Improving the content, wording, structure & formatting of the NHS Injectable Medicines Guide (“Medusa”) with user testing

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Background & aim
- The NHS Injectable Medicines Guide (IMG) is used by nurses in >100 hospitals to guide the preparation & administration of IV medicines.
- Surveys suggest users find it too detailed & confusing.
- This may make it difficult to find relevant, unambiguous information & could lead to serious medication errors.
- We aimed to identify & resolve problems in two typical IMG guides via user testing.

User testing methods
- We recruited 30 nurses from three hospitals who regularly administer IV medicines.
- These nurses tested existing IMG guides for voriconazole & aminophylline (renamed bathicillin & unimycin) via 3 iterative rounds of 10 interviews, each followed by guide revision.
- Each interview included direct questions that we scored to determine whether each participant could find & understand 17 key points of information (KPIs, Table 1).
- Open questions then explored views on guide content & format (analysed thematically).
- The study was approved by the University of Bath Research Ethics Approval Committee for Health (EP 17/18 126) & the Health Research Authority (IRAS 235214).

Results
- The number of participants able to find & understand KPIs increased following revisions made between successive rounds of use testing (Figure 1 & Table 1).
- These improvements were the result of multiple changes to the content, wording, structure & formatting of the guides (Figure 2).

Conclusions
- The original guides performed poorly for several important KPIs.
- The user testing process improved guide performance in the interview context.
- An on-going randomised in situ simulation study will determine whether the user tested guide results in fewer preparation & administration errors in a ward environment.

References
1. Erskine et al.: An assessment of the information provided to support healthcare staff to administer injectable medicines. UK Medicines Information Practice Development Seminar 2012.

Matthew Jones is funded by a National Institute for Health Research (NIHR) Transitional Research Fellowship for this research project.

Prepared 21/5/19

Table 1: KPI topics that were not found or understood by some nurses*

<table>
<thead>
<tr>
<th>KPI</th>
<th>Drug</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Voriconazole</td>
<td>Pre-treatment monitoring</td>
</tr>
<tr>
<td>5</td>
<td>Voriconazole</td>
<td>Volume of dilution solutions</td>
</tr>
<tr>
<td>9</td>
<td>Aminophylline</td>
<td>Infusion rate</td>
</tr>
<tr>
<td>10</td>
<td>Aminophylline</td>
<td>Methods of administration</td>
</tr>
<tr>
<td>11</td>
<td>Aminophylline</td>
<td>Infusion rate</td>
</tr>
<tr>
<td>12</td>
<td>Aminophylline</td>
<td>Responding to adverse effects</td>
</tr>
<tr>
<td>15</td>
<td>Aminophylline</td>
<td>Extravasation</td>
</tr>
<tr>
<td>16</td>
<td>Aminophylline</td>
<td>NPSA safety alert</td>
</tr>
</tbody>
</table>

*KPI topics found & understood by all nurses included presentation of the medicine, reconstitution, dilution solutions, sodium content, latex content, compatibility, expiry time & fluid restriction.