



Service Priorities and Programmes Electronic Presentations

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Submitting author: Dr Tse Wai, James CHENG

Post title: Nursing Officer, Queen Elizabeth Hospital

Preparedness of Nursing Students for Implementation of Inpatient Medication Order Entry System in Hospital Authority.

Cheng TW

Queen Elizabeth Hospital, Hospital Authority.

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Staff engagement and empowerment

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Introduction

Inpatient medication order entry (IPMOE) system would overwhelmingly be introduced to Hospital Authority hospitals. It would be a great challenge for nurses to adapt the change from conventional drug administration. The purpose of this study is to explore the preparedness of nursing students for using the new IPMOE system. The result is presented in three themes based on the theory of planned behaviour, A.) Perceived usefulness; B.) Input of resources; and C.) Intention to use.

Objectives

To explore the preparedness of nursing students for implementation of inpatient medication order entry system in Hospital Authority.

Methodology

There were 285 nursing students recruited, the respondent rate was 76.5%, n=218. A self-feedback questionnaire with 5-point Likert Scale was designed included options of strongly disagree (1), disagree (2), neutral (3), agree (4), and strongly agree (5). Opposing pair of questions were used to detect consistency of responses. Statistical Package for the Social Sciences (IBM SPSS Statistics 23) Descriptive Statistics was used for quantitative analysis. The result was put into mean \pm standard deviation. The significant level was $p < 0.05$ with 80% level of confidence.

Result

The overall result revealed that nursing students agreed to the themes: A.) Perceived usefulness: IPMOE system is more cost effective (3.8 ± 0.7) than other forms. It can help reduce working time (3.7 ± 0.7). IPMOE system training programs can be designed to access the most up-to-date information (4 ± 0.6). It provides a consistent delivery (3.8 ± 0.6) of content to each medical people, it reduces the frequency (3.8 ± 0.8) of medication errors, and it reduces the harm to patients (3.7 ± 0.6). IPMOE system allows nurses to have more control (3.8 ± 0.5) over their own duties on medication treatment. It allows an organization to provide a wider range of medication safety (3.8 ± 0.6). B.) Input of resources: With IPMOE system, nurses require going

through a training programme (4.1 ± 0.6). IPMOE system requires a lot of hardware (4 ± 0.6) technical support, and it requires a lot of software (4.1 ± 0.6) technical support. C.) Intention to use: It is likely that I will be an enthusiastic user (3.8 ± 0.6) of IPMOE system in future. Concerned opposing questions to detect consistency, the response became neutral but not disagree as indicated by IPMOE system does not seem to be appropriate for my organization (3.4 ± 0.7). I do not think I will much use of IPMOE system in future (3.2 ± 0.8). Conclusion: The result revealed that nursing students perceive the usefulness but they have conflicting intention to use the inpatient medication order entry system in Hospital Authority. Nurses require going through a training programme with IPMOE system. Perceived ease of use is warranted to be studied after implementation.