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"Healthcare Fraud"
Patient safety has become one of the leading issues facing the healthcare industry today. The catalyst for this attention is a report published in November of 1999 by the Institute of Medicine (IOM) that enumerated some alarming statistics. The statistics included patient deaths, extended hospital stays, and increased morbidity all attributed to medication errors.

Another large influence on patient safety initiatives is the emphasis placed on medication safety by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). These, combined with the genuine concern of providers for patients, have led to the relentless pursuit of solutions to increase patient safety in all institutions.

Most institutions have responded to this need by implementing formal patient safety committees. These committees are comprised of personnel representing multiple departments as well as disciplines. In addition to the committees, other solutions involving technology are also employed. Some of the most popular solutions include computerized prescriber order entry (CPOE), medication bar coding, bedside medication administration verification, and web-based clinician access to patient information. These technologies are neither easy nor quick to implement and require the commitment of significant monetary and personnel resources. Current implementation rates are low for these reasons, with the web-based access to patient information being the highest. Further, implementation of multiple solutions has an additive effect, so there is no one solution that can stand alone.

Since the medication use process contains so many steps (prescribing, transcribing, dispensing, administration, and monitoring), the solutions for these must be specific. An example is CPOE, which addresses prescribing and eliminates transcribing, but has no effect on dispensing, administration or monitoring. The successful implementation of multiple component pieces that must work together requires a standardization of data storage format as well as health industry bar codes (HIBC).

Several vendors now offer components and complete systems to address these multifaceted processes. In addition to these systems (pharmacy, CPOE, bedside medication administration verification, etc.), consideration must also be given to other hospital systems already in place. These include admission, discharge, and transfer (ADT), lab, radiology and scheduling. All must be in the total integration picture to be able to have the decision support necessary for rational and safe medication prescribing and administration.

Clearly, standardization of information is the key to successful integration, but where do we start? Part of the answer lies with the standardization of bar coding format so that everything from medications and patient information to capital equipment may be tracked and verified. Using standards-based technology, providers can develop internal applications that minimize errors and increase operating efficiencies. Networking of individual hospital systems enables patient data to be compiled and verified from multiple sources throughout the institution. This is critical for patient care and safety and facilitates patient outcomes monitoring and reporting.

The development, approval and implementation of these standards are the first steps. To that end, The Health Industry Business Communications Council (HIBCC) has made great strides. HIBCC has been responsible for maintaining a system of open standards that address the specific needs of care-giving environments. Through much work, draft standards exist for the provider applications health industry bar code. The Patient Safety Systems Task Force has been created to work within the healthcare community to further develop and implement these open system standards. This will be accomplished by solicitation of input from healthcare providers on their requirements for standards based systems. The HIBCC standards will then be revised to address those needs and the stage is then set for successful implementation.

Your participation on this task force is solicited if you feel you can contribute toward our goals. To receive more information, or to participate, please contact the HIBCC office at (602) 381-1091.

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