

Locked Medication Bedside Storage Units: Does Their Use Improve RN Satisfaction?



Background

- 27% of an RN's time is spend on medication related activities; 73% is spent on non-medication related activities.
- Approximately 36% of all errors occur during medication administration.
- Centralized administration system reliance contributes to medication errors related to interruptions & distractions.
- EMMC currently has a locked bedside medication cabinet policy.

Practice Change

 Implementation of locked bedside medication storage for patient specific medications.

Methods

- Speak with facilities and/or clinical engineering to determine best practice to initiate policy.
- Involve pharmacy to determine safe bedside medication storage.
- Collaborate with Nursing Supervisor and Clinical Educator to determine rooms for the pilot & gain approval for pre/post surveys.
- Collaboration with Clinical Educator to discuss avoiding errors & procedure at discharge.
- Distribute RN satisfaction surveys during team huddles.
- Implement bedside medication storage on Grant 6 Oncology using current PCD (35.029)

Measures and Results

Staff Survey

Ranking Questions:

- 1. How satisfied are you with the current policy for medication storage?
- During a 12-hour shift how many patients do you have on isolation precautions?
- How interested would you be to see the policy change to bedside medication storage?
- 4. How willing would you be to learn a new policy for bedside medication storage?

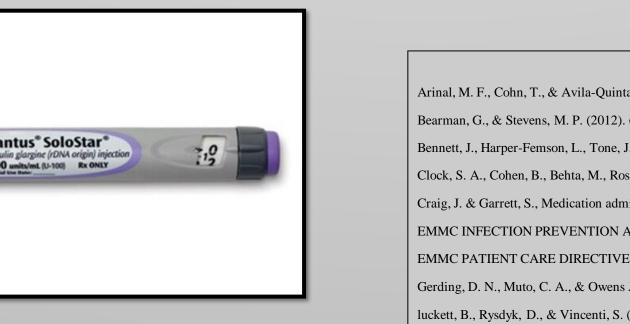
Short-answer Questions:

- 1. How can locked bedside medications improve nursing care?
- 2. What are some barriers of having locked bedside medications?
- 3. In your current practice what is one factor that you think can improve patient care during medication administration?
- 4. Do you believe that EMMC current practice for bedside medication storage is safe?
- 5. As a staff member at EMMC do you believe that bedside medication will improve patient satisfaction?

Results

 Results for implementation/ trial of bedside medication storage on grant 6 Oncology to be included once pre-survey questionnaires and post-survey questionnaires completed by staff.





http://www.allivet.com/images/product/large/7490.jpg

Arinal, M. F., Cohn, T., & Avila-Quintana, C. (2014). Evaluating the Impact of Medication Cabinets in Patients' Rooms on a Medical-Surgical Telemetry Unit. MEDSURG NURSING, 77-83, 119

Summary/Discussion

- IRB proposal approval process takes time and may delay trial of implementation.
- Implementation of current policy on Grant 6 Oncology requires changes to current medication administration of patient specific medications.
- Prior to initiation of the policy, locked bedside cabinets will be necessary.

Barriers

- Implementation of policy change.
- Securing locked bedside cabinets.
- Commitment from co-workers.



Conclusion

- Satisfaction survey results are as follows:
 - (In process)