Resuscitation Medication Safety (ReMS) Initiative Type System Improvement Status Deliver Added 10 May 2021 Last updated 06 April 2024 **URL** https://clinicalexcellence.qld.gov.au/improvement-exchange/resuscitation-medication-safety-rems

Summary

Resuscitation Medication Safety (ReMS) is a visual prompt for organising and classifying resuscitation drugs to help reduce cognitive load on staff. It includes two plastic benchtop boards (for intubation and cardiac arrest) to allow both physical placement of drugs and use of whiteboard markers to indicate dosages and other important information.

Key dates
Mar 2021
Implementation sites
Available to all Queensland Health Emergency Departments
Partnerships
Queensland Emergency Department Strategic Advisory Panel (QEDSAP), Logan Hospital Emergency Department, Metro South HHS
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Aim
To streamline processes and improve medication safety during intubation and cardiac arrest.

Benefits

- reduced cognitive load on clinicians
- · decreased risk of medication errors

Background

The ReMS initiative leads are Jo Farrell, Clinical Nurse Consultant and Lisa Lucas, Nurse Educator at Logan Hospital, Metro South Health. ReMS was developed in Logan Hospital Emergency Department to ensure timely, accurate and safe preparation of resuscitation medications. The ReMS boards incorporate the most used medications and align with ANZCOR Guidelines, the National Standard for User-applied Labelling of Injectable Medicines, Fluids and Lines, the Standardised and Safe Intubation Package (SSIP) and the Children's Resuscitation Emergency Drug Dosage Guide (CREDD).

Used in conjunction with SSIP (Standardised and Safe Intubation Package) resources, ReMS facilitates a standardised approach both within departments and across facilities. The resources may also be useful in smaller departments which face the additional challenges of high staff rotation, smaller clinical teams and less frequent intubations.

Solutions Implemented

- ReMS Intubation board
- ReMS Cardiac Arrest board

Implementation will include appropriate staff education. An Implementation Guide has been made available.

Evaluation and Results

A post-implementation audit at the pilot site showed no reportable incidents in the resuscitation room relating to drug preparation or administration in the two months following implementation. Evaluation of ReMS under the PROV-ED Project will involve pre- and post-implementation staff surveys to assess staff confidence and perceived helpfulness of the ReMS boards.

Lessons Learnt

Simple visual prompts provided for use during high intensity procedures can help to streamline processes and reduce cognitive load on clinicians, thereby reducing the risk of errors.

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