



Collaboration is key to Medication Safety

Collaboration with our nursing colleagues is key for medication safety



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Hospital pharmacy in Australia has changed over the decades. Early days consisted of compounding pills and mixtures in a basement, with nursing staff regarding the pharmacist as the medication supplier, with prescription checks being 'policing'. The 'clinical pharmacy revolution' in the 1980s resulted in pharmacists venturing into wards, becoming more visible to nursing staff. However, each discipline continued working within its own clinical 'silo'. Now with pharmacists an integral part of multidisciplinary teams, medication safety pharmacists are in a position to facilitate nursing and pharmacist collaboration. Exploring several key areas, this article shares insights from our nursing colleagues, underlining the importance of collaboration to support safe medication use for our patients

Targeting high-risk medications

Stewardship teams for high-risk medications have medical, pharmacist, and nursing clinical specialists, with expertise in conducting audits and research, practical hands-on experience, and translating this knowledge to ensure best practice. Examples include:

- improving timely response to sepsis with nurses and pharmacists on the sepsis team, ensuring antibiotics are administered on time
- surgical pharmacists working with nursing staff to ensure patients are discharged with analgesic plans
- diabetes pharmacist working with diabetes educators to ensure safer administration of insulin in patients with type 1 diabetes.

Emergency Department (ED) Nurse Manager Quality and Risk: "Pharmacists partner with us in the care of our patients and are instrumental in some of our critical care cohorts including stroke, sepsis, resus and trauma."

Quality and Clinical Risk Manager: "Nurses prepare, administer, and monitor the effectiveness of medications many times per day. Working collaboratively with pharmacy ensures that we do it safely and efficiently."

Transitions of care

Transitions of care have been highlighted as a key patient safety risk.¹ Primary care outreach services are traditionally nurse led. With an increase in elderly patients, people with mental health issues and/or chronic conditions under our care, nurse- pharmacist collaborations have developed to support patients at home, decreasing the risk of hospital re-admission. Identifying patients at high risk during a home visit assists the pharmacist to target medication issues, such as poly-medicine use or the need for medication reconciliation or deprescribing. In turn, pharmacists gain insights into gaps in medication access and the degree of patient understanding of their medication management post discharge.

Aged Care Nurse Manager: "Our pharmacists are so pivotal.... they liaise with external facilities to assist with discharge planning either to home.... or community RACF (residential aged care facility)"

Times of change

Nurses are the group most involved in administering medications, with pharmacists recognised as the formulary content experts. As such, partnership with nurses is essential for effective change management. The conversion from paper-based to electronic medication management systems over the last decade is one such example of how essential collaborative partnership can be to decrease risk of error in times of significant workflow changes.

Quality Operations Manager: "Pharmacists provide expertise on medication management. Collaboration is paramount to reduce the risk of medication errors".

Team spirit

However, when asked about what impacts medication safety most, is it technology that springs to mind, or the collaborations within teams? Informal 'down time' with nursing colleagues provides opportunities for information sharing, discussion of shared goals, and reconciling medication safety issues. Informal shared learning between pharmacist and nurse improves communication which can be drawn on when most needed at the bedside. Enhanced professional working relationships with nursing staff brings us closer to the ultimate medication safety goal: providing quality care to patients.

ED Nurse Manager: "The relationship that we have with our pharmacy colleagues in ED is one that we treasure. I have come to refer to the team as the 'Pharmaly'."

From informal conversations and moments of team building to transitions of care and critical high-risk medication management, interdisciplinary collaboration between pharmacists and our nursing colleagues is key to medication safety and ensuring the best possible care for our patients.

References

1. World Health Organization (WHO). *Transitions of care: technical series on safer primary care*. Geneva: WHO; 2016. Available from <https://iris.who.int/bitstream/handle/10665/252272/9789241511599-eng.pdf?sequence=1&isAllowed=y>.