



OPTIMISING MEDICATION MANAGEMENT IN OPERATING THEATRES: *Is it as simple as A.D.C?*

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Introduction

In October 2020, RBWH implemented Automated Drug Cabinets (ADCs) into 22 operating theatres. ADCs replaced manual medication management processes for storing, distributing and recording medication use. ACHS has reported that further studies evaluating automated systems are required¹. We aimed to evaluate clinical theatre staff's perceptions of the safety, efficiency and usability of ADCs.

Methods

Perceptions were evaluated using anonymous staff survey 3-months after the ADCs were introduced, with answers provided on 5-point Likert scales or free text comments. Quantitative responses were collated and presented as percentage of responses in frequency histograms. Thematical analysis of the free text comments was used to identify major qualitative concepts and themes.



Results

103 staff responded to the survey. Overall, respondents perceived ADCs had a positive impact on medication management processes within OT, with biggest benefits noted in efficiency gains associated with electronic recording of S8/DS4 transactions. Table 1 presents survey responses to medication governance, usability and medication safety by staff role.

% of respondents in Agreement with statement	Anaesthetist (N=46)	AHP (N=23)	PACU Nurse (N=16)	OR Nurse (N=18)
ADCs improved medication governance	87	95.7	93.4	72.2
ADCs improved usability of manual (n=%)	82.6	65.2	93.8	66.7
ADCs improved medication safety (n=%)	63	82.6	81.3	50

Table 1: Key Survey Responses According to Professional Role

43 out of 46 anaesthetists (93.5%) preferred the new ADC system compared to the old medication management system. All PACU and OR Nurse perceived the ADCs improved S8 tracking and reduced audit requirements. 95.7% of AHPs perceived greater preparation efficiency with the ADC.

Thematic analysis of 77 factors showed that "active learning" and hands-on training were the most important ways to acquire skills in operating the ADCs.

1. Australian Government. The National Strategy for Quality Use of Medicines: Specific Resources and Initiatives. 2002