HARRIS Flex integrated medication management at LTHTR includes these key features:

- **Patient Allergy Checking:** Prescribing is not possible unless prior allergy documentation is complete. The EPR prompts prescribers to document the patient drug, environmental and substance allergies if not already done.

- **Real-time Allergy Checking:** As allergy information is updated, or additions are made in the patient record, the system performs a reverse check to determine if the patient is currently on the medication.

- **Mandatory Documentation:** Enforces rules regarding mandatory fields (e.g. second signature on high-risk medications).

- **Duplicate Alerts:** Notification if patient is already on the medication.

- **Typical Doses:** Pre-defined order sentences with typically ordered doses to streamline the one-click ordering process. This increases adherence to the hospital's formulary and reduces the risk of prescribing incorrectly.

- **Medication Order Sets:** Pre-configured Order Sets for medications typically ordered together.

- **Clinical Review Screens:** Provides a complete picture including relevant laboratory results, vital signs, order/dose and administration information in a single screen available to prescriber.

- **Consolidated Medication List:** At-a-glance overview of all medications already documented, including all home, visit, and discharge medications.

- **Medication Administration Charts:** Distinct charts for infusion, epidural, and enteral feeding which show all active medications prescribed, simplifying the medication administration process for nurses.

- **7-Day Medication Summary:** Provides a clear view and audit trail of all medications prescribed and doses administered over the past week.

- **Work Queues:** Automatically creates work queues for doctors and pharmacy teams with review reminders to help prioritize their work.

- **Medication Reconciliation:** Formal review of all patient medications at key transition points is now done electronically in QCPR.

Success! "The first electronic prescription and administration of medicines" Tweets Nick Wood, Gynaecological Oncologist and Chief Clinical Information Officer for LTHTR

GYNAECOLOGY WARD SCORES
100%
IN ANTI-MICROBIAL STEWARDSHIP AUDIT

The EPMA and Gynaecology Ward Team: (left to right) Liz Case, Staff Nurse; Samantha Thibeault, EPMA Pharmacy Technician; Eileen Graham, Staff Nurse; Amanda Cooper, Nursing and Care Developments Team; Jackie Westby, Ward Manager; Sarah Haskell, Nursing and Care Developments Team; Dorota Matuszewska, IT Trainer; Kelly Green, Staff Nurse; Jenny Southern, IT Trainer; and Nital Panchal, EPMA Pharmacist

"We have had a great collaboration with Harris Healthcare's clinical and technical teams to examine and evaluate our hospital workflow processes so that we not only improve the patient care experience, but streamline our clinical practices."

— Nick Wood, Consultant Gynaecological Oncologist and Chief Clinical Information Officer

EARLY RESULTS

The solution was first rolled-out in the Gynaecology Ward, where medical, oncology and post-operative gynaecology patients are treated. Patients admitted to this Unit with medical, oncology or post-operative conditions typically require numerous medications with complex dosing, with some requiring simultaneous monitoring of laboratory values and vital signs.

Shortly after go-live in March 2017, Nick Wood, Consultant Gynaecological Oncologist and Chief Clinical Information Officer for LTHTR tweeted this message: "The first electronic prescription and administration of medicines at Lancashire Teaching Hospitals" signaling the success of the new electronic Prescribing and Medication Administration functions.

While the Gynaecology ward has been live with the EPMA solutions only a few months, the results are already apparent: the ward scored 100% in the recent anti-microbial stewardship audit which is automated through a report in QCPR. In the coming months, in-depth data analysis will be conducted by LTHTR to measure the impact of their new EPMA system on their overall number of medication transcription, prescription, and administration errors. They will also be evaluating the impact of the solution on formulary adherence and consistency in clinical practice.

Initial observations from clinicians indicate that EPMA makes it easy, efficient, and safe to prescribe, dispense and administer medications. With EPMA in place at LTHTR, electronically ordered medications go directly to the pharmacy through a streamlined, error-free process. The system guides physicians during the medication ordering process and nurses while administering. EPMA effectively supports clinicians throughout the entire medication management lifecycle.

LTHTR anticipates that its electronic prescribing medication administration system with Clinical Decision Support will bring huge benefits to the organization, its clinicians and, most importantly, to its patients. Additional results will be published once the data analysis is complete.

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