| **Aim Statement:** Within 12 months, 100% of patients in geriatric ward A will have their admission medication reconciliation completed within 2 business days of admission. [Tailor the aim statement and measures so they are relevant to your QI project] |
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| **Type of Measure**Outcome/Process/ Balancing | **Name of Measure** | **Operational Definition**Numerator/Denominator | **Team member responsible** | **Data Collection**Methods/Sampling/Schedule | **Reporting**Format, Frequency, to Whom |
| 1. **Outcome**
 | Completion rate of admission medication reconciliation  | **Definition – Admission Reconciliation** * Best Possible Medication History taken with the list reconciled against the inpatient medication orders within 2 business days of admission
 | **CNC.** Wardpharmacist to assist with generation of report. | **Sample size*** See numerator and denominator
 | **Recording format** * Excel
 |
| **Numerator*** Number of patients with admission reconciliation completed within 2 business days
 | **Data source*** eMeds report EM002, 003
 | **Display format*** Run chart
 |
| **Denominator*** Total number of patients admitted to the ward for more than 2 business days
 | **Frequency*** Weekly
 | **Reporting frequency*** Project team - weekly
* Sponsor - monthly
 |
| 1. **Process**
 | Completion rate of medical officers trained on Best Possible Medication History (BPMH) | **Definition – ‘Completion’ of training*** Attended the education workshop AND passed the BPMH test
 | **JMO.**Pharmacist to assist withmaterial and presentation | **Sample size*** See numerator and denominator
 | **Recording format** * Excel
 |
| **Numerator*** Number of medical officers completed the training
 | **Data source*** Education attendance record and test results
 | **Display format*** Excel table of completion rate
 |
| **Denominator*** Total number of medical officers at geriatric ward A
 | **Frequency*** One off training at the beginning of each rotation
 | **Reporting frequency*** Project team and Sponsor – as soon as training completes
 |
| 1. **Balancing**
 | Rate of patients who did not receive discharge counselling from pharmacist | **Definition – Discharge counselling*** Verbal counselling provided by pharmacist to patient or carer regarding discharge medications
 | **Ward Pharmacist.** CNC to assist with daily discharge list.  | **Sample size*** See numerator and denominator
 | **Recording format** * Excel
 |
| **Numerator*** Number of patients who did not receive discharge counselling on the day
 | **Data source*** Pharmacist discharge counselling progress notes
* Daily patient discharge list
* May require base line data to determine if there has been a negative impact to patient receiving discharge counselling from the project intervention
 | **Display format*** Run chart
 |
| **Denominator*** Total number of patients discharged on the day/who should have received discharge counselling by a pharmacist
 | **Frequency*** Daily
 | **Reporting frequency*** Project team - weekly
* Sponsor - monthly
 |
|  |  | **Definition**  |  | **Sample size** | **Recording format**  |
| **Numerator** | **Data source** | **Display format** |
| **Denominator** | **Frequency** | **Reporting frequency** |