



Developing a Medication Safety Strategic Plan

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UMMC Pharmacy Overview: Centralized/Decentralized Model

- **Cerner Millennium® Pharmacy Information System (CPMOE)**
- **Centralized Operations:**
 - IV Admixture: Intellifill® and Intelliflow®
 - 24-hour Cartfill (McKesson Robot-Rx®);
 - Compounding/Repackaging
 - North Tower (Med/Surgery and Psychiatry)
- **Decentralized Satellites:**
 - Women's & Children's ("Pediatrics");
 - Greenebaum Cancer Center (2); Gudelsky; Weinberg;
 - Shock/Trauma; O.R. Pharmacy
- **Omniceil® Unit-based Cabinets:**
 - 160 cabinets including Anesthesia Carts for O.R.'s

Why do a Strategic plan?

- Promotes collaboration across the entire organization
- Improves organizational focus among all stakeholders
- Translates strategies into programs, projects, and products ("action steps")
- Defines measures of success and failure
- Fosters accountability among participants

The Five Tasks of Strategic Planning

- Developing a Vision and a Mission
- Setting Objectives ("Goals")
- Crafting a Strategy ("Action Steps")
- Implementing and Executing Strategy
- Evaluating Performance, Reviewing the Situation, and Initiating Corrective Action

Nine priority areas of focus that contribute to our mission

- Create, communicate, and demonstrate a leadership-driven culture of safety.
- Improve error detection and reporting.
- Optimize control and storage of medications (including purchasing).
- Design and execute the Prescribing function.
- Design and execute Dispensing function (including delivery process).

Nine priority areas of focus that contribute to our mission

- Design and Execute the Medication Administration process.
- Enhance the quality and accessibility of medication-related information and the communication of information.
- Standardize protocols and processes.
Optimize medication safety for special patient populations (pediatrics/oncology).
- Maintain and improve existing medication safety-related processes and programs.

Planning a Strategic Planning Retreat

- Multidisciplinary
- Off-site
- All Day
- Guest Speakers
- Welcome and Purpose: Marc Summerfield
- Building a Culture of Safety: Dr. Tim Babineau (former CMO)
- Medication Errors: a Review: Kasey Thompson, ASHP
- Applying Automation for a Safer Medication Use Process: Mark Neuenschwander
- Models and Principles of Medication Safety: Marc Summerfield
- Role of Human Factors in Patient Safety: Jake Seagull, PhD
- CPMOE: Update
- MEADE: Three Years of Accomplishments and Lessons Learned
- Work sessions throughout the day on the nine priority areas

University of Maryland Medical Center Pharmacy Department

Medication Safety

Strategic Plan

Create, communicate, and demonstrate a leadership-driven Culture of Safety

- Appoint a point-person (leader) for the Medication Safety Strategic Plan.
Status: Done: Susan Carey, Professional Development Specialist.
- Appoint a nurse medication safety champion; we have physician champions (CMO; Co-chair of MEADE) and a pharmacy and overall champion (MSO).
Status: Done: Ronetta Lambert, RN.

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Create, communicate, and demonstrate a leadership-driven Culture of Safety


- Disseminate the "Striking the Right Balance" model to depict the challenge in achieving the proper balance between Medication "Control" (Safety/Security/ Compliance) issues and "Access" (Timeliness/Convenience/Flexibility) issues.

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Goal: To Achieve the desired level of Control of medications without sacrificing Access to medications.

Striking the BALANCE in Medication Use

- Achieve the desired level of Control of medications without sacrificing Access to medications.

<p>Control</p> <p>Compliance</p> <p>Security</p> <p>Safety</p>		<p>Access</p> <p>Convenience</p> <p>Timeliness</p> <p>Flexibility</p>
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"There is no priority higher than patient safety. If there is a conflict between safe practice and speed, efficiency, or volume, safety wins--hands down."
James Anderson, President and CEO, Cincinnati Children's

Design and execute the Prescribing function to optimize medication safety.

- Implement Computerized Prescriber Medication Order Entry.

Status: Done

- Fully-integrated/linked: universal access;
- Prescriber order entry with electronic pharmacist order verification;
- Access to non-medication orders (diet, wound care) and lab data;
- E-MAR

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Standardize protocols and processes to optimize medication safety.

- Eliminate use of injectable syringes to draw and administer oral medications. Once drawn, the medication may inadvertently be administered intravenously.

Status: Done

Worked with Materials Management to stock pediatric oral syringes in all pediatric areas, including E.D.

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