

Critical Care Outreach Nurse Prescribing: A Five Year Evaluation of Practice

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Nurse Prescribing- in Critical Care

- Fairley D (2006)
- BACCN position statement on prescribing in critical care (Bray et al., 2009)
- Wilson et al., (2012)
- Carberry, Connelly and Murphy (2013)
- Jackson and Carberry (2015)

As of 15/10/15

Setting the scene

- 600 bedded District General Hospital-16 ICU beds
- Outreach team established 2001
- 24hours 7 day per week since Jan 2005
- We receive on average 900 referrals/month
- First 2 team members qualified as prescribers in October 2010
- 10 out of 12 team members can prescribe

Why Review Prescribing Practice?

The screenshot shows a web browser window displaying the 'OUTREACH ACTIVITY DATABASE' interface. The page title is '05 June 2011'. The form is divided into several sections for data entry:

- Top Section:** NHS Number, First Name, Surname, Location, Referral Date, Referral Time, Ref MEWS, Visit Date, Visit Time, Referral Source, SBAR Used?, Time with patient, Outcome.
- Middle Section:** If referral is Arrest Call?, Audit Form?, Patient entered into SPOT?, CMP No.
- Bottom Section:** Drug prescribed? (dropdown), Prescription notes (text area), Notes (text area), Initials (dropdown).

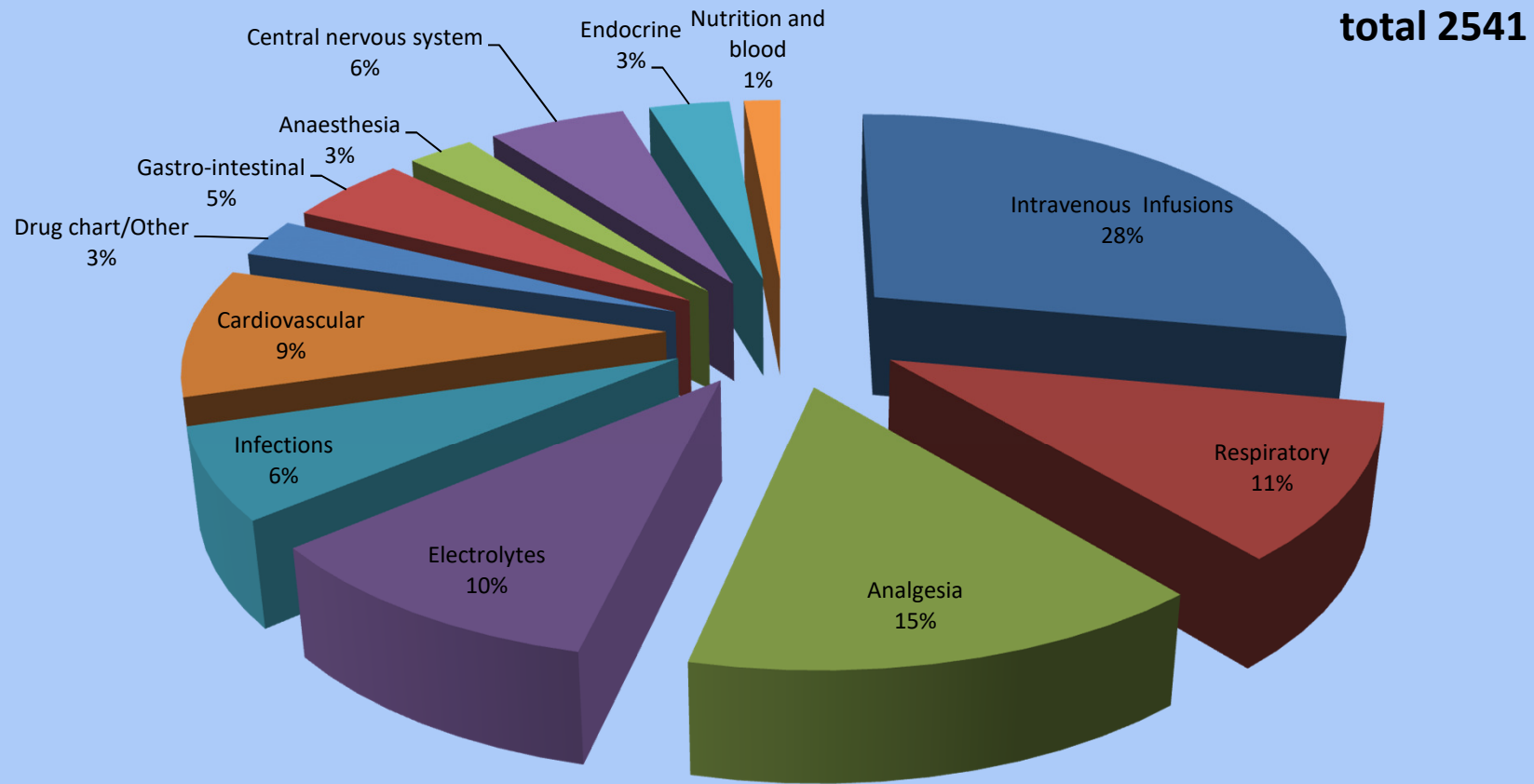
- Develop outreach formulary WHO(1994), NPC (2007), NPC(2012)
- Used to identify prescribing trends and practice within our team
- Update knowledge on commonly prescribed medications
- Continual professional development
- NMC revalidation

Results

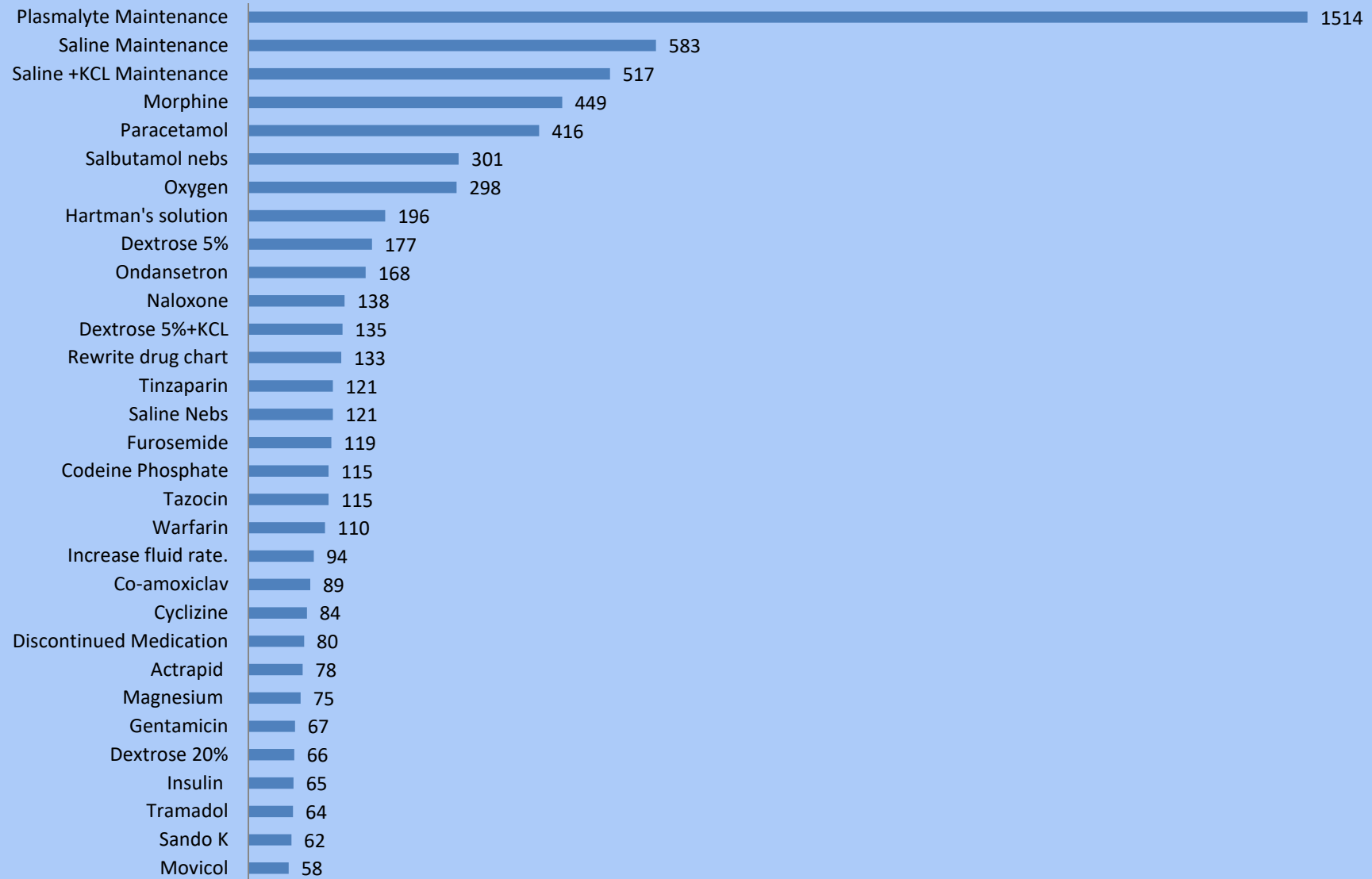
Data collected from Jan 2011- Dec 2015

- Prescribers have worked 3261 shifts 69.8 of which were unsocial.
- 8356 medications prescribed
- Average 2.6 medications prescribed per shift
- Average range of drugs prescribed per month 48
- The range of medication prescribed has increased by an average of 8% per year (23-61 items)
- Average medication prescribed per month 139
- In 2015 Morphine was now the second most prescribed medication.
- Most medications prescribed from 16:00 to 03:00

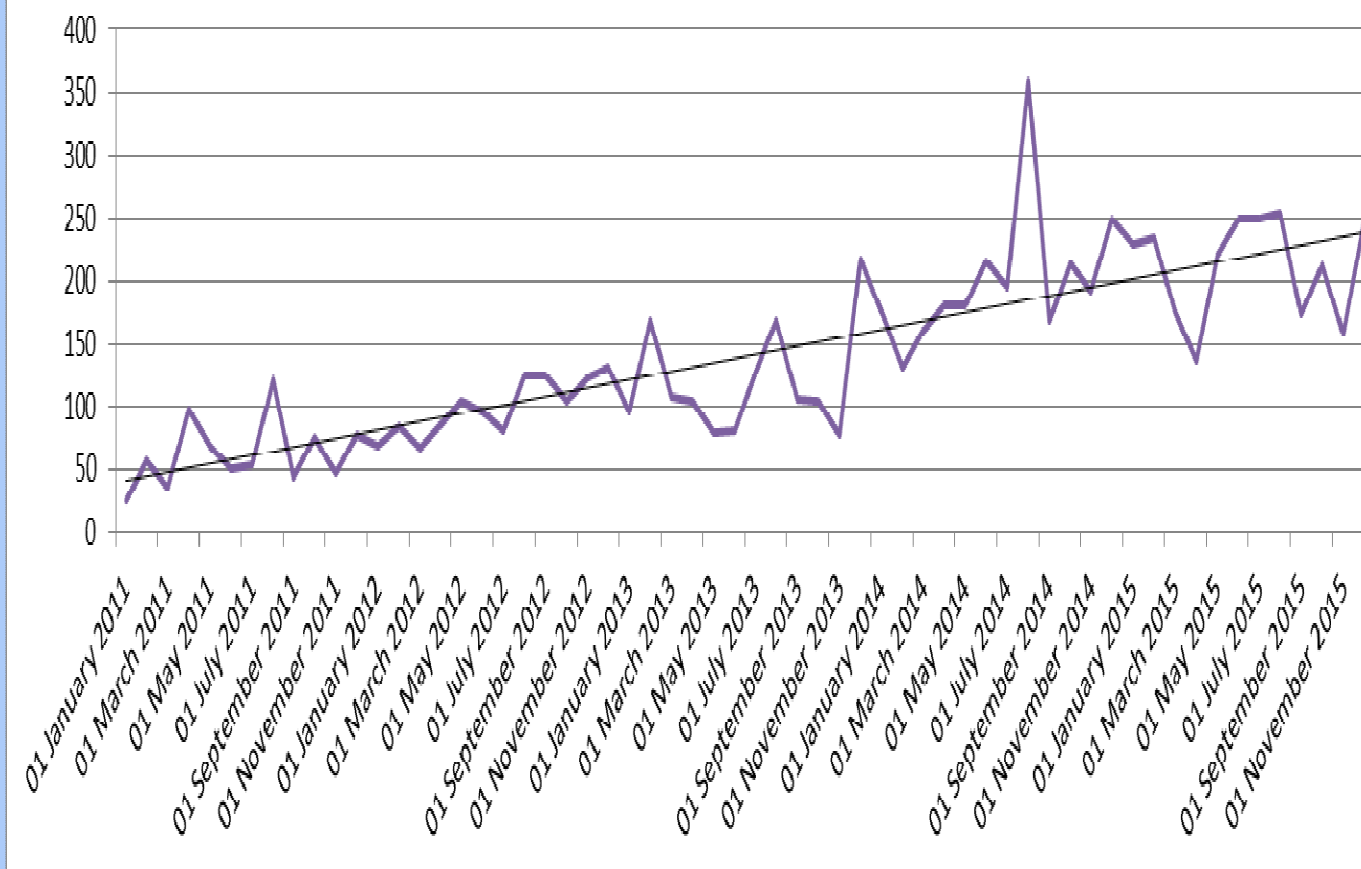
Team prescribing pattern 2015



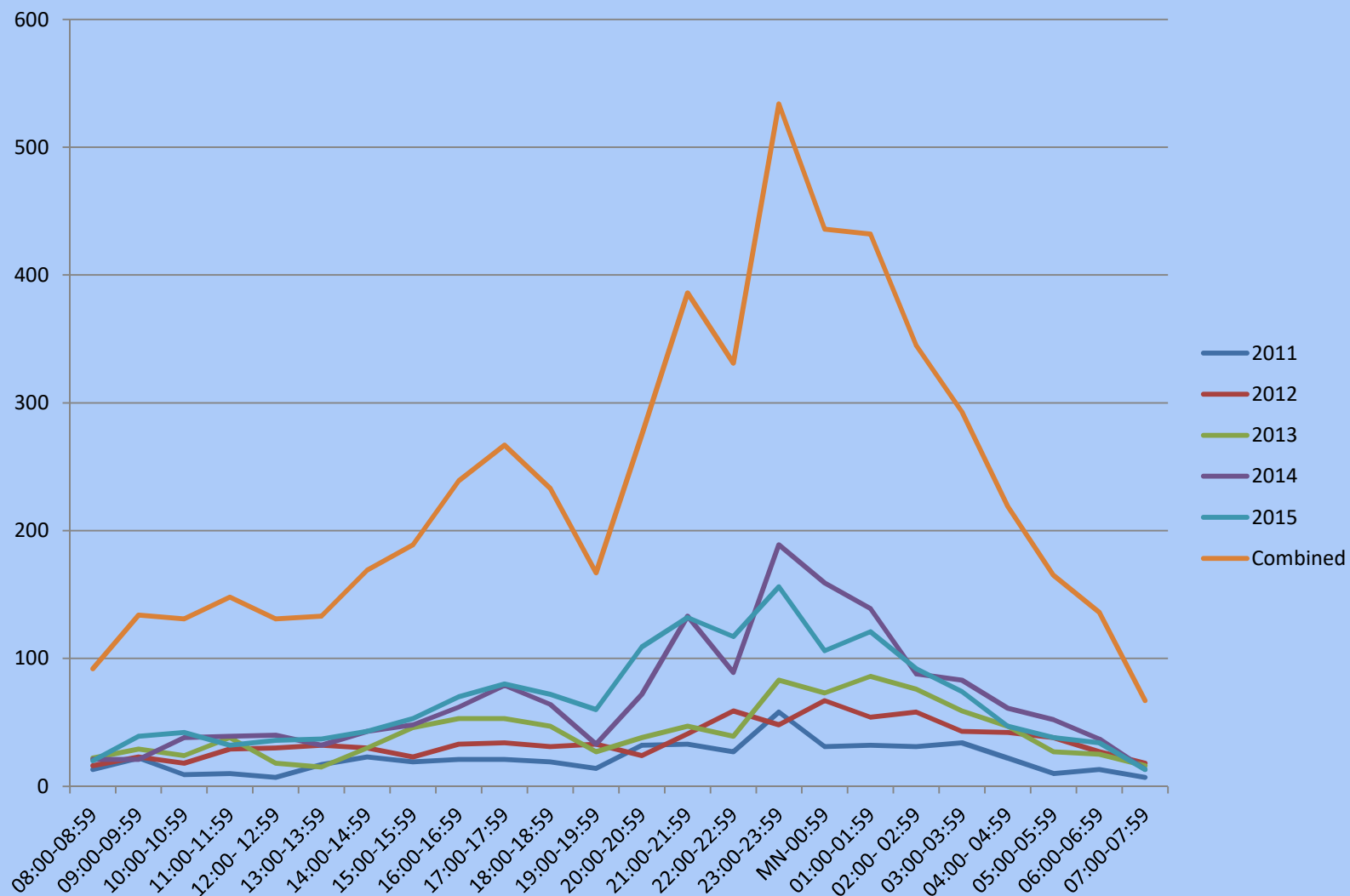
Formulary top 30 2011-15



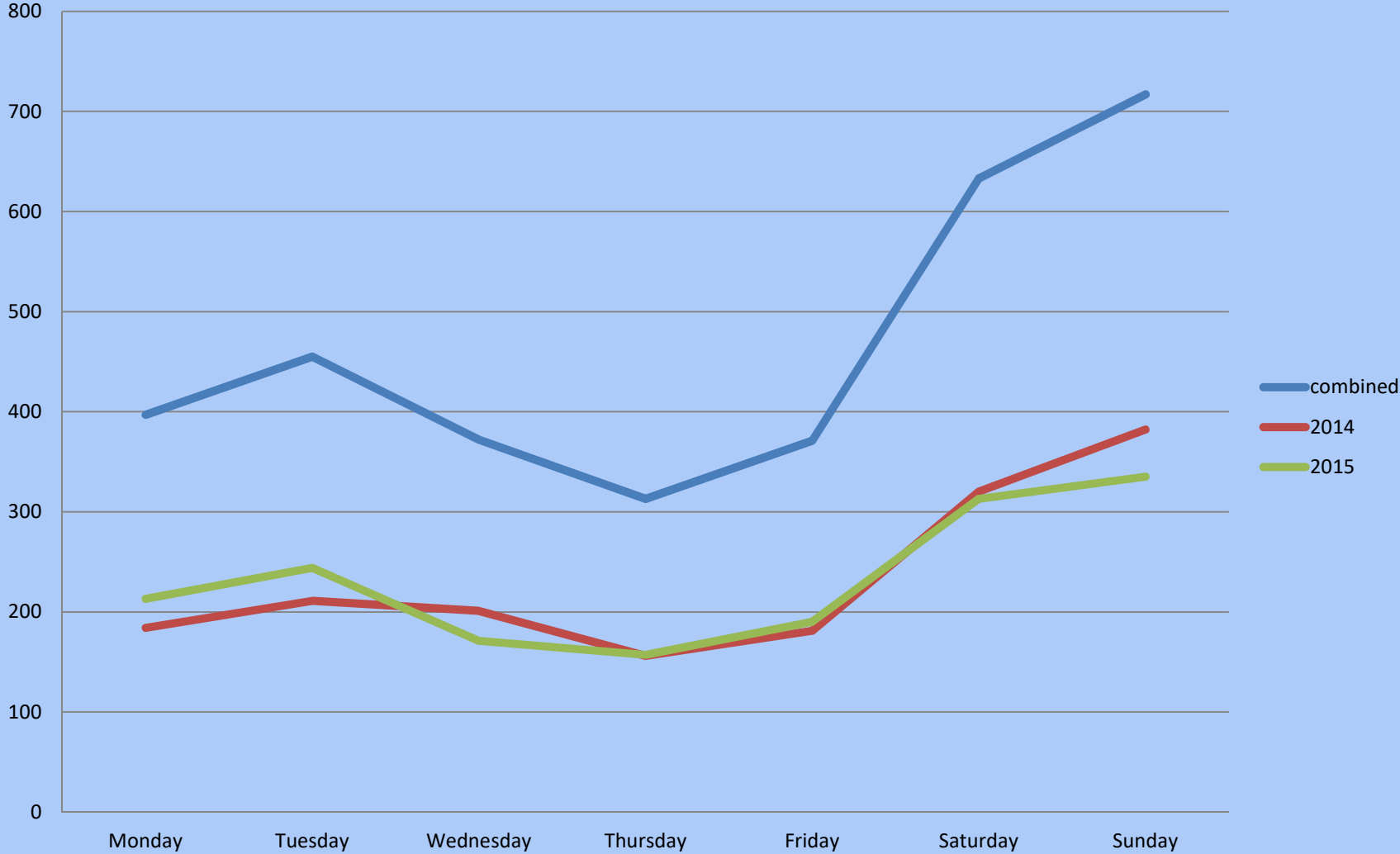
Number of medications prescribed per month



Time of prescription



Referrals by day of the week



Good Experiences

- **Completing the treatment loop**
- **Makes the role more effective**
- **‘Enables me to act truly independently and autonomously’**
- **Improves working relationships**
- **Makes the team more indispensable particularly at night and weekends**

The Challenges

- **The initial workload of the prescribing course**
- **The responsibility**
- **Being asked to prescribe outside your area of expertise**
- **You can be more exposed/know your limitations**
- **Maintaining competence**

Conclusions

- Prescribing for critically ill patients across a diverse patient group is manageable and rewarding.
- The majority of our outreach prescribing occurs at night.
- Evaluating your practise enables you to develop a 'Critical Care Outreach Formulary' of regularly prescribed medications.
- This enables you to develop a targeted continuing professional development strategy.
- Provides evidence for your portfolio regarding NMC revalidation.

Any Questions?

Wilson, M., Gerber, K., Mahoney, S. and Odell, M. (2012). An audit of independent nurse prescribing in a critical care outreach team. *Nursing in Critical Care* 17 (2), pp.83-89.

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