

Title: Risk of prescribing processes in a long term psychiatric setting

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Abstract:

Background Prescribing for in-patients at psychiatric institutions is extremely poor. Methods Direct observational studies during 46 patient ward rounds were undertaken using a validated checklist. A questionnaire was disseminated to 14 healthcare professionals, namely physicians, pharmacists and nurses practising at the psychiatric institution to evaluate the root causes contributing to prescribing errors and put forward the appropriate corrective actions. Results During the observational study, treatment charts were consulted in 36 of the rounds. Legibility of both treatment charts and drug histories was identified in 37 cases and only 9 treatment charts were filled in with the INN. For the questionnaire, the most commonly thought root causes of drug prescribing errors were unclear communication between healthcare team members (7), lack of personnel (6) and cluttered drug treatment charts (6). The best thought solutions include chart review at the end of ward round (4), reducing disturbances (5) and increasing personnel (6). Conclusion The study sheds light on the need for pharmacists to propose an updated version of the drug treatment chart so as to reduce clutter. Communication with other health care professionals on the need to consult treatment charts and drug histories during ward rounds and subsequent prescribing can be co-ordinated by the pharmacy department. References Nirodi P, Mitchell A.J. The quality of psychotropic drug prescribing in patients in psychiatric units for the elderly. *Aging and Mental Health* 2002; 6(2):191-6.