

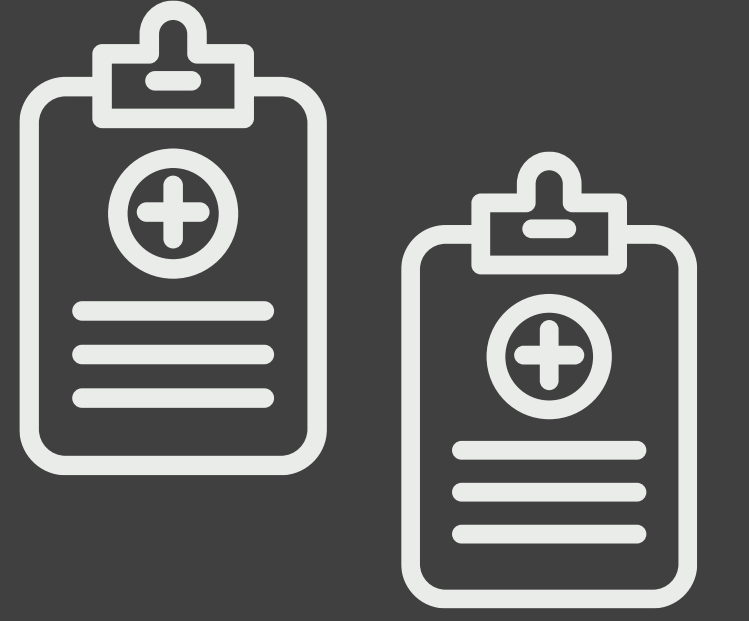
IMPROVING MEDICATION SUPPLY AND CLINICAL HANDOVER THROUGH A PHARMACY ASSISTANT-SPECIFIC ELECTRONIC HANDOVER TOOL

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BACKGROUND

- Clinical handover between Pharmacy Assistants, particularly medication supply requirements, inconsistent between staff.
- Lack of standardised proforma, resulting in miscommunication, work duplication, inefficiencies, and missed/delayed medication doses.
- Need identified for an electronic handover proforma, similar to that used by pharmacists.



OBJECTIVE

- To implement, and evaluate the effectiveness of, a Pharmacy Assistant-specific handover section within the Patient Flow Manager (PFM) system Pharmacy module.
 - Tool supports clinical handover between ward-based Pharmacy Assistants.



ACTION

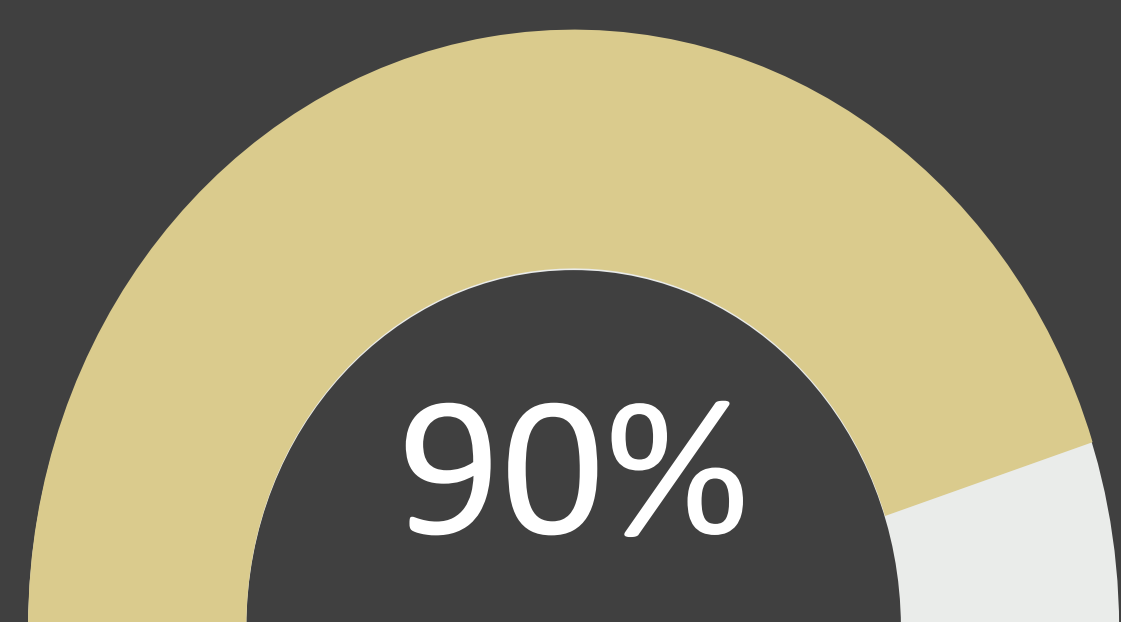
- Creation of Pharmacy Assistant-specific handover section in PFM
- Evaluation through pre- and post- implementation staff survey



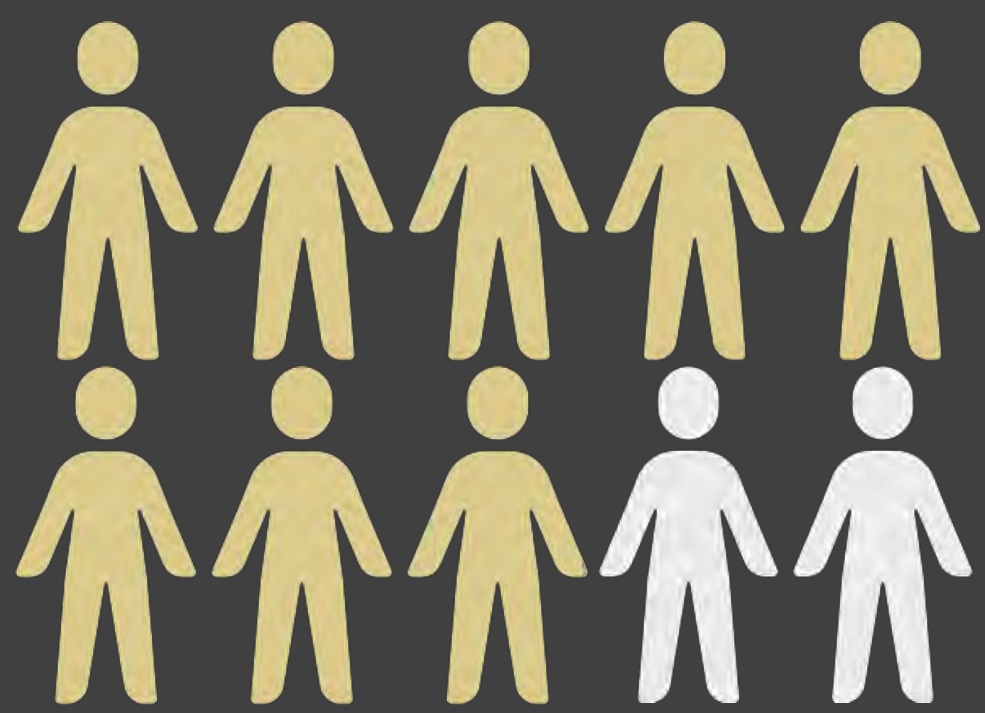
Approvals		Approvals Dates	
ID	Requested	Actioned Date	27/10/2022
IPA	Approved	Actioned Date	27/10/2022
Other	Select	Actioned Date	
Approval Comments	IPA for rituximab filed in chart ID approval for piptaz		
Supplies	PH AHA Comments: Chart reviewed 1/xx, AA Family bringing in medication this afternoon 1/xx Has SN [] call comm pharm on discharge		
POMs	<input checked="" type="checkbox"/>	Supply Comments: POMS - Budesonide (Pulmicort) 400mcg Metoprolol XL 95mg M 18/10	
CD in Safe	<input checked="" type="checkbox"/>		
IV ABx	<input type="checkbox"/>		

Bed	Name	Alerts / Allergies	Consultant	Diagnosis	Background	MAP	PINCHA	EDD	Status	Pharmacy Comments	Pharm AHA Comments
RED- Bed 1 123456	Test, Patient 75yrs M S: 14	Amiodipine, Amiodarone	MED TILOS:33	Subtherapeutic INR (AF & MAVR 2.5-3.5)	PMHX: T2DM on sitagliptin/ metformin, CKD, HTN, Gout, AF, MAVR, CCF, IHD, Pancreatitis, PPM, Arthritis, delirium	Done	H	1/xx New RACF	Last Rev: 1/xx Next Supply: 1/xx Supply: POMS - Budesonide (Pulmicort) 400mcg Metoprolol XL 95mg M 1/xx	HITH pharmacy MAP [x] 19/10 JC RACF	Chart reviewed 1/xx, AA Family bringing in medications this afternoon 1/xx Has SN [] call comm pharm on discharge

EVALUATION

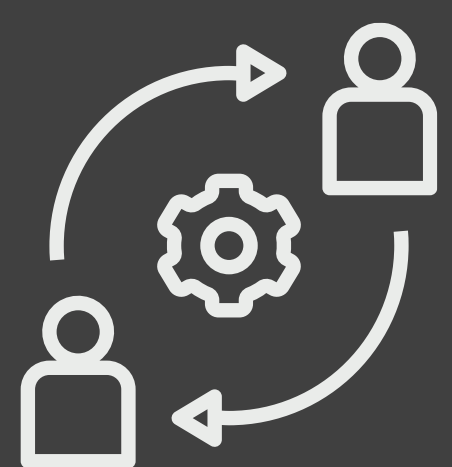


90% of *pre*-implementation survey respondents (n=6) reported duplication when receiving and providing handover



83% of *post*-implementation survey respondents (n=8) said the tool is "Very helpful" in prioritising medication supply

- Pharmacy Assistant workload efficiency improved
- Reduced clinical handover duplication
- Improved information transparency across clinical units, allowing prioritisation regardless of bed movements
- Smoother transfers of care



Improvement in time critical medications reaching patients in a timely manner

"Helpful – if no chance for verbal handover, or last-minute roster changes, information is still available"

"Helps me stay ahead of my resupplies; I find it very helpful in prioritising my day. PFM allows other staff members to pick up where the other person left off."

"Can better pre-empt medication supply needs"

"Eliminates double handling"

DISCUSSION

- Although PFM well used and viewed positively, inconsistent use/data entry identified



- Ongoing education required to support:
 - Standardised use of module/data input
 - Compliance with the associated Work Instruction to ensure clarity in data entry
- Ongoing routine handover audits planned