

eMAR Forensics: Surveillance & Investigation

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Background

The transition from paper to electronic documentation requires committed participation and engagement from leadership. Equipping leaders to act as agents of change and champions of best practices requires education and support that differs from that provided to end-users.¹ Following the implementation of an electronic Medication Administration System (eMAR), we developed an eMAR Forensics course that introduced leadership team members to new ways of seeing and investigating documentation.

Methods

In August 2013, we began the systematic process of rolling out our homegrown eMAR to our medical center, unit by unit. In preparation for each roll-out, all nurses, including unit leadership, attended hands-on training classes. Although the classes provided adequate training for front-line staff, leadership team members interact with the eMAR differently and needed more specialized training. Performing chart audits, monitoring practice, and investigating medication incidents requires a deeper understanding of how the eMAR functions and new investigative tools.

Drawing from incident report data and eMAR user feedback, we developed and held *eMAR Forensics* classes that introduced tools for surveillance and investigation, with the following goals:

- To obtain an overall situational awareness of staff performance in relation to medication administration
- To troubleshoot eMAR roadblocks on a unit-level
- To fully understand the eMAR and perform thorough chart investigation
- To reduce the need for external support in investigation

In these classes, we simulate an “error-filled” eMAR for demonstration and provide dedicated time for questions and specific events or concerns to be addressed by the eMAR team.

Results

From the fourteen live units, 65% of the nursing leadership attended one of the four classes, including nurse directors, nurse specialists, and unit-based educators. Each unit was represented.

Discussion

Attendees reported an increased understanding of chart surveillance and decreased length of time spent hunting through the records during investigations. Leaders reported increased engagement, championing best practices, and fewer work-arounds. We will offer these classes to leadership teams on new eMAR units and new nurse leaders, revising class format to facilitate class preparation. We will make content of classes accessible to users on an ongoing basis.

¹ Detwiler M, Petillion W. Change management and clinical engagement: critical elements for a successful clinical information system implementation. *Computers, Informatics, Nursing*. 2014; 32:6; 267-273.