

Issue 1  
February 2006

**NSW Therapeutic  
Advisory  
Group**

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## PIMS Project Overview

The NSW Clinical Excellence Commission (CEC) has contracted NSW TAG to carry out this project. The overall aim of the PIMS project is to develop a suite of tools designed to promote medication safety and QUM in Australian hospitals. It consists of two phases that will run concurrently over 12 months. NSW TAG will lead the project, in consultation with the CEC, NSW TAG members, Area Directors of Clinical Governance, other State TAGs, the Australian Council for Healthcare Standards, the society of Hospital Pharmacists of Australia, Children's Hospitals Australasia and other stakeholders.

### Phase I

The aim of phase 1 is to adapt and field test two medication safety diagnostic tools for use in Australian hospitals. These tools, developed by the US-based Institute for Safe Medication Practices (ISMP), are the *Medication Safety Self Assessment for Hospitals* (MSSA) and the *Medication Safety Self Assessment for Antithrombotic Therapy in Hospitals* (MSSA-AT).

The ISMP MSSA tool is designed to assess medication safety practices in hospitals and to heighten awareness of the distinguishing characteristics of a safe medication system. It is primarily a diagnostic tool designed to allow self-assessment of the safety of medication practices within a facility, to identify opportunities for improvement and to compare experience with the aggregate experience of demographically similar hospitals. The MSSA-AT tool focuses specifically on safe medication practices associated with antithrombotic therapy. Following the field testing the ISMP tools will be made available for use in hospitals around Australia.

### Phase II

The aim of phase 2 is to update and expand the existing NSW TAG indicator sets (NSW TAG Manual of Indicators for drug use in Australian hospitals and Indicators for Drug and Therapeutics Committees). Again this will involve broad consultation, review and field testing. Once updated these quality indicators will also be made available for use in hospitals around Australia.

## PIMS Project Steering Committee

The two phases are running concurrently with guidance from a multidisciplinary steering committee chaired by Associate Professor Andrea Mant.

### Phase I – where are we at?

An invitation to express interest in the PIMS Project was circulated to all NSW TAG and TAGNet hospitals in December 2005. Expressions of interest documents were also sent to the private hospital sector and to other state TAGs and relevant stakeholders.

We had a very positive response to the expression of interest. We have identified a shortlist of hospitals that represent a range of facilities we hope to include in the field testing. Phase I will include representation from public and private hospitals, general and specialist hospitals, rural, metropolitan and interstate hospitals. Field testing for Phase I is due to commence in late February/early March

### Phase II – where are we at?

The literature review for phase two has been completed over the past two months. The literature review contains two main parts – a background paper regarding use and development of indicators and a summary of indicators regarding medication management currently in Australia and internationally. The literature review has been completed and the next task is to identify the indicators that are most likely to drive change. Our objective is to select and test a set of core indicators that will be useful to hospitals in driving change and promoting best practice in medicines use.

### **PIMS Q&A – Are all these tools necessary?**

*Yes! The ISMP tools and the drug use indicators are complementary tools designed for hospitals to use in combination to monitor medication safety and QUM. Innovative data collection processes to help hospitals make best use of these tools will be explored as part of the project*