MEDICINES INFORMATION LEAFLETS – A QUALITY IMPROVEMENT PROJECT

Dr. Anastasia Posner¹, Dr. Philip Cowie¹, Dr. Viktorija Kaminskaite¹, Prof. James Fullerton¹

Oxford University Hospitals NHS Foundation Trust

Oxford University Hospitals

NHS Foundation Trust

BACKGROUND

- Clinical evidence-based guidelines improve patient care and outcomes (Woolf et al. 1999) and serve as educational resources (Corriere et al. 2014).
- Oxford University Hospitals' (OUH) 'Medicines Information Leaflets' (MILs) are local guidelines created to facilitate standardised, safe and cost-effective practice.
- User feedback on accessibility, content and topic-selection has never been sought.

METHODS

- Project registration March 2022 on OUH Ulysses system.
- ➤ A web-based survey canvassed opinions of doctors and pharmacists.
- MIL topic-specific and overall access analysed.
- Outcomes presented to the Medicines Management and Therapeutics Committee with improvements iteratively developed using the Shewhart and Deming model (figure 1).

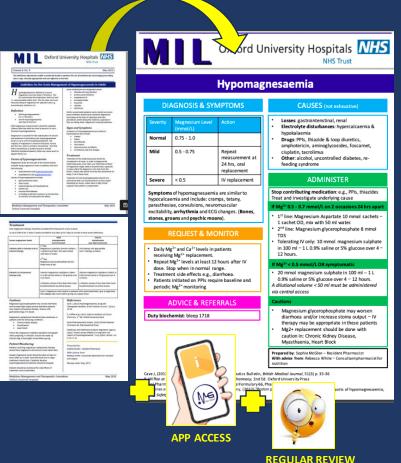


Figure 1: Summary of proposed improvements – format, access and governance

RESULTS

- ➤ Eighty-one questionnaire responses were received (64% doctor, 36% pharmacist).
- > 50% reported weekly MILs access approximately 310 views/week.
- Preference for app-based access to MILs equated to 49% of respondents.
- ➤ Highly accessed topics (~ 60% of total views) included anticoagulation and electrolyte disturbances.
- Over half of MILs were not reviewed within the approved timeframe.

KEY MESSAGES

- High access rates should not be used to measure the quality of clinical guidelines.
- Proactive assessment of end-user feedback can improve accessibility, topic-relevance, and content through engagement with senior Trust management.
- Future aims include evaluation of rapidaccess MILs by clinicians and development of an app-based platform.

CONTACT DETAILS

For any queries, please email anastasia.posner@ouh.nhs.uk

REFERENCES

Corriere, M.D., Minang, L.B., Sisson, S.D. et al. The use of clinical guidelines highlights ongoing educational gaps in physiciars' knowledge and decision making related to diabetes. BMC Med Educ 14, 186 (2014). https://doi.org/10.1186/1.472-6920-14-196

Woolf SH, Grol R, Hutchinson A, Eccles M, Grimshaw J. Clinical guidelines: potential benefits, limitations, and harms of clinical guidelines. BMJ. 1999 Feb 20;318(7182):527-30. doi: 10.1136/bmj.318.7182.527. PMID: 10024268; PMCID: PMC111497 3.