



Enhancing Patient Safety by Improving Monitoring and Documentation of Opioid Side Effects for Inpatients on Opioid Infusions

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INTRODUCTION

Opioid infusions are commonly used in palliative care to control distressing symptoms such as pain or breathlessness. Opioids commonly used are Morphine, Fentanyl and Oxycodone.

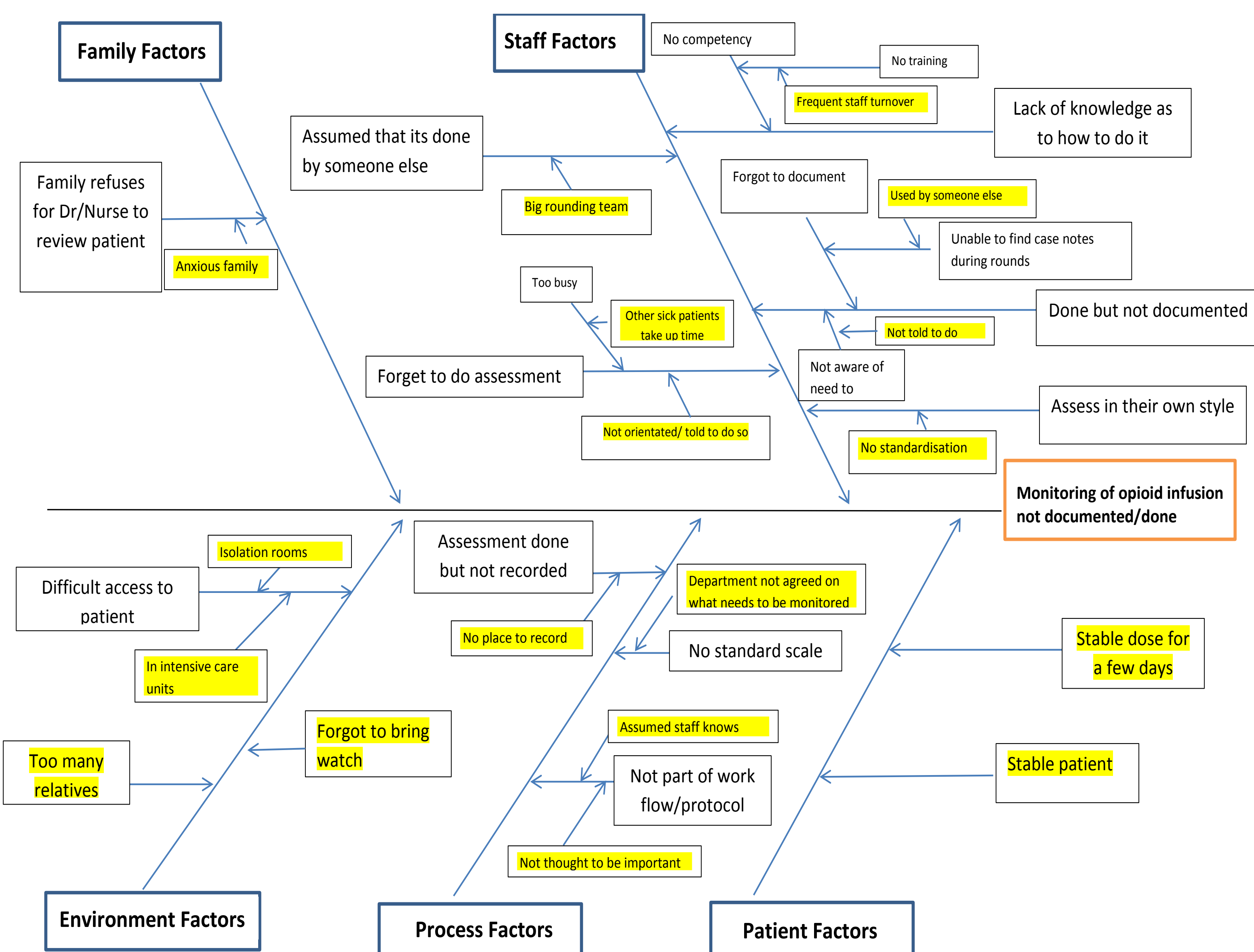
In the process of titrating opioid infusions, it is important to monitor closely for side effects such as sedation or respiratory depression. However, the monitoring of opioid side effects is not always consistent.

OBJECTIVE

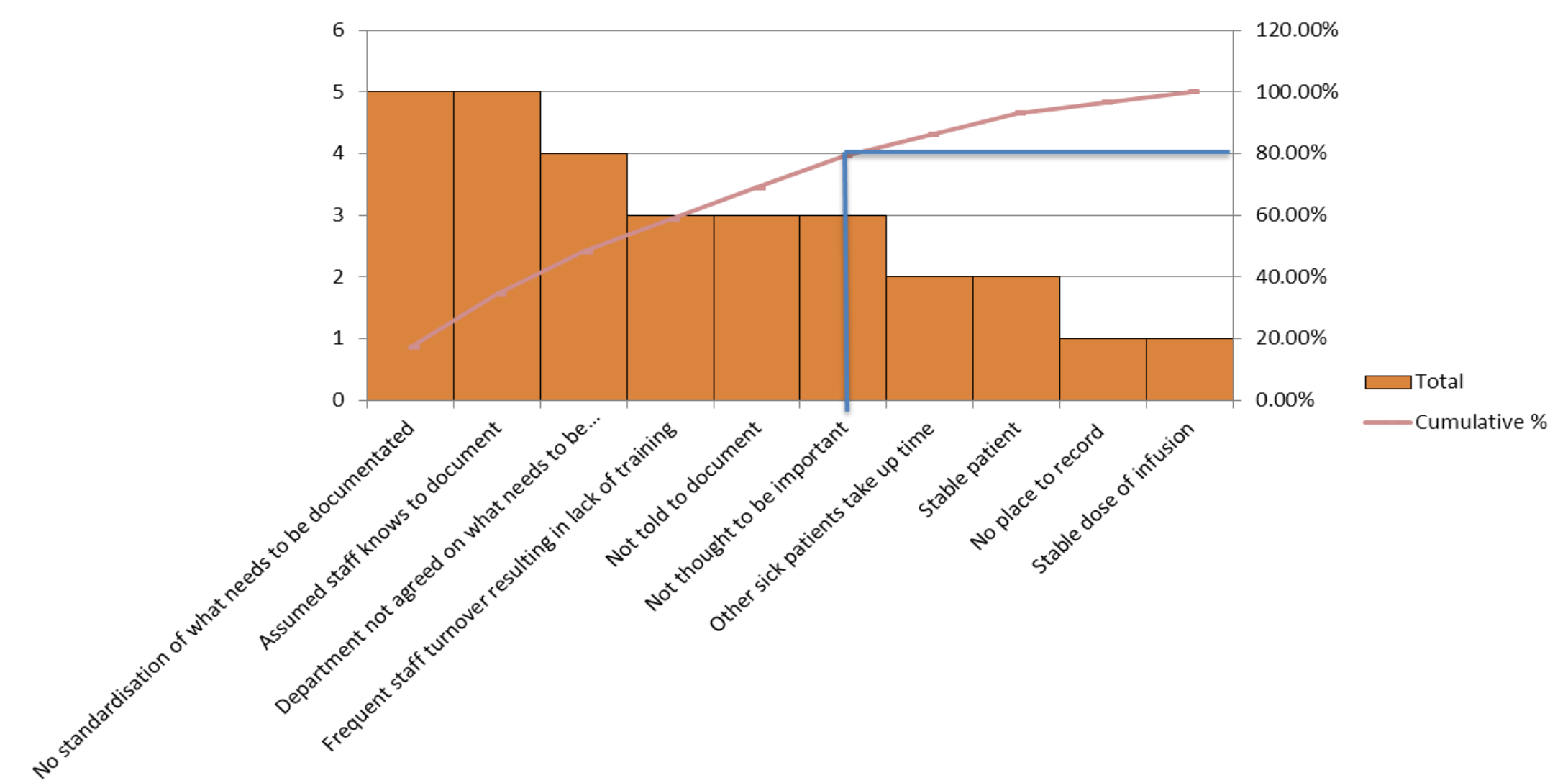
Our project aimed to improve the monitoring and documentation of opioid side effects in patients on opioid infusions in a hospital setting. We aimed to increase the documentation of respiratory rate, level of sedation and presence of myoclonic jerks for patients requiring opioid infusions from 10.5% to 100%.

METHODOLOGY

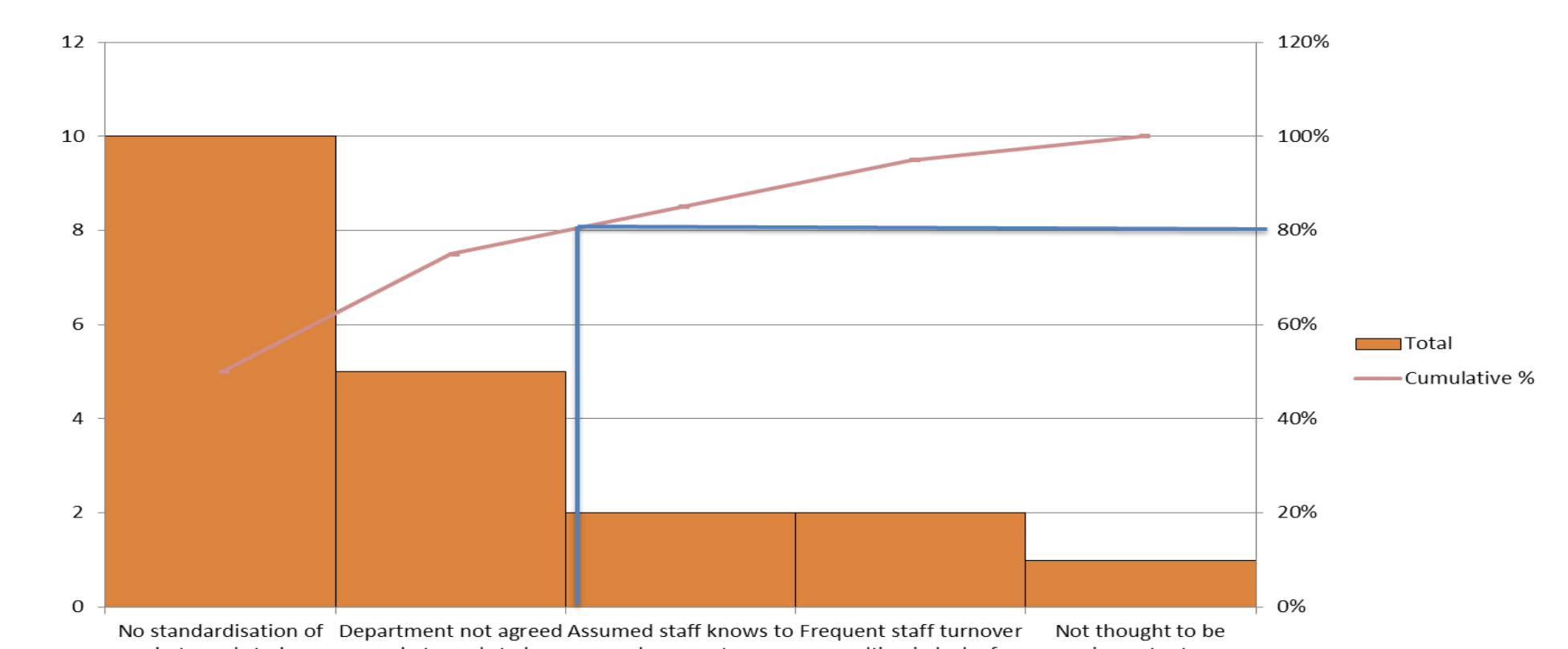
Cause & Effect Diagram



Pareto Chart – Round 1



Pareto Chart – Round 2



After analyzing the root causes of the problem using a Cause and Effect Diagram and Pareto Charts, we found 3 main factors that contributed to the low documentation rate for the opioid side effects :

1. No standardization of what needs to be monitored: There was no protocol for the documentation of side effects for patients on opioid infusions.
2. There was no agreement on the parameters that were required to be monitored when a patient is on opioid infusion.
3. Doctors and nurses may have assessed for opioid side effects but not documented them.

RISK MITIGATION STRATEGIES



PDSA 1

The first PDSA cycle focused on educating the doctors and nurses in the department on the side effects which should be monitored and documented. Regular reminders via Whatsapp and emails were sent to department doctors and nurses.

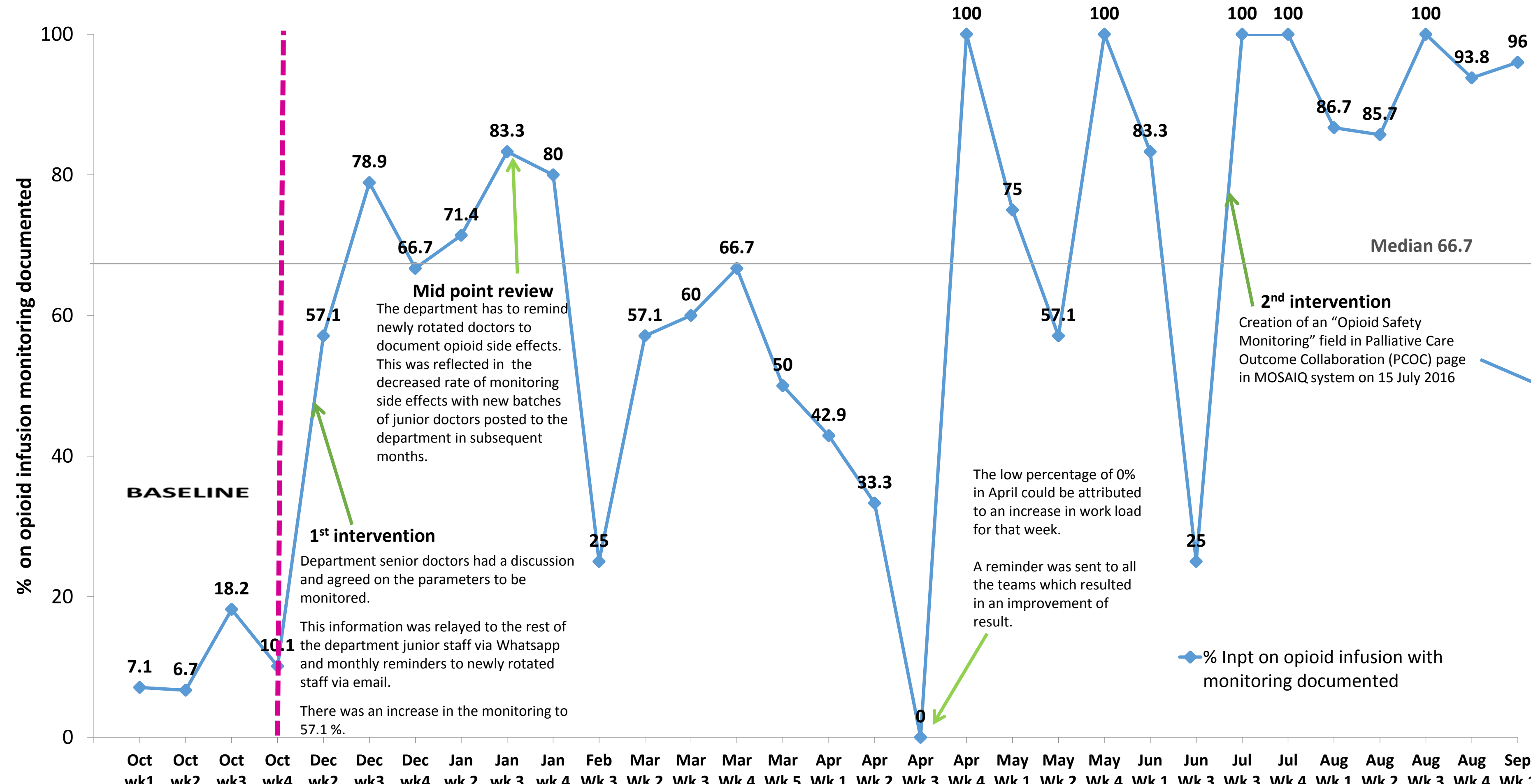


PDSA 2

The second PDSA cycle incorporated an “Opioid Safety Monitoring” field in the electronic clinical system. Regular audits of electronic case notes were carried out to ensure compliance.

RESULTS

% Inpatients on opioid infusion with monitoring documented



The percentage of patients on opioid infusions who had documentation of opioid side effects increased from a baseline of 10.5% to 72.9 % after the first PDSA cycle. After the second PDSA, the compliance rate increased further to 92.4% .

The screenshot shows the MOSAIC system interface for documenting opioid side effects. It includes a 'CPM Clinical Assessment Chart' with various fields for recording symptoms and signs, such as Pain, Agitation/Confusion, Anxiety, and others.

Fields for documenting opioid side effects in the MOSAIC system

CONCLUSION

By introducing a standard protocol for monitoring of opioid side effects and creating electronic fields within the IT system for documentation, we demonstrated sustainable improvements in monitoring and documentation of opioid side effects for inpatients on opioid infusions.

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