

Inside Perspective

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Bedside medication verification produces immediate patient safety benefits at LA's Good Samaritan Hospital

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The administration and staff at Good Samaritan Hospital in Los Angeles are strongly committed to the continued improvement of patient safety. As a part of this commitment, the hospital—with the help of JJWild—recently implemented MEDITECH's Bedside Medication Verification System (BMV). Before the end of the first shift, the patient safety benefits were apparent.

Planning for success

As is usually the case, Good Samaritan's BMV success was no accident. Each step of the way, the implementation team took the trouble to "do it right."

The team started with clear goals: First, the users had to accept the need for the system. The system had to be as reliable as possible. And, finally, users had to be well-trained prior to implementation. From the beginning, feedback from physicians and staff (a program the hospital calls "Voice of the Customer") was a priority for the development team.

Good Samaritan had set a target of having 99% of their formulary scanned before going forward with implementation. But first, they had to find a solution for the lack of the bar code standardization across the pharmacy industry. Good Sam's MIS department worked closely with JJWild to develop a configuration for their scanners that would only look to the National Drug Code (NDC) number—and their goal of 99% formulary scan was met.

To build the most reliable system possible, the hospital brought in a nurse consultant from JJWild to facilitate the dictionary build and also help develop training materials and a user training plan. By leveraging the experience of JJWild upfront, Good Samaritan was confident they would maximize the benefits of the technology and generate greater user acceptance.

Building staff buy-in

Then came a series of meetings with the end users. At system demonstrations, users were encouraged to voice their concerns, and to play an active role in developing new workflows. It was clear from the beginning that to make BMV a success, staff would have to take ownership of the program—and that also meant understanding that the old process of reading the medication information on paper or a computer screen was not necessarily the safest. JJWild's scanning and bar code equipment was used in the initial training to give end users a complete understanding of how the implementation would impact work flow.

In the group meetings, users discussed the way BMV would improve their process by checking for the 5 rights of administration on each patient:

1. **Right Patient:** Scanning the bar coded armband would provide a positive patient identification.
2. **Right Medication:** If the medication is not on the patient profile, BMV flags the nurse to indicate that it is not the right medication, or that the pharmacy has not completed their safety checks.
3. **Right Dose:** If the scanned dose is higher or lower than the prescribed dose, BMV flags the nurse.
4. **Right Route:** The system checks for the right route. For example, if the medication is to be given orally but the scanned medication is an injection, the nurse will be warned.
5. **Right Time:** If the medication is given early or late, the system will warn the nurse that they are documenting against a past time or a future time.

Immediate results

In October, the pilot units went live with BMV, and immediately there were two reported occasions where BMV helped to avoid potential med events. The first was a “dose is higher than the prescribed dose” warning; the nurse was able to immediately adjust the dosage accordingly. The second averted medication event was an attempt to give a medication that was not on the patient’s profile. The nurse was scanning an enteric coated aspirin; the prescribed medication was a regular aspirin.

Good Samaritan is energized by the initial results and accomplishments of the implementation group. Jean Soong, RN, Clinical Project Coordinator, at Good Sam says, “JJWild was a welcome addition to our team, working closely with our staff to keep the project on track, augment our knowledge base, and ensure user buy-in.” As a result of the successful start—and the successful planning leading up to it—Good Samaritan Hospital plans to expand the BMV implementation to include the critical care areas by the end of 2004.

Our congratulations go out to Good Samaritan Hospital as they continue to set the standard of patient safety for hospitals everywhere. We have enjoyed working with their team on this important project. If we can help you do the same, don’t hesitate to contact your JJWild Account Representative or email us at editor@jjwild.com.

Cindy Willis is a Registered Nurse and has been working in the healthcare industry for more than 15 years. She was first introduced to the MEDITECH HCIS as an end user, where she became adept with the software from a floor nurse perspective. Soon, she began training the nursing staff in Order Entry and PCI. She transferred into the Information Systems department as a Clinical Application Specialist in 1996. In this role she was responsible for OE, NUR, PCI, MIS, and offered support to the other modules including LAB, MIC, BBK, RAD, PHA, ADM, and OR/SCH.

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