



# **GOOD MEDICATION SAFETY PRACTICES IN EUROPE**

## **COMPENDIUM II**

### **MEDICATION SAFETY RECOMMENDATION**

*Transferability of good practices*

Medication safety is a major element of patient safety. The implementation of good practices is one method to raise consciousness and to improve medication safety. In this compendium the recommendations concern the transferability and the implementation of good practices from one member state to another. The EUNetPaS implementation showed that it is possible to transfer selected medication safety good practices in hospitals from one Member State to another. It also showed that hospitals need concrete support to implement new practices.

The following recommendations are built on the results of the implementation as well as of the entire Work Package 4 process.

### **Good practices identification at European, national and regional levels**

#### **1. All good practices collected in EUNetPaS should be taken into consideration**

As decided by EUNetPaS partners, national contact points should introduce in the database collected good practices, all or a selection of them. The fact that a good practice was not selected for the implementation does not reduce its value; it was just a case of not fitting the selection criteria.

#### **2. Identification of good practices in hospitals at a European level should continue**

This process of identifying good practices in a European context is a fruitful exercise. It could certainly benefit from a more systematic and permanent approach built on strong national or regional structures and the involvement of healthcare professionals and other stakeholders.

#### **3. Identification of good practices at national/regional level should be promoted**

The language barrier and cost of translation should not be under-estimated; neither should differences in organisation of healthcare services. There is much potential and interest in building up identification of good practices at local, regional and national level.

### **Medication safety issues identification at hospital level**

#### **4. Identification of the medication safety issues should be the first step before taking any decision to select and implement a good practice**

A wrong or partial identification of the issue would later jeopardize the implementation. The hospitals should first define the area of safety problem(s) and then find the most effective practice, using available methodology and taking into account local, regional and national levels.

#### **5. Evidence based information on the scale of the issue is a strong added value in the identification processes.**

This is certainly not enough but it is very valuable for engaging healthcare professionals to commit themselves in the implementation.

**6. This identification of areas for improvement should be the first step to involve professionals in the process**

Healthcare professionals should be involved in medication safety initiatives from the outset particularly in relation to identifying the exact nature and scale of the medication safety issue to be addressed by a medication safety initiative.

### **Decision to implement at hospital level**

**7. Matching the issue with the good practice will benefit from evidence based information on the impact the good practice had**

Evidence is an important element of the process of selecting a good practice for implementation.

**8. Knowledge on challenges other hospitals faced with the same kind of practice is valuable**

All elements explaining the difficulties encountered and lessons learned in implementing the good practice will be useful.

**9. Implementing a good practice requires the identification of the resources needed**

Any change requires resources, and in particular human resources. This should be clear in the presentation of the good practice, to help the implementing hospital preparing itself. Special barriers and challenges have to be considered.

**10. Starting with one good practice seems to be wise**

Hospitals embarking on implementation of more than one good practice in parallel encountered difficulties in managing them.

**11. To involve all professionals at this stage is also crucial**

The implementation should not be perceived as a top/down decision.

**12. Implementation benefits from building on existing tools**

National guidelines and safety projects can be powerful facilitators.

### **Implementation process at hospital level**

**13. Multidisciplinary cooperation between health professionals when implementing and planning the process is crucial**

The fact that this is obvious should not prevent it from being taken into consideration.

**14. Detailed concept for implementation and management is important**

It is important to decide which activities are implemented and by whom.

**15. A team should be built at unit level**

Having a team and knowledge at unit level that supports the implementation is a success factor.

**16. Involving patients, relatives and carers in the process might be very efficient**

Some good practices require feedback, participation or even empowerment of patients, relatives or carers.

**17. Good practice should be adapted to the cultural and functional context of each hospital**

The good practice is rarely implemented entirely as it had been in another site. It always needs to be adapted taking into account the local needs, professional cultures and processes.

**18. Evaluation tools should be built as core components of the implementation process**

Evaluation should be based on systematic evaluation tools. Evaluation can be facilitated by the use of IT in order not to take time away from patient care activities.