Improving Medication Education for Patients Applying "SAID the MED"

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Introduction

Errors with prescribed medications may occur when the medications are prescribed, dispensed and/or administered to the patient within an inpatient or outpatient setting, and self-administered by the patient at home. The impact of medication errors across all care settings is significant. The National Institute of Health cites that 7 million patients are impacted annually by preventable medication errors at a cost of approximately $21 billion dollars (National Institute of Health (NIH), 2018). During patient self-administration of medications, medication errors occur with approximately 7,000 deaths annually, and a cost of approximately 300 billion dollars (Flynn et al., 2016). The Institute for Healthcare Improvement suggests a Model for Improvement that can support healthcare providers to lead changes that can result in improvements in quality and safety for patients (Institute for Healthcare Improvement (IHI), 2018), and can be applied for changes that would assure medication safety and accuracy as patients transition from inpatient to a home setting. One of the model’s first questions is, “What changes can we make that will result in improvement?” According to research by Ahrens & Wirges (2013), patients often lack knowledge regarding their prescribed medications, therefore, medication errors occur when self-administering at home.

Problem

While participating in clinical experiences on a medical-surgical care unit within a metro-Chicago hospital, a student group was simultaneously enrolled in a senior level course focused on leadership development. Nurses can lead themselves, colleagues, and patients by proactively seeking opportunities to improve quality and safety within their healthcare setting (IHI, 2018). The student group collaborated with the clinical unit educator to target an area of quality and safety improvement for patients on the unit. The educator identified that patient education during medication administration required improvement. Students collaborated with each other, faculty, the clinical educator and unit staff to lead a Quality Improvement initiative focused on medication education for patients.

Purpose

To educate patients regarding medication dosage, frequency, timing and duration during medication administration resulting in improved patient safety. Patient education occurring with each medication administered during the inpatient stay can support safety for patients who will be self-administering medications once discharged home.

Methods

A quality improvement project was initiated with an initial literature search focused on patient education during medication administration. An evidence-based patient education approach demonstrating improved patient outcomes was identified. The “SAID the MED” approach includes the medication name, side effects, action of the medication, indication for use, and the dose required (Woolley, 2015). A visual presentation was developed, and presented, to educate the staff nurses on implementing the approach...
during medication administration. A pocket sized reference with an acronym reminder was designed and made available to the unit for use by staff during medication administration.

Findings

Feedback from the nursing staff and unit manager was solicited following the visual presentation. Attendees verbally stated that they were unaware of evidence-based education approaches, such as “SAID the MED”, being applied during medication administration, and now recognized that applying such an approach would contribute to improved patient safety within the hospital setting and post-discharge.

The student group verbalized an increased awareness of their role as student nurses, and future nurses to identify opportunities to improve quality and safety for their patients. The group identified that the project empowered them to collaborate, communicate, and come together as a team focused on a patient-centered goal. The project heightened their awareness of their roles as leaders and team members in improving patient outcomes in the inpatient and potentially the home settings.

Recommendation

A more extensive literature review may identify additional patient education approaches that could be presented to the unit, and lead to a consistent approach on the unit. Additional research is needed to determine an education approach that would improve patient outcomes in diverse hospital settings and patient populations.

Title:
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References:


Neiman, A. B., Ruppar, T., Ho, M., Garber, L., Weidle, P. J., Hong, Y., George, M. G., Thorpe, P.G. (2017). CDC grand rounds: Improving medication adherence for chronic disease management-


**Abstract Summary:**
Errors with prescribed medications occur when the medications are prescribed, dispensed, and administered to patients. A quality improvement project focusing on patient education during medication administration was initiated, and an evidence-based patient education approach was identified. A visual presentation, and handout, were developed applying the “SAID the MED” approach.

**Content Outline:**

I) Introduction
- Background

II) Problem
- Medication Administration Safety

III) Purpose
- Improving Medication Administration Safety

IV) Methods
- Review of Literature
- Identification of Evidence Based Approach
- Visual Presentation
- Pocket Reference

V) Findings
- Staff and Student Feedback

VI) Recommendations
- Future Opportunities

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Author Summary: Former student nurse of the Baccalaureate nursing program at Lewis University. Initiated and researched a Quality Improvement project on improving medication education to patients in the hospital setting that can also be used post-discharge. Presented this topic at Lewis University Celebration of Scholarship.

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