

Background

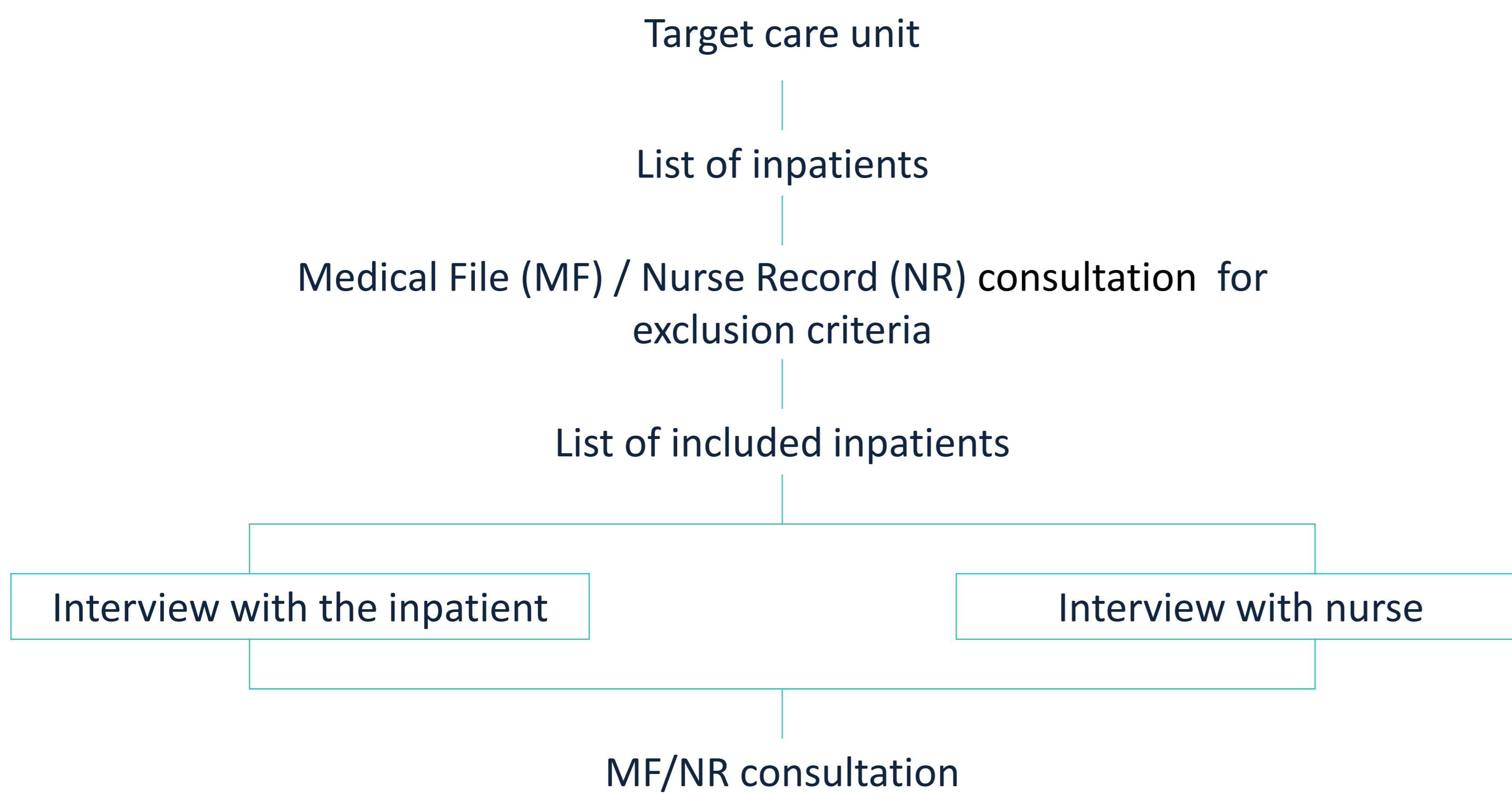
Patient's Personal Treatment (PPT) management in a hospital is a problematic potentially responsible for incidents. Incidents encountered are, among others, medical duplications that can lead to serious consequences (especially with oral anticoagulants), treatments omissions, dosages errors, etc. The management of PTT is not subject to legal / national regulation in Belgium or institutional regulation in our hospital.

Objective

The primary objective is to establish an inventory of management practices of PTT in our hospital by conducting interviews with inpatients and nurses. The secondary objective is to propose an institutional regulatory for the control and administration of PTT.

Material and method

The state of play was realized in 22 care-units from 5th October to 4th November 2016. The PTT management was evaluated by a pharmacist with a survey (inpatient/responsible nurse) based on a review of literature. Data collection systematically follows this pattern :



Exclusion criteria:

- Unit care : Operative ward - Neonatology - Pediatrics – intensive care
- Patients : dementia, speech disorders (hearing)

Survey inpatient	
1. Do you usually take drugs at home?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Do not know
2. Did you bring them with you at your admission?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Do not know
IF NO, end of audit	
3. At arrival, have you been asked if you have brought your own drugs?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Do not know
4. Have you been asked to give them to the nursing staff?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Do not know
5. Did you give them to a nursing staff at your arrival?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Do not know
IF NO, where are they?	
<input type="checkbox"/> At home	
<input type="checkbox"/> On my initiative	
<input type="checkbox"/> On the initiative of a third party (.....)	
<input type="checkbox"/> In your room. If it is the case, do you take them?	
<input type="checkbox"/> YES + drug list*	
<input type="checkbox"/> NO <input type="checkbox"/> Sometimes	
<input type="checkbox"/> Storage mod (pill dispenser, loose.....)	
<input type="checkbox"/> Do not know	

Survey of the nurse responsible for the patient	
1. Where are the PPT of the patient being audited?	<input type="checkbox"/> In its room <input type="checkbox"/> In the nurse cart <input type="checkbox"/> In another place (.....) <input type="checkbox"/> Do not know <input type="checkbox"/> Did not know that patient had a PPT
2. Auditor establishes the drug list and their storage mod*	
3. Auditor checks if PPT is identified	<input type="checkbox"/> Identified treatment <input type="checkbox"/> By the room number <input type="checkbox"/> Not identified treatment <input type="checkbox"/> By name <input type="checkbox"/> GUS label
4. If the physician wants the PPT to be used, by what means does he inform the nursing staff?	<input type="checkbox"/> Annotation "Brought by the patient" or <input type="checkbox"/> Other: <input type="checkbox"/> By putting a note for each drug <input type="checkbox"/> Non applicable
5. If the patient brought his own drugs, where do you take the drugs?	<input type="checkbox"/> In the nurse cart <input type="checkbox"/> In the room <input type="checkbox"/> Not applicable <input type="checkbox"/> Other:

Survey auditor	
1. The auditor consults the DI and mentions the note in relation to the PPT management*	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. The auditor consults the DM and mentions the note in relation to the PPT management *	<input type="checkbox"/> YES <input type="checkbox"/> NO

Results

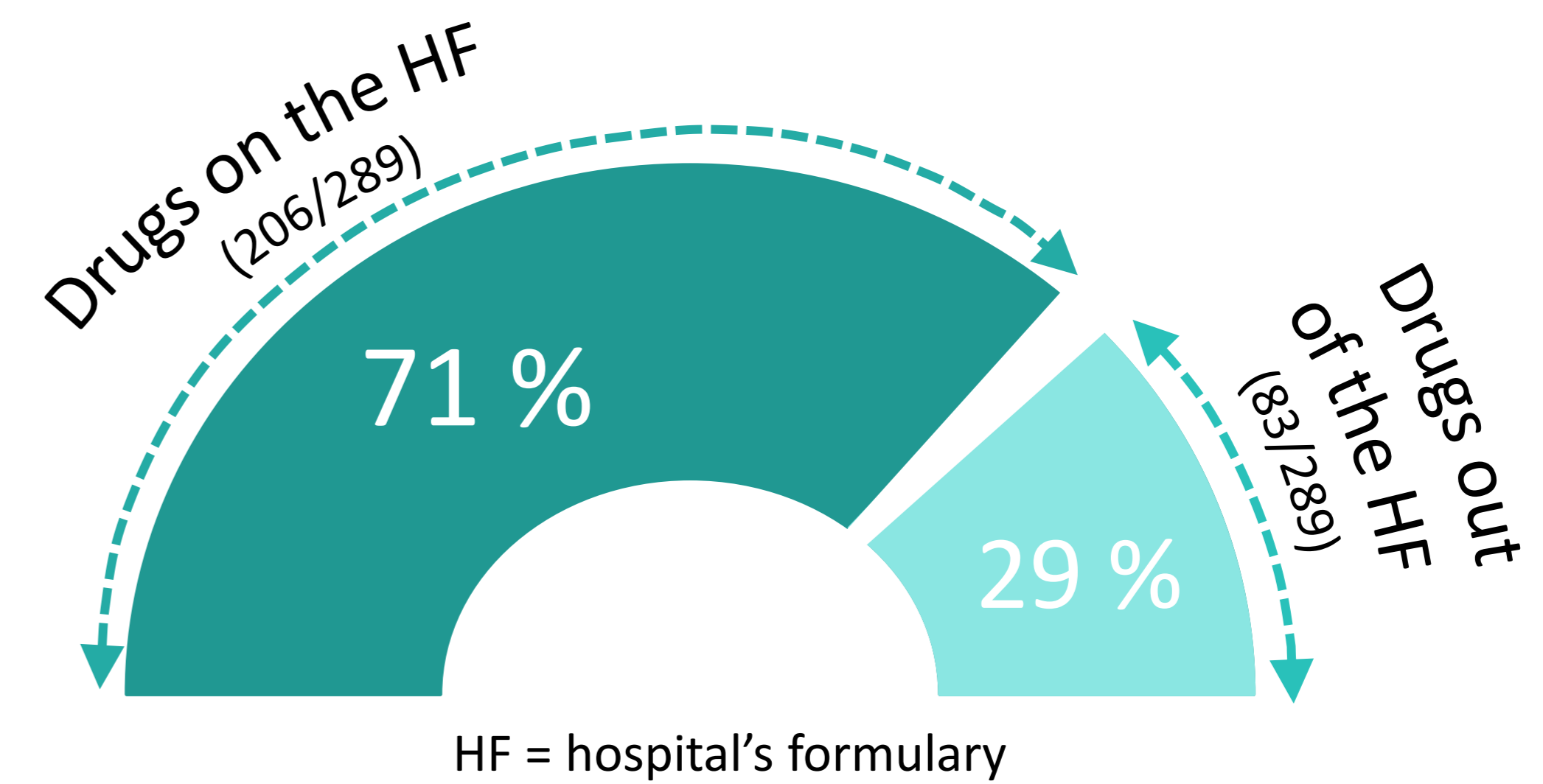
- 410 inpatients hospitalized into the target care units
- 195 included inpatients *
- 158 inpatients had an usual treatment
- 102 inpatients brought their PPT into hospital



*Reason for exclusion: inpatient unavailable (n=173), language barrier (n =5), refusal (n=1), patient filling the exclusion criteria (n=36)

65 % patients brought their own drugs into hospital

The detail of the PTT is known for **68 %** of inpatients :



PPT management at admission

- Nursing staff asks the inpatient :
 - if he brought his PPT in **71 %** of cases
 - to give them their PPT in **21 %** of cases
- Patients entrust their PPT to nurses in **17 %** of cases
- PPT are identified in **19 %** of cases :
 - By the room number (17)
 - Other (2)
- A note relating to the management of the PPT is present:
 - In nurse record in **65 %** of cases
 - In the medical file in **1 %** of cases

PPT management during hospitalization

- Location of PPT :

According to the patients	According to the nurses
<ul style="list-style-type: none"> Home (2) Room (82) Do not know (1) Nurse (17) 	<ul style="list-style-type: none"> Patient room (81) Nurse cart (17) In another place (0) Do not know (2) Do not know that the patient has a PPT (1)
- Administration of PPT by the patient :
 - Yes(64)
 - No (17)
 - Sometimes (1)
- If PPT is available, nurses take the drugs in :
 - Nurse cart (17)
 - Patient room (78)
 - Not applicable (6)

Conclusion

PPT management in a hospital is a problematic in terms of safety, quality and concerns an important part of patients as confirmed by this study. Communicate the results to the different stakeholders is a first step in this process of continuous improvement of quality. An institutional regulatory standardizing and securing PTT management practices must be drafted taking in account the field reality. Other proposals are under study: verification of compliance by nurses, identification of PTT, information to the patient to prevent the use of PPT in parallel with treatment administered by nursing staff, sensitization of patients and visitors to these practices.



References :

Gleason K.M. et al., Results of the Medications at Transitions and Clinical Handoffs (MATCH) study: an analysis of medication reconciliation errors and risk factors at hospital admission, JGIM, 25, 5, 441-447, 2010.
Grandjean C. et al., de l'anamnèse d'entrée à l'ordonnance de sortie : continuité des traitements médicamenteux des patients hospitalisés dans un hôpital régional suisse, Journal de Pharmacie Clinique, 28, 3, 2009
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