



Using a multi-strategy to improve the familiarity with drugs position in the ambulance for nurses



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Background

According to Taiwan Joint Commission on Hospital Accreditation (JCT), the hospital evaluation benchmark (2.3.13) on 2018 pointed out that the first-aid measures for sudden emergency patients in the hospital were implemented. Therefore, all medical institutions in Taiwan have first aid. Most of the carts are locked with a seal lock. In addition to the emergency use for sudden critical patients, it can also reduce the frequency and time for each shift of the nurses. However, the physician reported that the nurses were unfamiliar with the location of the drugs in the ambulance, leading to an extension of the time taken for taking the drugs during the emergency.

Purpose

Through questionnaire survey, we analyzed the understanding of the correct position of the drugs in the ambulance for the nurses. Thereafter, base on the reasons for why the nurses were not familiar with the position of the drugs, we made the improvement strategy to facilitate the familiarity with the location of the drugs in the ambulance for the nurses.

Keyword

multi- strategy, drugs position, ambulance

Methods

During July 23th, 2018 to July 27th, 2018, we used the self-made “medical location map of ambulance” questionnaire to investigate the understanding of correct position of the drugs in the ambulance and the causes for unfamiliarity with the placement of the drugs for all nurses (22 persons) in our unit. We found that the correct rate of understanding the drug placement position in the ambulance by impression for nurses was only 22.7% for scoring 80 before opening the ambulance. Therefore, we summarized the causes for their unfamiliarity with the position of the drugs in the ambulance as follows: 1. The nurses couldn't see the drugs in the locked ambulance(95.5%). 2. The nurses could only read the trade but not the generic names of the drugs (Our computer system showed the generic names.) (81.8%). 3. The first-aid training every 6 months does not include taking emergency medicine (22.7%). Accordingly, we made the improvement strategy: 1. Making a drug position comparison chart. 2. Inviting the pharmacist to record the correct pronunciation for the generic and the trade names of the drugs. 3. Regularly monitoring the situational first-aid training including the familiarity with taking the drugs.



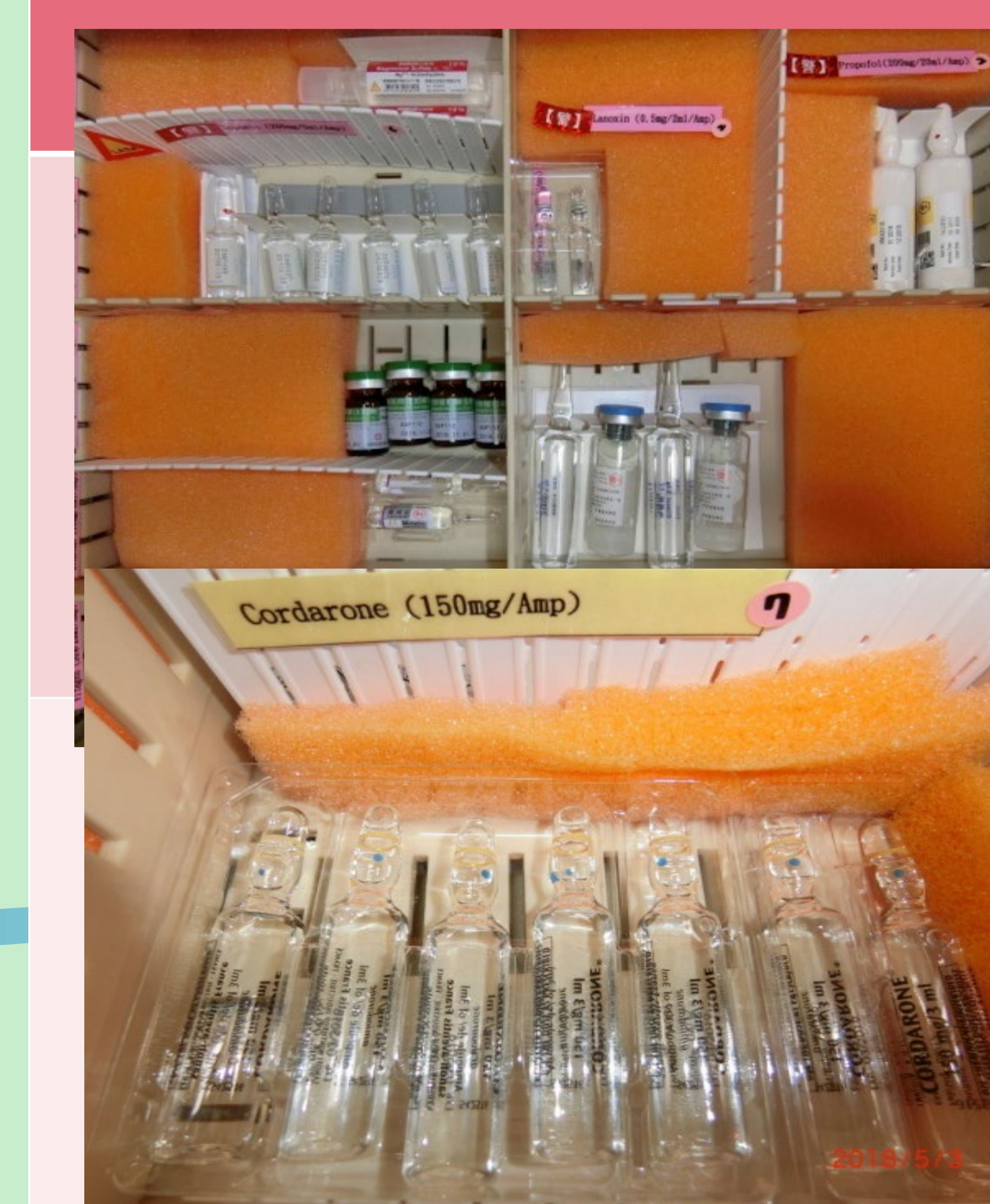
Results

After implementing the improvement strategy, we investigate the accuracy of understanding the position of the drugs in the ambulance during July 23th, 2018 to July 27th, 2018. The correctness for 80 scores was 80%, 77.3% improvement than before.

Conclusion

This case used a multi-strategy to effectively improve the correctness of the nurses' placement of emergency medicines, and at the same time promote the strategy to the wards of the hospital. Thereby, it improved not only the familiarity with the emergency drugs for nurses but also the timeliness of the first-aid process.

Before improvement



After improvement

