

OVERALL AIM: To optimize the process of preparation and administration of cytotoxic drugs at HSD and to establish the best practices for the administration of chemotherapy at Saint-Damien Hospital.

Inputs	Activities	Outputs	Outcomes	Impact
- Implementation team - Facilities - Funding - Equipment and materials - SimpleQI, MAXQDA, and RStudio s software	- Recruit pharmacy staff - Establish a quality improvement committee - Conduct workshop and administer survey to evaluate strengths and weaknesses related to chemotherapy preparation and administration - Assess baseline compliance with standards for the administration and preparation of cytostatic - Develop procedures manual - Establish process and systems for measuring and tracking relevant data - Measure adherence to procedures and track occurrence of failures and adverse events - Hold daily interdisciplinary rounds - Conduct PDSA cycles to improve compliance with international safety standards	- Trained pharmacy staff - Workshop report - QI Committee SOP - Literature review - Initial and revised protocol - Analytical reports & action plans for improvement - Reporting system for preparation/ administration failures - Reporting mechanism and form for adverse events - Adverse event reports	Short-term - Identification of gaps in in current cytostatic preparation and administration practices - Understanding of knowledge, attitude, and practice of preparation and administration among stakeholders - Introduction of procedure manual Intermediate - Implementation of strategies to address primary challenges - Strengthened compliance with international standards for preparation and administration of cytostatic Long-term - Reduction of failures and adverse events related to preparation and administration at HSD	Improved quality of care in the HSD oncology unit - Improved adherence to evidence-based procedures for the preparation and administration of cytostatic at HSD - Increased adherence to international standards - Established sterile preparation - Reduced occurrence of errors, particularly high-risk errors, in preparation/administration of cytostatic - Increased staff engagement in safe administration of chemotherapy medications - Improved knowledge, attitudes, practices among staff - Improved staff satisfaction - Increased clinical patient monitoring time on nursing side - Establishment of a culture of quality and safety among staff - Adoption of quality improvement tools and techniques among staff - Improved patient outcomes in the HSD oncology unit - Reduced occurrence of adverse events related to non-compliance in administration - Reduced infections related to cytostatic preparation - Improved trust and patient satisfaction