australian college of nurse practitioners

Supporting Nurse Practitioners through advocacy resources, networking and professional development

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Dear Rasa,

On behalf of the Australian College of Nurse Practitioners and the 2018 Conference Committee, we would like to thank you for your poster presentation at our recent ACNP Dimensions In Care conference in Canberra.

We appreciate the amount of time and effort that went into the poster. Judging of the poster abstracts has been completed and ACNP would like to congratulate you on being the winner of the 2018 Poster Presentation.

The prize for the award is:

1 complimentary registration to the 2019 ACNP National Conference in Melbourne.

ACNP looks forward to welcoming you to the national conference in Melbourne on 2-5 September 2019.

Yours faithfully,

Kate Reed
President
Australian College of Nurse Practitioners

Leanne Boase Conference Convenor
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IMPROVING MEDICATION PROCESSES IN A COMMUNITY MENTAL HEALTH TEAM

DIMENSIONS IN CARE — AUSTRALIAN COLLEGE OF NURSE PRACTITIONERS NATIONAL CONFERENCE 10-13 SEPTEMBER 2018 HELLENIC CLUB, CANBERRA

RASA KABAILA REGISTERED NURSE LEVEL 3
CREDENTIALLED MENTAL HEALTH NURSE (CMHN) & NURSE PRACTITIONER STUDENT
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BNURS, MMHNURS, GRADDIPMHN, GRDCRTPALCARE, CERTIV-TAE, CERT III-AGED CARE

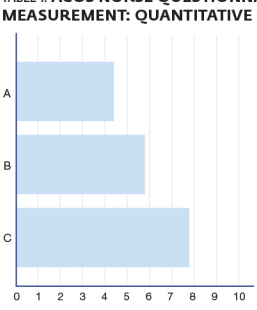
INTRODUCTION/BACKGROUND

- Author is a senior Registered Nurse (RN) in a community mental health team and is a Nurse Practitioner student.
- The author identified that there was no standard processes regarding where medication was being kept and monitoring levels of stock.
- ACOS is now working with many Non Government Organisations (NGO's) who are also managing medication for ACOS clients.
- ACOS and the NGO's are in the process of implementing processes around how they manage medication.
- Medication documentation is crucial to high quality, effective and safe patient care. A unified national model for documenting patient care (including medication) improves information flow in nursing and multidisciplinary team (MDT) practice.
- At present, depot medication administration (what medication was administered, by who and when) is recorded in Majicer (the electronic mental health record system) and on a paper medication chart. However stock levels and location of stock for oral and depot medication a slow-release, slow-acting form of medication) is not routinely documented on Majicer or within any other documentation tool.
- ACOS Nurses are regularly needing to and locate and order medication stock at the last minute.
- Having an RN at ACOS to be responsible for auditing such a medication documentation tool complies with the Canberra Hospital and Health Services 2017 Medication Handling Policy.
- The policy states that maintenance of the stock levels in the medication kit for home visits is the responsibility of the Nurse in charge of the patient care area.
- This is demonstrated through the ACOS RN's being accountable for medications and assisting ACOS staff in knowing where medication is being stored, how much stock is left, knowing when more stock needs to be ordered and by whom.
- Nursing documentation and its development requires follow-up and evaluation. Creating a quality improvement (QI) project around the use of a medication documentation tracking tool, will contribute to evidence based practice within ACOS and the nursing field.

METHOD/STRATEGIES

REVIEW OF CURRENT SYSTEM

TABLE 1: **ACOS NURSE QUESTIONNAIRE: BASELINE MEASUREMENT: QUANTITATIVE DATA**



A: Please rate your level of confusion with the current medication tracking processes for when medication is due for clients. 0 being no confusion, 10 being extreme confusion.

B: Please rate your level of confusion with the current medication tracking processes for when medication is due for clients. 0 being no confusion, 10 being extreme confusion.

C: Do you agree that overall, the current streamlined medication documentation tool is saving ACOS clinicians time through avoiding confusion about how much medication stock is available and where medication stock is kept? 0 being do not agree at all, 10 being highly agree.

AIM: To reduce confusion with MDT ACOS staff (Question B) with the current medication tracking processes for when medication is due for clients to an average score of 5 by the end of February 2019. - A medication tracker tool should aim for staff to be able to easily recognise where medication stock is kept, how much stock is available and when it needs to be ordered. The author created an initial medication tracker tool to review with the ACOs team.

TABLE 2: **ACOS NURSE QUESTIONNAIRE: BASELINE MEASUREMENT: QUALITATIVE DATA**

"No current documentation in place to track stock levels. Stock often missing none left, often no scripts available"

"A standardised documentation process is required. Perhaps using a standardised process for each depot administration"

"Inconsistencies in documentation, difficulties communicating with support house staff"

"As I've been on MITT/ SAT/ACOS several years, I have a working knowledge of tracking progres however can be done better as it has drifted since MITT days"

"...should be tracked better for new staff and as team grows to 50, 100 or more clients so great time to implement mx doc tool"

CONSULTATION WITH STAFF

- The author's initial medication tracker tool provided clinical information that was valuable, such as keeping track of pathology.
- However after reviewing the tool with the ACOS team, both the author and ACOS agreed that the tracker was overly complicated: running the risk that information would be missed and it would not be used by ACOS Nurses as there were too many steps involved.
- It was decided that the medication tracker should be as simple as possible, to enable Nurses to understand where depot medication stock was held, how much stock was available and prompts of when and how to order more stock when stock levels were low.
- We know that the more steps in a process (particularly medication) can create more room for error.

TABLE 3: **THE INITIAL MEDICATION TRACKER**

Surname First name DOB PTO Client location/address Allergies Administered by Date of administration Medication Dose Frequency Depot Next due Stock Location Stock Quantity Reported Adverse Reactions Pharmacy Responsible for collection Script rpts left New Script ordered Y/N Last Pathology Results on File Y/N Pathology Due Y/N Pathology Form Insitu Y/N Next OPA Comments

- ACOS Nurses are working with the ACOS Team Leader in creating a new standard operating procedure (SOP) regarding how medications (oral and depot) are best managed between ACOS, NGO's and pharmacies (regarding medication storage, scripts and communication between all teams).
- This SOP will also address how the medication tracker will be used by Nurses at ACOS, staff accountability and timetabling and how to order and retrieve new medication, communicating this with ACOS appropriately.
- It was discussed that the ACOS RN's will be responsible to oversee any changes to medication dosages and prescriptions, and will ensure that these are updated accordingly.

- In addition, the ACOS RN's will ensure that any complete or out of paper date depot charts are archived and will request new charts from the prescribing doctor.
- The ACOS Office Manager has taken a proactive role in improving these processes, through being the primary liaison between the ACOS team and pharmacy in managing scripts that need to be ordered by the ACOS Doctor.

STREAMLINING INITIAL DRAFT OF TRACKER

- The Nurses at ACOS then created a simplified medication tracker tool.
- This medication tracker uses 3 points of patient identification to ensure compliance with Standards 5 and 6 of the National Safety and Quality Health Standard.
- ACOS Nurses decided that a medication tracker purely for depot medication was most appropriate and easy to initiate in the first instance.

STAFF IN-SERVICE

- An inservice to the ACOS MDT team is to be provided and feedback from the team will be utilised to develop the policy and procedure.

TABLE 4: **STREAMLINED AND SIMPLIFIED MEDICATION TRACKER**

Name	Medication	Prescribed dose	Frequency	Stock on hand	Where stock is held	Pharmacy	Stock ordered	On WB.
Jane Doe	Risperdal Consta	50mg	Fortnightly	1	ACOS	Chemist 1		
Fred Jones URN: 234444	Invega Sustenna	150mg	Monthly	1	Springfield	Chemist 2		
Wilson Chan URN: 211122	Clopixol Depot	400mg	4 weekly	5	Riverview	Chemist 3		

Please note the above information is fictitious and has been used to demonstrate how the medication tracker is populated

RESULTS /OUTCOMES

Quantitative data in table 1 and qualitative data in table 2 demonstrate that confusion was evident among ACOS RN's regarding medication tracking processes.

To endeavour to minimise confusion and standardise medication tracking processes, A standardised medication tracker tool (table 4) has been created and is currently being tested.

CONCLUSIONS/ IMPLICATIONS

- Feedback forms will be given to all MDT staff at ACOS after one month of using the medication documentation tool and after 3 months.
- Qualitative and quantitative feedback will be received from all of the ACOS team about their views if the medication tracker tool has provided more clarity about what medication has been given, where stock is kept and when stock needs to be reordered.
- The feedback forms will compare whether medication practices have improved since initiating the medication documentation tool.

RECOMMENDATIONS

The ACOS Nurses are currently brainstorming ways to further streamline ACOS medication processes . These ideas include streamlined processes for the medication 'clozapine,' improving the paper depot administration chart to further prevent potential medication errors through documentation and improving processes for the ACOS webster packs (oral medication packs).

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