Enforcement of Hospital Authority Guidelines on Medication Management for Medication Administration Record usage in Grantham Hospital.

Lee A and Fung SL

Medication Safety Subcommittee, Grantham Hospital Quality & Safety Committee.

Keywords:
MAR

Introduction
Hospital Authority (HA) Guidelines on Medication Management was published in March 2012. Application of the guideline aims to increase patient safety and reduce medication errors through standardizing practices for prescribing, dispensing and administration of medication. With focus on the usage of Medication Administration Records (MAR), a first step has been taken to review Grantham Hospital's (GH) medication management process against the new guideline.

Objectives
To standardize the usage of MAR in GH.

Methodology
[A] Medication Safety Subcommittee identified 6 points from the new guideline as either poorly adhered to or requiring further clarification in GH: 1. Affixing patient gum label onto each MAR; 2. Completion of Drug Allergy Status on each MAR; 3. One preparation per MAR box; 4. Doctor's signature and doctor's identification code on each prescription; 5. HA approved abbreviations / HA Do Not Use List; 6. Use of patient's own drugs. [B] Interpretation of points and approaches to tackle discrepancies were discussed and endorsed by multi-disciplinary team members of GH Quality & Safety Committee. [C] To enhance enforcement the following actions were taken: - The points were presented to frontline staff in GH Quality & Safety Committee Forum; - "GH Guide to MAR usage for doctors" was prepared for doctor's orientation in GH; - Pharmacy designed a series of reminder notes to ensure identified discrepancies on MAR are returned to ward for amendment. [D] Enforcement details were sent to representatives from each specialty for dissemination to frontline staff. [E] Enforcement commenced in August 2012.

Result
Baseline data for points 1-5 were collected in June 2012 and compared with data collected in September 2012. Non-compliance towards "Affixing patient gum label to each MAR" showed a reduction from 13.6% to 5.8%. Non-compliance towards "Doctor's signature and doctor's identification code on each prescription" showed a reduction from 45.7% to 3.6%. GH Hospital Quality & Safety Committee provided a platform for all concerned disciplines from each specialty to discuss, deliberate and
agree upon a standardized approach to the discrepancies identified. The results reflect, through staff engagement, standardization of practices especially for enhancing patient safety can be achieved across a hospital effectively.