

Strategies for improving
medication safety in hospitals:

The way forward

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- A health consumer's
perspective



- Dads experiences in the Bundaberg hospital with medication errors are numerous, mostly it is human error, Dad has numerous health problems, the main one being lung disease, he is also epileptic from a cyst he has on the brain, also thyroid trouble, irritable bowel syndrome, pulmonary edema, gastric reflux and others.
- Dad takes about 12 medications at breakfast and others at lunch and tea as well as nebulisers and is on home oxygen

- Mum is Dads carer and she keeps a very strict list of all medications, which is why when he goes into hospital she always supplies the list to the emergency dept doctor.
- Just about every time he goes into hospital, which is often as he gets chest infections and (2 hospital related bugs they cant seem to ever get rid of) they seem to stuff up his medications.

- The list of errors is numerous,
- from doctors in emergency not writing down medications properly off the list,
- to not writing them down at all
- or missing some,
- as an example mum was with him one night after he was admitted to the ward and she told me they had missed some of his medications and told her that they would try to get a doctor when they could to look at his chart

- I had to go up to the hospital and check his chart myself, his epilepsy and other medications were not even on the chart,
- so I demanded that they get someone to put them on immediately,
- they ended up bringing a doctor in who went through his list of Medications and added them in,
- I think there were 4 lots missing that time. Other incidences are on the ward, mum stays with dad at all mealtimes and late at night so that they don't make mistakes.

- Some incidences are nurses who don't read the chart properly and don't look at the second or third sheet of medications,
- another time the handover at the bedside was not done and the nurse went home and didn't give him his medication before she left,
- my mum queried that he didn't have them and they had to ring the nurse at home to check.
- other times they don't read the bottles properly and will give him one instead of two tablets

- once when mum didn't make it to the hospital in time for his lunch time tablets she found his epilum (epilepsy medication) on the floor under the bed.
- another time a nurse took dads chart and the nurse who came on duty next morning couldn't find it
- (he had missed medications that morning until mum came in and demanded that he have them and they went looking for his chart and it was hours before he got them.

- Just about every time we have a medication stuff up I report it (not the Person responsible) so that they can try and fix the problems,
- I have had meetings with the Director of Medical Services, the Director of Nursing, the Pharmacy, the Liaison and sometimes all at the same time,
- I get assurances that they will make sure bed handover is done,
- they will again tell the nurses to be vigilant and the doctors to make sure that they look at the medications that dad has been on for years and the new ones that are on mums list.
- Sometimes nurses couldn't read the doctors notes or mistook the milligrams etc.

- Nothing seems to help,
- at one time I was told that the nurses were making mistakes because they were nervous because he was my father.
- That made me mad.
- I have probably made a dozen complaints and had half a dozen meetings.

- I don't have all the answers although
- I feel that the problems are numerous and are the biggest adverse events that occur in our hospitals,
- the one thing that would partly help my dad is electronic records so the GP and the Hospital are up to date with what he is taking.
- I would like to know what the rate of incidents were when there was a medications nurse that used to go around with the trolley and give medications out?

- There is also the problem that patients who have to take medications at certain times of the day don't get their medications until the nurse on duty is able,
- and that can vary to hours, mum has been at the hospital till 10pm at night waiting for his teatime tablets, and she is his carer and if he was home he would have had them on time.
- I have been told that giving medication is part of all nurses training so they cannot have one medication nurse with trolley.

The pharmacy also put in place that
they would check medications daily
on the wards,
but
it doesn't get done all the time
and
never on the weekends...

- The other problem I see all the time when I am in emergency with dad is when people come in and the doctors don't know what medications they are on,
- some people don't know all the names or milligrams,
- some are elderly and if brought in in an ambulance the ambulance officers sometimes try to gather the information or take the tablets in

- Once I asked my doctor how hard it would be to give patients a printout of medications every time they go to the doctor so they can carry it in their bag or wallet,
- the doctor said it was simple
- and printed mine out,
- this is something that I tried to take up with my local health council,
- it needs public education to do,
- I believe it should be compulsory at every visit to a GP and Hospital.

- Mum and I spent a lot of time trying to address issues and in *a no blame way*,
- mum has a good relationship with the nursing staff
- she is always there to look after dad's needs, feeding, showering, emptying his urine bottles and often helps other patients.

But

at the end of the day human error is
mostly to blame.

I hope I have helped.

Cheers

Dear Mary

The only point you could add it to your presentation is

- With the medications on the counter, it is preferably to have these medicines labelled in different languages (at least the main reason for the medicine) ...
- However, it would be good if we could apply these rules on the descriptive ones.
- by this way, we would be helping the patient especially the non English background to know (which is which) the right medicine he needs especially if he/she has a lot of medications in his cabinet.