

Obstetric Assist Pharm-Assist

Innovative Solutions during Surges in Workforce Shortage and Demand

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Introduction

In January 2023, the Obstetric Assist Pharmacist role was established to support midwifery staff with medication administration and handling procedures. The intent of this role was to assist with medication procedures and save time for midwifery care.

Current Roles of the Obstetric Assist Pharmacist

- Daily S4R and S8 checks
- S4R and S8 administration, 2nd person check
- Independent 2nd check of medication administration
- Non-impresst S4R/S8 orders processed via Redcap
- CIVAS orders for neonates
- Provision of discharge medications to patients
- Weekly S4R/S8 impresst delivery

Aim

To determine the impact of the Obstetric Assist Pharmacist on the time saved by assisting the midwives with their regular duties on two obstetric wards at King Edward Memorial Hospital (KEMH).

Methods

Over the period of March 2023, a time in motion study was conducted to evaluate the time taken per activity and how this would subsequently affect time saved per week based on average time and number of occurrences over a week. The study was conducted across the two obstetric wards at KEMH. A feedback survey was collected over a 2-week period to gauge midwifery response regarding the role.

Results

A total of 2,371.2 midwifery staffing minutes (39.52 hours) were saved over a period of 1 week, equating to above 1.0 FTE.

S4R and S8 daily checks were completed during double staffing periods, which allowed for one coordinating midwife to be available on the ward to attend to patient needs. The counts on average took fifty minutes to complete on both obstetric wards.

With S4R and S8 medications requiring a second check prior to administration, being available on the ward allowed for patients to receive timely access to their pain medications. This also freed up another midwife's time to attend to other patient's duties.

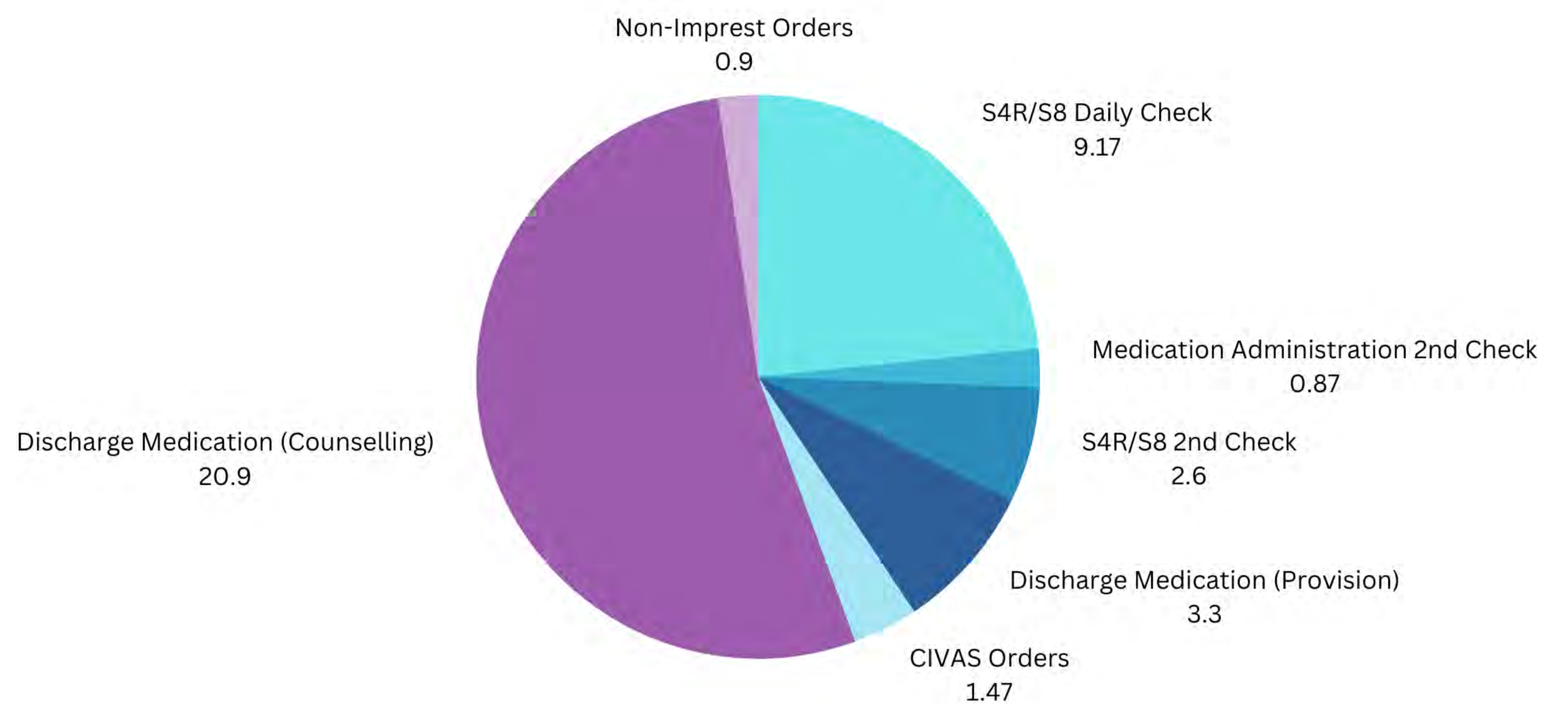
A total of 12 responses from the feedback survey was received. Overall, the service received a 4.5 star rating for the role provided by the pharmacist.

83.3% of respondents agreed that it is useful to have a pharmacist complete the daily S4R and S8 checks.

91.7% of respondents believed they would have more time without having to check the daily balances, corresponding with 83.3% recognizing that checking S4R and S8 medications is a time consuming activity.

91.7% of respondents agreed that it is very useful to have a pharmacist on the wards to assist with medication management and queries.

Time saved per week (hours)



The Obstetric Assist Pharmacist provided assistance in ordering ad-hoc and non-impresst S4R and S8 medications, requesting returns as well as ordering CIVAS medications for the neonates. These requests further allowed a midwife to attend to other duties on the ward.

Being present on the ward to provide discharge counselling and medications to the patients assisted midwives in ensuring their patients physically received their discharge medications and were confident with the medicines on discharge. The timeliness of the discharge process was improved, and this therefore fast-tracked discharges, resulting in beds being available for new admissions.

Conclusion

Overall activity and feedback has shown value of the obstetric FTE pharmacist in assisting midwifery staff with administration tasks regarding medication management.

The presence of a pharmacist to assist with the handling, storage, reconciliation and custody of scheduled medications on the wards has assisted with a time capacity of 1 FTE across two obstetric wards.