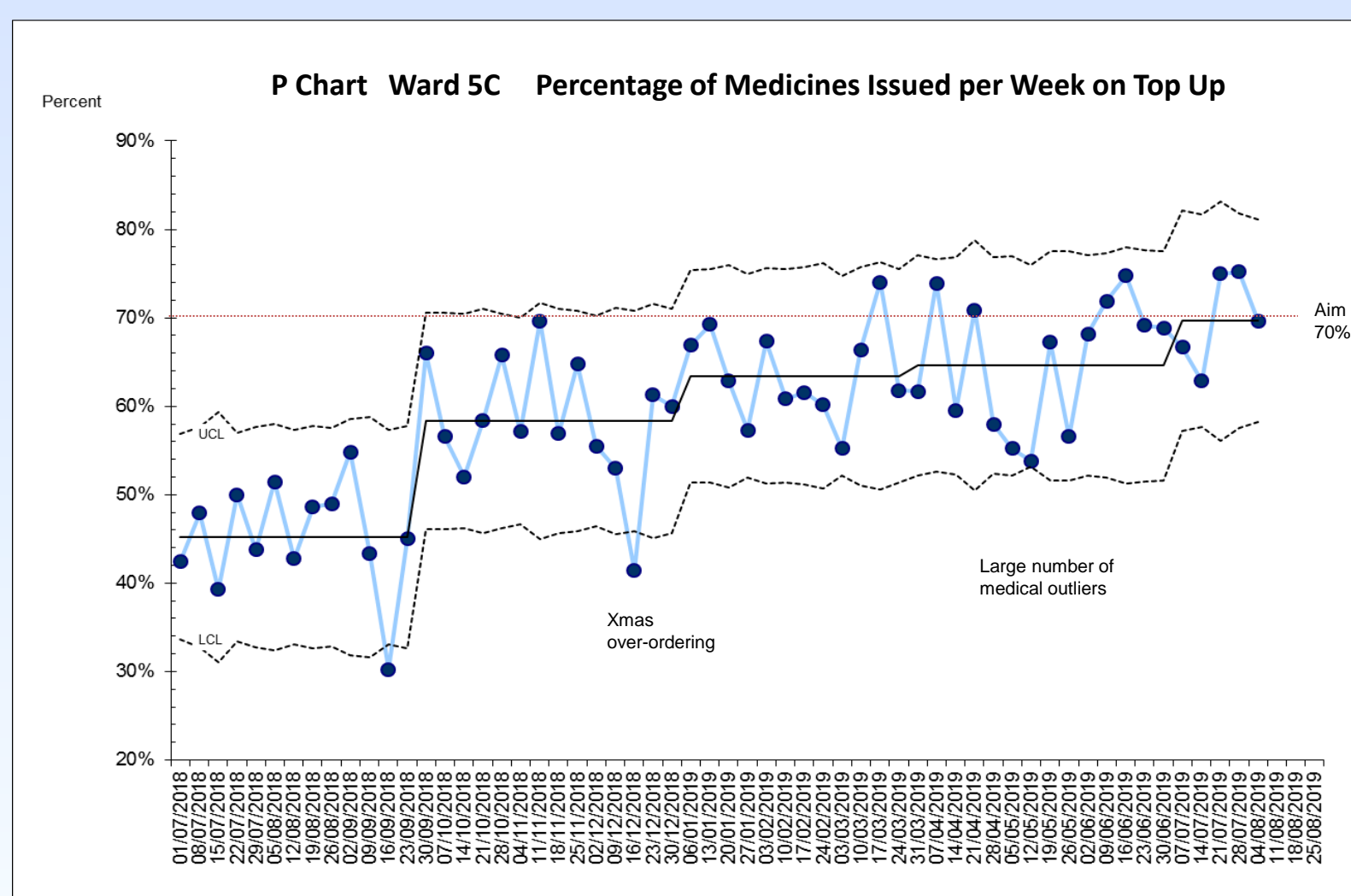
PDSA Cycles



RESULTS:



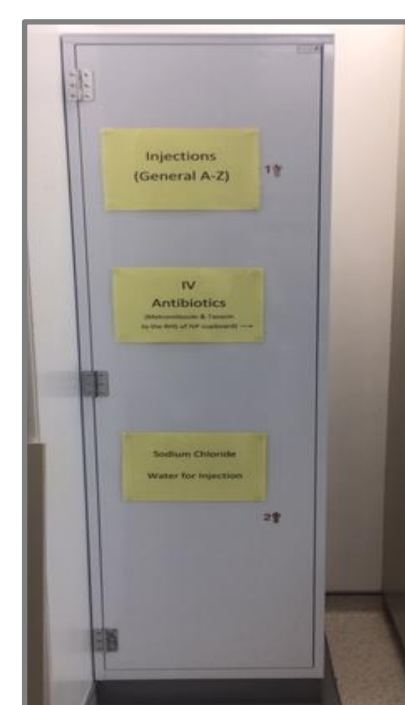
Number of weekly computer transactions has reduced by around 50%



Percentage of medicines issued via weekly top up has increased from baseline of 44% (Sep 2018) to 67% (Aug 2019).



Multidisciplinary Project Team



New additional storage cupboard for IVs



Labelling of new IV cupboard



Waste / stock to be returned to Pharmacy

DISCUSSION:

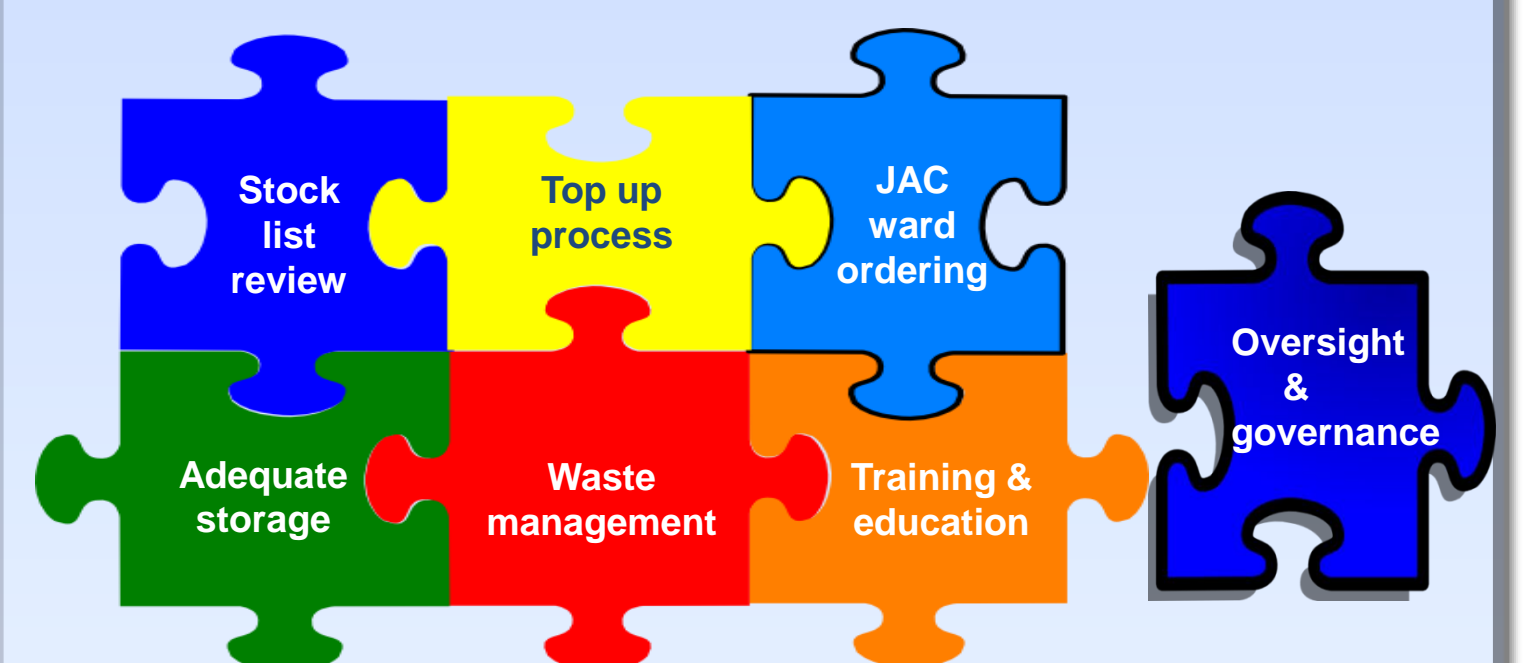
The project has resulted in a significant increase in the percentage of medicines supplied on the ward top up and a corresponding reduction in adhoc (as needed) computer orders.

Resources required during the project

- Some interventions tested did not require additional resource and could be implemented immediately e.g. JAC stock list review report.
- Resource in terms of pharmacy staff time was required to train nursing staff to use the pharmacy computer system JAC to order medicines.
- A minor capital works request was submitted for additional storage cupboards for the medicines management room and this was paid for by directorate charitable funds.

The challenge now is to transfer the learning from ward 5C to other wards and departments within SET.

Putting it all together



NEXT STEPS:

- The interventions that have been tested on ward 5C have the potential to be incorporated into a structured change package that can be spread to other wards within South Eastern Trust.
- A monthly report has been developed to enable performance to be monitored on all wards as changes are implemented.
- Collaboration between pharmacy and nursing colleagues is key to ensure the supply of medicines to the wards is efficient and fit for purpose.



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