



Service Priorities and Programmes
Electronic Presentations

Convention ID: 309

Submitting author: Ms Jessica YIK

Post title: Advanced Practice Nurse, Princess Margaret Hospital, KWC

Staff satisfaction on implementation of Pioneer IPMOE

Yik WMJ(1), Tang MKC(1), Wong SPA(1), Ng CKF(1), Kwan MY(1), Tang MH(1)
(1)Medical and Geriatric Department, Princess Margaret Hospital

Keywords:

Electronic drug administration
Bar code technology

Introduction

IPMOE (Inpatient Medication Order Entry) targets to simplify the manual and cognitive steps on drug administration which are mostly vulnerable to human errors. Pioneer IPMOE has been launched in medical wards of PMH since April 2013. Continuous staff satisfaction monitoring and evaluation for timely feedback and mutual consensus are crucial to the success of program implementation.

Objectives

1. To appraise the staff concerns on IPMOE adaptation. 2. To identify the effective dynamics to implement change process of IPMOE. 3. To assess staff satisfaction towards practice and instituting changes for improvement.

Methodology

Survey on staff satisfaction on pre and post IPMOE implementation was performed to review the nurse's expectation on (1) user-computer interaction, (2) task accomplishment, (3) across-departmental/interdisciplinary teamwork, and (4) quality of care. Time period was set at one month and 3 months after implementation. Totally 4 wards were included with 30 nurses participating in the exercise.

Result

In the analysis, 90% of nurses agreed that IPMOE was safer than the previous manual system based on satisfaction related to the ease of checking the five rights on medication administration and efficient vetting of known drug allergy. The accuracy of prescription was achieved without doubts on illegible handwriting. The time on medication checking upon discharge or transfer was shortened. Almost 70% of nurses felt the new system saved 50% of time on medication checking. It was doubtless that medication reconciliation was enhanced with regards to the accuracy and consistency of the system. Another notable result was that the satisfaction rate was higher among younger age staff group in terms of morale and enthusiastic in adaptation of the new technology. However, the biggest failing (95% of staff) is that the configuration and operation efficiency of IT equipment. The small front size and slowness of log in time were the argumentative issues for betterment. Our finding revealed that satisfaction rate correspond to the length of program which indicated nurses need time to get familiar with the change. Conclusion: Overall, medication errors were greatly reduced

in the wards with IPMOE, zero medication error was noted within 3 months after program was launched and medication safety was greatly improved. Advancement of IT technology and support to staff adaptation would boost up the IPMOE full implementation in all hospitals.