SBH Leading the Way with KBMA for Patient Safety

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Background
Compliance with KBMA utilization was below the SBH standard and jeopardized patient safety. In accordance with the Agency for Healthcare Research and Quality and the National Institute for Health, multidisciplinary teams have described how the utilization of barcode medication administration reduces medication errors and improves patient safety exponentially. The Joint Commission has identified medication safety as one of the 2022 National Patient Safety Goals for utilizing medicines safely and identifying patients correctly.

Patient Safety is one of the highest priorities for SBH. Ensuring proper patient identification and medication administration.

Multidisciplinary team supported ICU including IT, Nursing Directors, VP of Nursing Quality and Informatics.

Aim
To ensure the safety of medication delivery to our patients by improving the utilization of Knowledge Based Medication Administration (KBMA) to over 80% within the next 3 months.

Methodology
Systematic approach utilizing both quantitative and qualitative initiatives to identify opportunities for improvement.

Incorporating a multidisciplinary team to focus on operations, equipment needs and educational opportunities.

Plan
A multidisciplinary committee was established to review the KBMA process and current compliance with the current policy.

Information Technology completed rounds related to equipment availability and provided additional mobile carts.

Reeducation and accountability was performed for RN’s.

Updated to the KBMA personnel list assigned to the different units.

Provide daily reviews of KBMA status for each staff member and review of medications scanned vs. not scanned.

Gemba walks were completed to identify opportunities and tasks were assigned to appropriate team leads.

Do
RN education and huddles were completed for KBMA utilization.

RN’s are held accountable for utilization of KBMA for medication administration.

Literature review completed related to improved patient safety for KBMA utilization in Critical Care Settings.

IT performs multiple daily rounds in ICU to correct any issues related to the mobile cart.

Additional Mobile carts were obtained for ICU utilization.

Study
During the study, there was significant improvement in the utilization of KBMA within the ICU and other units that improved overall compliance of KBMA.

Routine meetings with the RN’s and review of each RN’s compliance.

Routine meetings with IT related to any mobile cart issues.

Utilization of additional Mobile Carts improved compliance and availability of resources.

References


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