SECURING STORAGE OF HIGH-RISK MEDICINES IN A CARE UNIT: WHERE ARE WE NOW?

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INTRODUCTION

In our country, a Platform for Continuous Improvement of Quality of Care and Patient Safety has set the following target for hospitals: by the end of 2018, 100% of the High-risk medicines (HRMs) will be correctly identified and stored in a pilot unit according to the established procedure. **The internal medicine ward** was the pilot unit chosen for this work.

OBJECTIVES

To evaluate through a monthly audit, the compliance with the tidying procedure of HRMs established in the pilot unit.

METHODS

The tidying procedure of HRMs implemented in this unit includes :

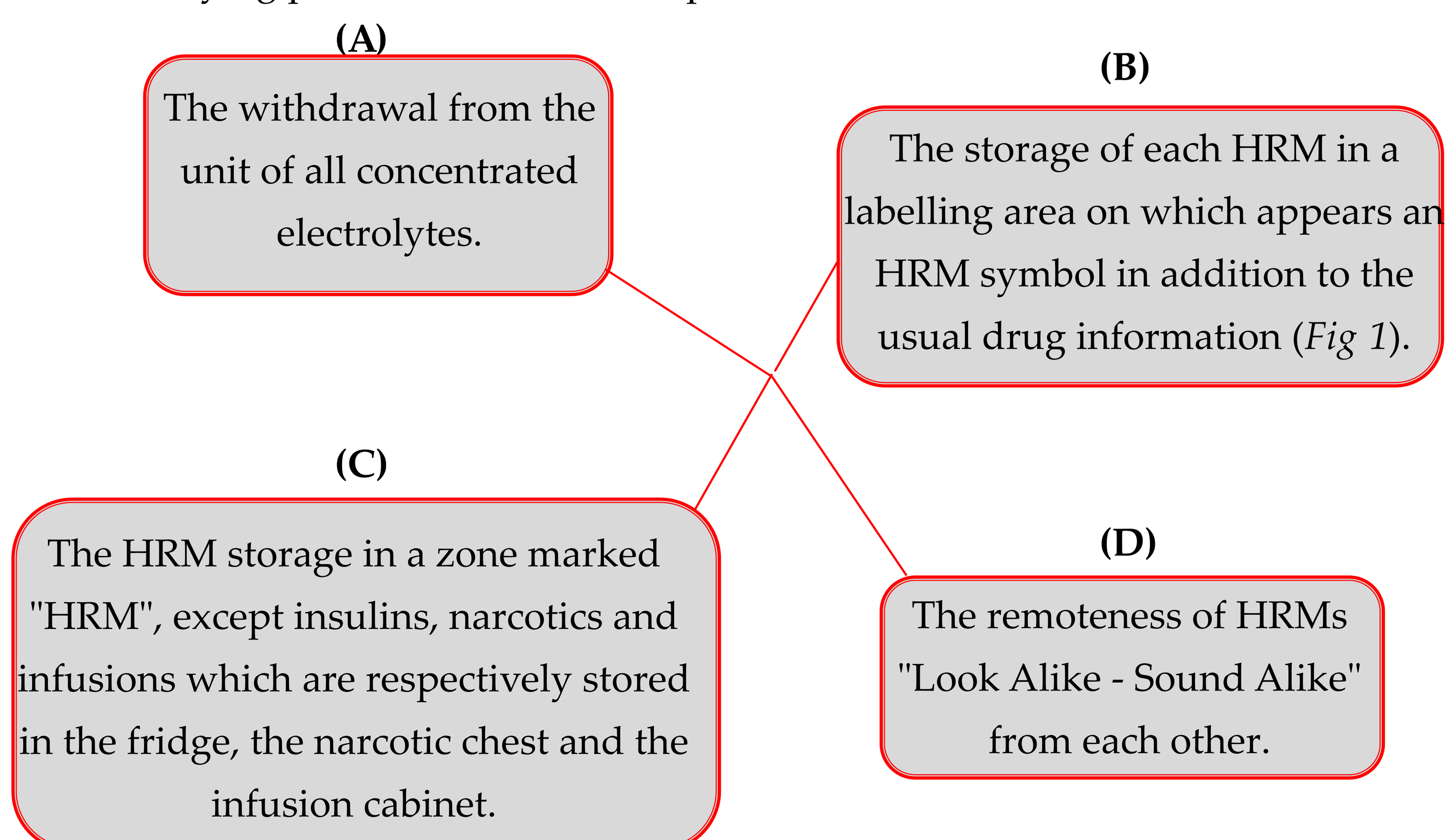
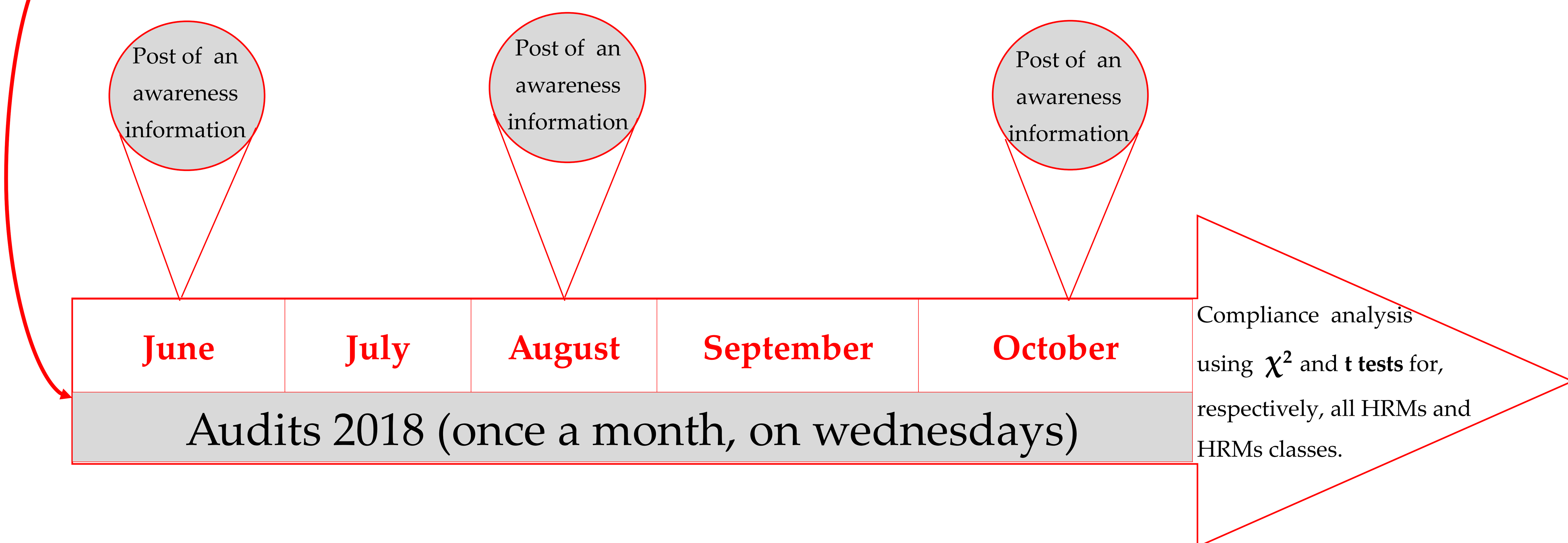
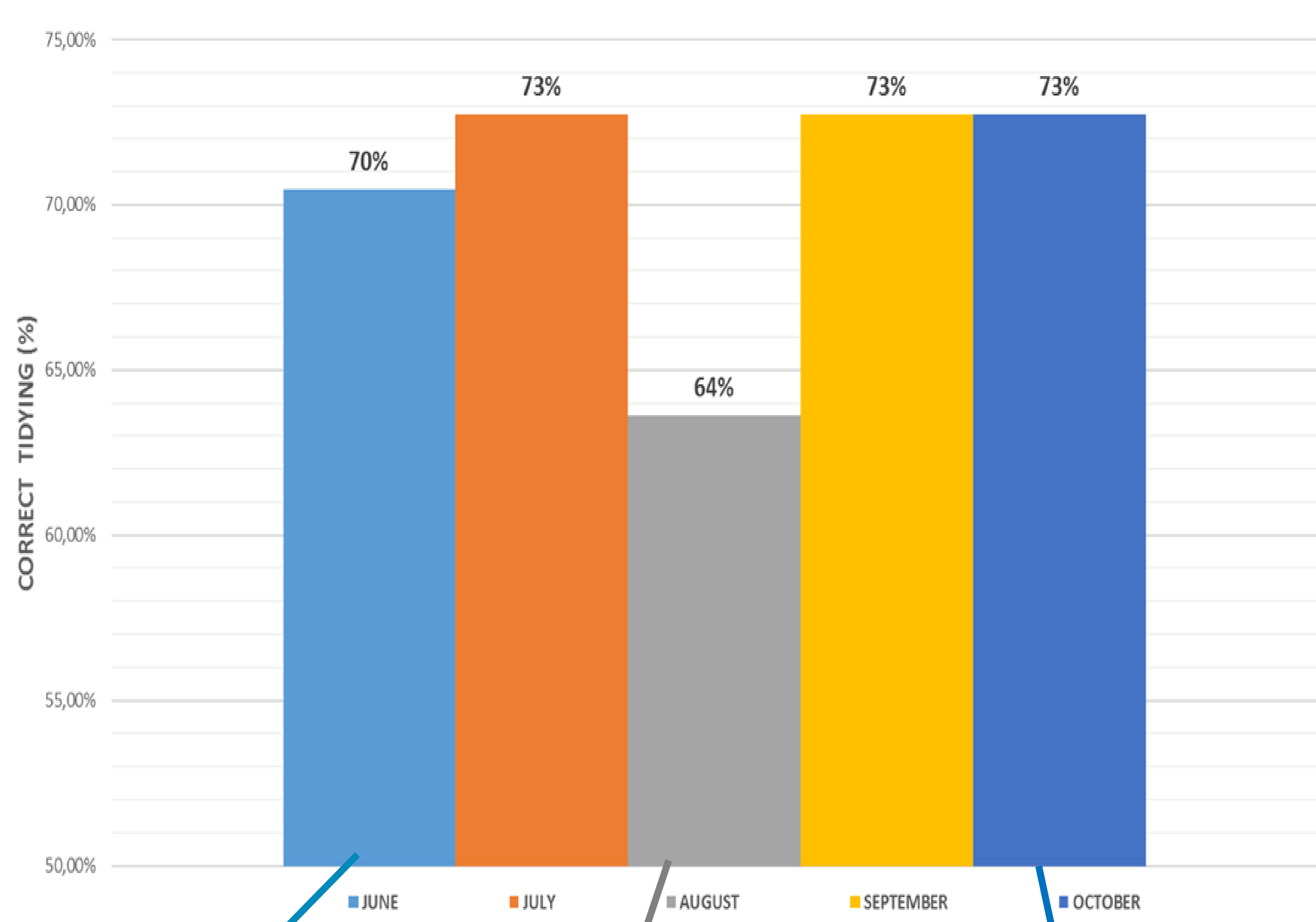


Fig 1: Other information on the labels

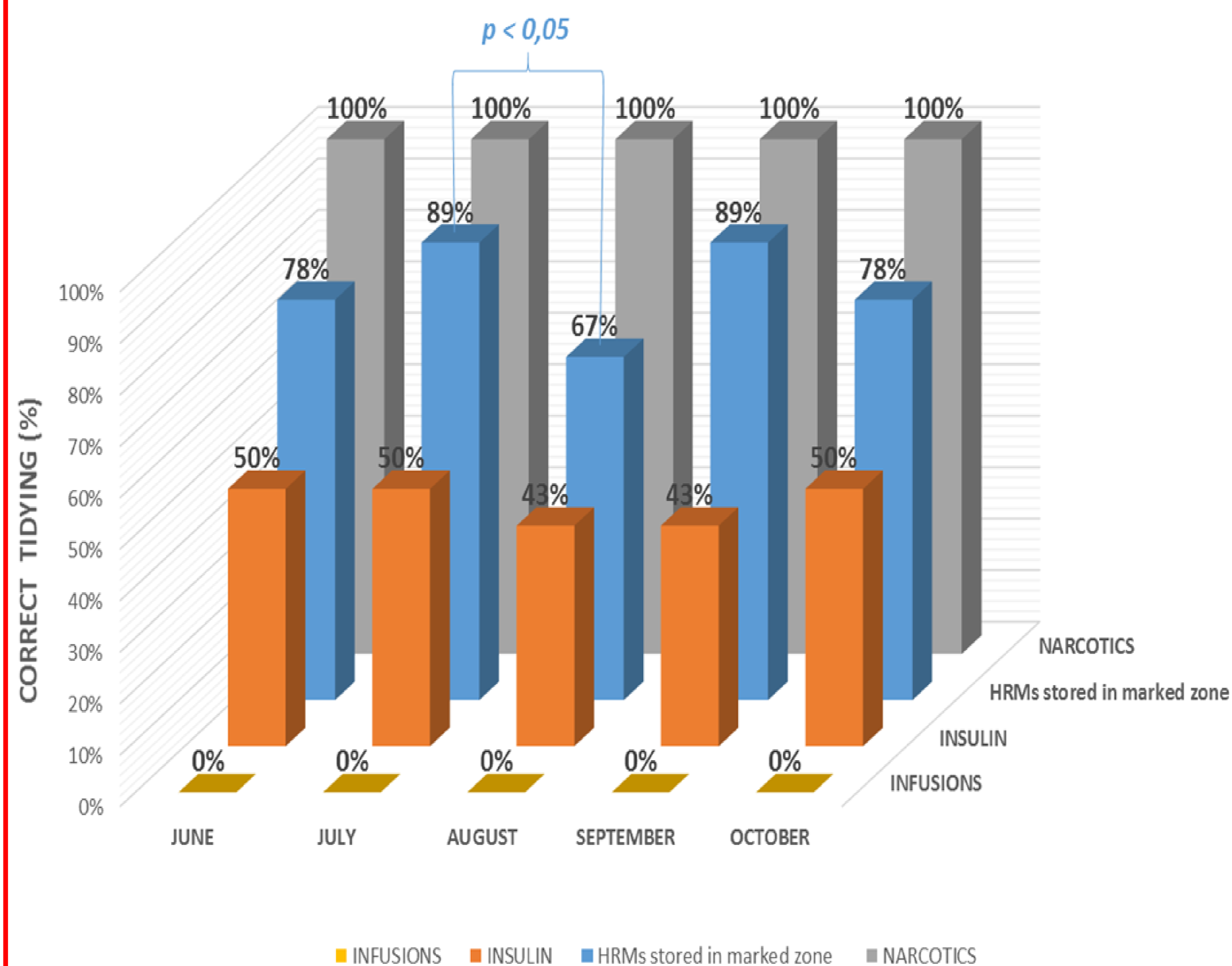


RESULTS & DISCUSSION

After the withdrawal from the unit of all concentrated electrolytes, the 44 remaining HRMs in the unit were identified, tidied and audited by the pharmacist



The compliance for all 44 HRMs stored in the unit (64-73%) was not significantly different between the different audits (p>0,05).



- Between the months, no statistically significant differences (p>0,05) were observed for **insulin** (43-50% compliant), **narcotics** (100% compliant) and **infusions** (0% compliant)
- For the **HRM stored in the marked zone** (67-89% compliant), the difference between the months was not significant either, except between **JULY** and **AUGUST**, where a significant decrease in compliance was observed (*p<0,05*). This decrease is associated with a lack of awareness action between these two months.

Main barriers to compliance with the tidying procedure:

- Lack of staff (pharmacists, nurses)
- Variation of staff responsible for storing the HRMs in the unit cabinet
- Restricted storage space in the fridge compared to the amount of insulins
- Lack of staff awareness actions about HRMs

CONCLUSION

This work allowed highlighting the improperly stored HRMs. To further secure their storage in a care unit, more improvement and awareness-raising actions need to be carried out.

References

Saedder Eva A. et al., Identifying high-risk medication: a systematic literature review, European Journal of Clinical Pharmacology (2014) 70: 637– 645