CHI Learning & Development (CHILD) System



Project Title

Proper Management of Unused/Discontinued/Expired Medication in The Ward

Project Lead and Members

- Ho Wee Ling
- Logesvary Chanderan
- Fan Li Feng
- Florisa Rosales Go
- Jessy Chang

Organisation(s) Involved

Kwong Wai Shiu Hospital

Healthcare Family Group(s) Involved in this Project

Nursing

Applicable Specialty or Discipline

Community Health

Aim(s)

- Enhanced Quality of Care
- Promote Awareness On Safe Practices
- Prevent Potential Medication Errors
- Improved Workflow Process on Standard Medication Storage
- Achieved "0" Unused/ Discontinued Medication in the ward

Background

See poster appended/below



Methods

See poster appended/below

Results

See poster appended/below

Lessons Learnt

See poster appended/ below

Conclusion

See poster appended/below

Additional Information

This project was featured at the Central Health Action & Learning Kampung (CHALK) Poster Showcase 2022.

Project Category

Care & Process Redesign

Quality Improvement: Workflow Redesign, Clinical Practice Improvement: Root
Cause Analysis, Plan-Do-Study-Act; Risk Management: Preventive Approach, Adverse
Outcome Reduction

Keywords

Medication Safety Practice, Medication Storage, Medication Errors Prevention

Name and Email of Project Contact Person(s)

Name: TTSH Network Development (Partnerships)

Email: partnerships@ttsh.com.sg

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Proper Management of Unused/Discontinued/Expired Medication In The Ward

Team Leader

Ho Wee Ling

Team Members

Logesvary Chanderan | Fan LiFeng | Florisa Rosales Go

Sponsor

Jessy Chang



Introduction/Background

Pharmacist audit was conducted in January 2021 and reported that ward staff are unable to manage some of the medication storage in the ward effectively.

Problem

- 1) Inconsistent workflow on discard date.
- 2) Staff did not return unused/unopened medication to the pharmacy.
- 3) Discontinued medication already in used were not discarded.
- 4) There was no sticky label of "use first", "short expiry" on some of the medication.

Aim Of Project

Enhanced Quality Of Care

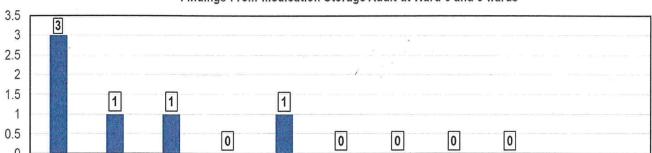
Promote Awareness On Safe Practices

Achieved "0" Unused/ Discontinued Medication in the ward

Prevent Potential Medication **Errors**

Improved Workflow Process on Standard Medication Storage

Positive outcome: The unused/Discontinued Medication reduced to "0"



Findings From Medication Storage Audit at Ward 5 and 6 wards

30/04/202104/05/202110/05/202116/05/202119/05/202123/05/202111/08/202121/12/202130/06/2022 No proper items not opened zero error wrong zero error zero error zero error zero error sticker labeled item discard findings infindings in findings findings in findings labeling with "use without date in ward 5S ward 5S in ward 5T ward 5S with "use first " label not topical and ward first" x 1 stickers discarded creams 6S/6T and "short

Methodology

expiry x 2

PLAN

- Analyse the root causes.
- Select an effective PDCA methodology.
- Select effective NHGP audit format.
- Identify pilot ward and nurses to lead the project.
- Set a realistic goal (within a month).

DO

- Explain the project objective to the team.
- Teach and reinforce ward staff the following:
 - Refer to the NHGP guidelines on "Expiry date/Shelf-life of Medication After Opening" for proper medication management.
 - Discard unused, discontinued expired medication immediately. Return unopened and unexpired medication to the pharmacy ASAP.
 - Use yellow sticker to highlight the duration, special instruction of short-term medication.
 - Weekly check on medication storage. Check stock prior to ordering to prevent over top-up.

CHECK

- Rectify mistake, re-train staff, reinforce on the correct practices.
- Revise audit checklist to make it more specific for staff to check on the unopened/discontinued and discharged medication.
- Conduct weekly audit and monthly cross ward audit.
- Obtain verbal feedback; evaluate and share the audit outcomes weekly to ward staff.

ACT

- Pilot in level ward 5 Serangoon.
- Subsequently implement to the rest of the wards in level 5 and 6.
- To follow up progress.

Sustainability

- On going training of new staff and monthly audit of the consistent practices by trained staff.
- 6 Monthly audits by KWSH pharmacist.

Lessons Learnt

- Early identification of potential expired and discontinued medication can prevent medication errors and wastage.
- Staff should follow the workflow process on standard medication storage.

Next Step/Future Plan

To share the project solution with other wards in KWSH.

Impact

Prevent potential incident of medication errors and wastage.

NURSING HOME

Prevent potential incident of care.

Promote safe and quality care.

Enhanced organisational effectiveness.