AUSTRALIANCOMMISSIONON SAFETYANDQUALITYINHEALTHCARE



Development of recommendations for labelling of parenteral medicines, fluids and lines in Australia:

Feedback for draft labelling recommendations dated August 2008.

Your comments on these recommendations for labelling of parenteral medicines, fluids and lines in Australia will be used to inform the final National recommendations and accompanying education package.

The recommendations provided are in draft form in terms of content and layout. We are seeking feedback about the following aspects of the recommendations: clarity and readability of the document, content of the recommendations, perceived barriers to implementation and ways these barriers could be overcome.

Please write your comments **electronically** in the marked text boxes and return to Diana Shipp at dshipp@stvincents.com.au by **18 May 2009**

Please contact Diana Shipp, Jocelyn Lowinger or David Maxwell on 02 8382 2852 or nswtag@stvincents.com.au if you have any questions regarding these recommendations.

- 1. Name of organisation you represent?
- 1. Australian Nursing Federation
- 2. Which clinical groups do you represent?
- 2. All nursing and midwifery
- 3. Have you consulted anybody else regarding these recommendations?

 __YES

If yes, please include name(s) and affiliation(s).

Critical care nurse members.

4. Document summary (page 2)

4.1 Considering the clarity and readability of the document summary: Do you think the summary as written is clear and readable? _YES___

If no, please explain why and included suggestions for improving readability and clarity.

4.2 Considering the content of the document summary: Do you think the content of the summary is appropriate? __YES__

If no, please explain why and included suggestions for improving the content of the summary

5. Introduction (page 3)

5.1 Considering the clarity and readability of the introduction: Do you think the introduction as written is clear and readable? _YES__

If no, please explain why and included suggestions for improving readability and clarity.

5.2 Considering the content of the introduction: Do you think the content of the introduction is appropriate? _YES__

If no, please explain why and include suggestions for improving the content of the introduction

6. Scope (page 5)

6.1 Considering the clarity and readability of the scope: Do you think the scope as written is clear and readable? _YES__

If no, please explain why and included suggestions for improving readability and clarity.

6.2 Considering the content of the scope: Do you think the intention to ONLY cover labelling of parenteral medicine, fluids and lines is clear? __NO_

If no, please describe what should be added to or omitted from the scope so that it better fulfils the intention to only cover labelling of parenteral medicines, fluids and lines and explain your reasons.

6.2 This is not obvious until you read text. Could be made BOLD print and put in a boxed heading.

7. Principles (page 7)

7.1 Considering the clarity and readability of the principles: Do you think the principles as written are clear and readable? _YES__

If no, please explain why and included suggestions for improving readability and clarity.

7.2 Considering the content of the principles: Do you think the content of the scope adequately covers safety issues related to labelling of parenteral medicines fluids and lines? _YES__

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to labelling of parenteral medicines fluids and lines.

7.2 There needs to be mention, however, of enteral lines.

8. Labelling Recommendations (page 11)

8.1 Considering the clarity and readability of the principles as a whole: Do you think the principles as written are clear and readable? __YES_

If no, please explain why and included suggestions for improving readability and clarity.

- 8.2 Consider the recommendations for each of the clinical situations covered in the draft labelling recommendations listed below:
 - Medication Source
 - Fluid bags and bottles for infusion (no additional medicines)
 - Fluid bags and bottles for infusion (additional medicines added)
 - Pre-labelled syringes for bolus administration
 - Pre-labelled syringes for incremental use
 - Non-pre-labelled syringes for bolus administration
 - Non-pre-labelled syringes for incremental use
 - Medication conduit
 - Tubing
 - Infusion devices and burettes
 - Invasive monitoring lines
 - Patient administration portals

8.2.1 Considering the content and rationale for the recommendations for fluid
bags and bottles for infusion (no additional medicines) as written: Do you think
the content adequately covers safety issues related to this clinical situation?YES

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to this clinical situation

8.2.2 Considering the content and rationale for the recommendations for fluid bags and bottles for infusion (additional medicines added) as written: Do you think the content adequately covers safety issues related to this clinical situation? __YES_

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to this clinical situation

8.2.3 Considering the content and rationale for the recommendations for prelabelled syringes for bolus administration (1a) as written: Do you think the content adequately covers safety issues related to this clinical situation? __YES_

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to this clinical situation

8.2.4 Considering the content and rationale for the recommendations for prelabelled syringes for bolus incremental administration (1b) as written: Do you think the content adequately covers safety issues related to this clinical situation? YES

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to this clinical situation

8.2.5 Considering the content and rationale for the recommendations for non-pre-labelled syringes for bolus administration (2a) as written: Do you think the content adequately covers safety issues related to this clinical situation?

YES

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to this clinical situation

8.2.6 Considering the content and rationale for the recommendations for non-pre-labelled syringes for bolus incremental administration (2b) as written: Do you think the content adequately covers safety issues related to this clinical situation? __YES__

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to this clinical situation

8.2.7 Considering the content and rationale for the recommendations for tubing as written: Do you think the content adequately covers safety issues related to this clinical situation? _YES__

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to this clinical situation

8.2.8 Considering the content and rationale for the recommendations for infusion devices and burettes as written: Do you think the content adequately covers safety issues related to this clinical situation? NO

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to this clinical situation

8.2.8 Syringe pump lines must also be adequately labelled with the drug name – otherwise the rest is alright as is.

8.2.9 Considering the content and rationale for the recommendations for invasive monitoring lines as written: Do you think the content adequately covers safety issues related to this clinical situation? __YES_

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to this clinical situation

8.2.10 Considering the content and rationale for the recommendations for patient administration portals as written: Do you think the content adequately covers safety issues related to this clinical situation? _YES__

If no, please describe what should be added to or omitted from the principles so that it better covers safety issues related to this clinical situation

- 9. Illustration 1: Typical intravenous infusion with an infusion device (page 15)
- 9.1 Considering Illustration 1: Do you think the illustration adequately represents a typical intravenous infusion with infusion device? NO

If no, please describe what should be added or omitted from the diagram.

9.1 Most devices go through an infusion pump (except blood). There could be another diagram with a pump shown.

9.2 Would additional diagrams be helpful? _NO_

If yes, what should these include?

9.2 See above comment.

10. Glossary (page 16)

10.1 Do you think the existing terms and definitions are clear? YES

If no, please describe any definitions that should be altered and how.

10.2 Should any additional terms be included? _YES__

If yes, please indicate new terms and their definitions

10.2 Clinical areas – perhaps include haemodialysis (HD) units and satellite HD units.

11. References (page 18)

11.1 Are there any further references that should be included to support this document? NO

If yes, please list these.

12. Implementation

We are developing an education program and implementation plan to support introduction of these recommendations.

- 12.1 We recognise these recommendations represent a significant change in practice. Please describe educational strategies that would be useful to the clinicians represented by your organisation.
- 12.1 As an initial awareness raiser you could publish a 'Clinical Update' in the ANFs monthly journal the *Australian Nursing Journal*, which is mailed direct to 64,000 nurses with a much wider readership amongst their colleagues.

A powerpoint education program could be prepared and either delivered via the ANF continuing education program (see ANF website to see other programs delivered or contact Jodie Davis at the Canberra office on 02 6232 6533 for further information), or there could be a link from the ANF website to whatever site the program is run through.

- 12.2 What other strategies or system changes would facilitate uptake of these recommendations by clinicians represented by your organisation?
- 12.2 The ANF is secretariat to the Coalition of National Nursing Organisations (CoNNO) which consists of approximately 55 specialty (and mostly clinical) nursing groups. The ANF could distribute via email messages about proposed changes that these groups could then disseminate to their memberships this is a very efficient way of reaching the bulk of clinical nurses as well as university schools of nursing and midwifery.

13. Other comments

- 13.1 Please list any other comments you have about these draft recommendations for parental labelling in Australian Hospitals
- 13.1 As a result of one recent Coroners case and several sentinel events in Victorian hospitals, the ANF has been advised by the ANF Victorian Branch that there are

concerns about confusion existing from a nursing perspective between parenteral lines and PEG lines etc. We can understand why these labelling recommendations are setting out to cover ONLY parenteral medicines fluids and lines - but from a nursing perspective there is a need to look at the issues surrounding PEG and like lines, given Victoria's experiences with errors occuring due to confusing, for instance, CVC and PEG lines. ANF suggests that this does need to be addressed in this document as although it would be alright to have a separate document relating to labelling of PEG lines, for example, to not mention it in these guideline too would miss the opportunity to draw attention to the issue of potential confusion of lines. ANF understands, for instance, that currently not all hospitals provide the special colour coded syringes for PEG lines.

Thank you for your consideration of each of these points. Your time and contribution are much appreciated. Your comments will inform the development of the recommendations and the education package.