IMPROVING MEDICATION RECONCILIATION REPORTS: EVALUATION THROUGH QUALITY AUDITS

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BACKGROUND

PROTOCO

SR

Medication reconciliation (MR) before a scheduled surgical procedure (SSP) improves patient safety, but quality of this process must be taken into account. In our center, MR-protocol includes hospital pharmacists' reports (RR) that encourage the process.

AIM AND OBJECTIVES

Evaluate the evolution of quality of pharmacists' MR-reports after annual audits.

MATERIALS AND METHODS

Before a SSP, a pharmacist prepares a MRreport that contains an individualized MR proposal for surgeons to adapt their medication during hospitalization

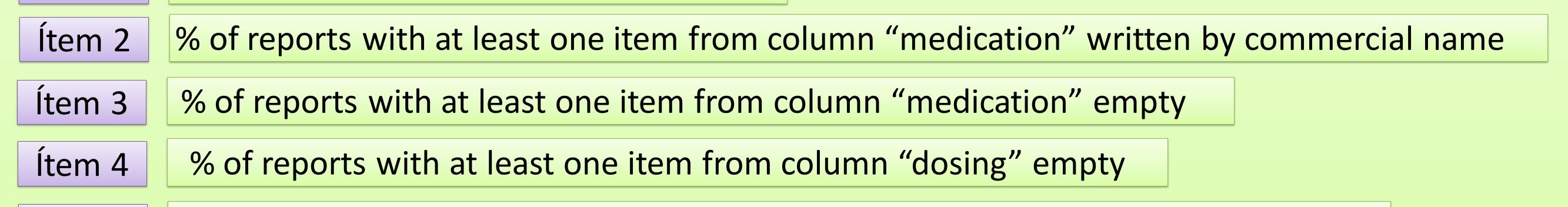
MR proposals can be "mantain", "suspend" "evaluate" or "replace for".

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Subsequently, another protocol was developed to evaluate the quality of the MR-report. Five relevant items were selected:

% of reports with empty medication list Item 1



% of reports with at least one item from column "reconciliation proposal" empty Ítem 5

From 2016 to 2019 an audit was carried out annually, selecting a random sample of 30 patients and establishing an annual improvement plan according to the results.

IMPROVEMENT PROPOSALS ESTABLISHED	RESULTS				
 Include a week rotation in the reconciliation area for the first-year resident 	ÍTEM	2016	2017	2018	2019
		10%	10%	7%	0%
 2017 • Extend MR rotation of the third-year resident from two to five months 018 • Establish a supervision/review circuit by the reference pharmacist of the RRs performed 		26%	9%	10%	4%
		0%	0%	0%	0%
	IV	0%	4%	0%	0%
	V	10%	0%	0%	0%
	*Results were considered optimal if items error were \leq 10% and excellent if \leq 5%				





CONCLUSION

After each improvement proposal introduced, especially the review of the RRs, an improvement in the quality of the RRs is observed over the years. After the last audit, all the indicators are at excellent levels of achievement.

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