



## Service Priorities and Programmes Electronic Presentations

**Convention ID:** 610

**Submitting author:** Dr KAM WAH LAM

**Post title:** Consultant, Yan Chai Hospital

### **Successful implementation of customized IPMOE system in YCH ICU through multidisciplinary collaboration**

*Lam KW (1), Tang WM (1), YL Chiu (1), WL Mak (1) Cheung KL (2), Lau C (3), So D (1)*

*(1) Intensive Care Unit, Princess Margaret Hospital and Yan Chai Hospital*

*(2) Central Nursing Department of Yan Chai Hospital*

*(3) Pharmacy Department of Yan Chai Hospital*

#### **Keywords:**

IPMOE

ICU

#### **Introduction**

HA commenced implementation of IPMOE system in 2006. Since, then, it has been adopted by most departments in general wards. It offers many advantages and benefits, including reduction of medication errors, improvement in efficiency, streamlining of workflow, integration of medication decision support knowledge, standardization of medication order line, improvement of communication among caregivers and improvement of medication documentation. However, the situation is more sophisticated and complicated in ICU. Some ICU medication needs frequent adjustment of dosage and minute-to-minute titration of infusion rate may be necessary. Moreover, all ICU uses Clinical Information System (CIS) instead of paper records so integration with CIS is another major concern. Therefore, though IPMOE system is widely adopted in HA hospitals, the implementation of such system by ICUs was much delayed.

#### **Objectives**

Planning and development of logistics for implementation of IPMOE in ICU of YCH

#### **Methodology**

We started the planning the implementation in early 2015. After detailed discussion among various stakeholders including doctors, nurses, pharmacists and IT specialists, we developed a hybrid medication ordering and documentation system customized to our ICU. Most regular medications were ordered and documented electronically with IPMOE system. Some infusion drugs which required frequent adjustment were not included because of complex nature. After the development of the logistics and workflow, it was discussed with the frontline health workers and their feedback was solicited. Many training sessions and hand-on workshops were conducted for both doctors and nurses to familiarize with the new system. After careful planning and intensive training, IMPOE system was live run on 3rd December, 2015.

## **Result**

As the IPMOE system is customized to our ICU and facilitates our work, the implementation was successful and there was smooth transition to IPMOE system. Both doctors and nurses quickly accepted and adopted the new system and there was no increase in medication incidents. Our ICU became the first ICU in HA to implement IPMOE system.

With careful planning and collaboration among the stakeholders, implementation of customized IPMOE system in ICU was proven to be a success.