

Situation analysis of medication management in the emergency ward with focus on inter-professional collaboration: A mixed-methods study

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Abstract

Medication Errors are among the most common medical errors in the healthcare system. There are many factors related to ME incidence in hospitals that affect healthcare professionals involved in medication therapy. Failure to Medication Management (MM) might be the leading factor for medication error incidents especially in the emergency department. The objective of this explanatory sequential mixed-method study was to perform situation analysis of MM deficiencies and uncover promotion strategies in the emergency ward with focus on interprofessional collaboration. First, a descriptive crosssectional survey was performed. In this quantitative phase the developed MM Comprehensive Instrument was completed. Then three Focus Group Discussions (FGD) with informants of medical, nursing and pharmacy professionals were conducted to explain observed deficiencies and develop strategies. Interviews were analysed by directed qualitative content analysis. Quantitative findings mainly showed that participants were insufficiently informed about medication policies and reporting medication errors. The focus of discussions in FGDs was regarding the revealed deficiencies in quantitative phase. Six themes with two categories of deficiencies and promotion approaches were extracted: Monitoring, preventing, reporting, feedback, reaction. evaluation and inter-professional collaborations. Informants stated inadequate training and supervision, and failure to develop inter-professional collaborations in medication therapy as the most important causes of the current deficiencies in MM. Informants emphasized that enhancing Inter-professional education in medication therapy with emphasize on medication error scenarios, interprofessional audit with feedback meetings for reported medication errors, interprofessional teamwork policies, computerization of the whole medication documentation process, and online reporting applications for medication errors to effectively improve MM in the emergency department. A combination of offered promotion strategies with support of the hospital managers and faculty members are the **Trends Gynecol Oncol**

most likely means to improve MM in the emergency department.



Biography:

Fatemeh Bakhshi is a PhD cotutelle student. She is PhD candidate in Nursing education and Research Management. Her area of interest during PhD is hospital management with emphasize on patient safety and medical errors. She tries to create new pathways for improving medication safety and continuity of care. She has conducted several qualitative methods with focus of action research to better address these issues.

Speaker Publications:

- 1. Breeding J, Welch S, Whittam S, et al. (2013). Medication Error Minimization Scheme (MEMS) in an adult tertiary intensive care unit (ICU) 2009–2011. Australian Critical Care, 26(2), 58-75.
- 2. Cabilan, C., Hughes, J. A., & Shannon, C. (2017). The use of a contextual, modal and psychological classification of medication errors in the emergency department: a retrospective descriptive study. Clinical Nursing, 26(23-24), 4335-43.



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