

Automated Dispensing Equipment

from medDISPENSE

EVERY DAY, HOSPITALS WITHOUT 24-HOUR PHARMACIES FACE A DILEMMA:

They need to ensure that no one enters the pharmacy after hours, while still providing their nursing staff with 24-hour access to medications. At Regency Hospital Company, a nationwide provider of long-term acute care (LTAC) hospital services, we have addressed this problem with the use of automated dispensing cabinets from medDISPENSE.

The use of automation for dispensing medications is not new. Many large facilities have had systems in place for years. However, the use of

such devices in specialty facilities and LTAC hospitals has been somewhat limited due to the high cost of most systems on the market. Regency Hospital Company was an early customer of medDISPENSE, and over the years, we have found it to be an affordable system that meets the daily demands of our busy hospitals.

Regency's 17 hospitals are designed to provide acute care to medically complex patients for a longer period of time than

traditional hospitals are designed to provide. LTAC hospitals are essentially ICUs that offer intensive therapies through a multi-disciplinary team, and as such, our patients are very ill and are typically on a large number of medications.

Regency started its initial use of medDISPENSE equipment at our very first hospital in Florence, South Carolina. After implementing the technology in 2003, we saw immediate and dramatic results from both clinical and financial perspectives. Automation improved the control of medications, medication safety, and inventory management, and provided both a charge-interface profile and a patient profile. In addition, the nursing department had round-the-clock monitored access to controlled medications, first doses, and emergency medications. Finally, a balance between pharmacy's need for control and nursing's need for access and safety was found.

Based on this proven success, medDISPENSE equipment is now "standard issue" at every Regency hospital. Regency took the automated dispensing model one step further by eliminating cart fill. This distribution method saves the pharmacy time, streamlines inventory-management duties, and gives nursing access to practically all in-stock medications via the automated dispensing cabinets. We have found the best set up for a typical unit at a Regency hospital to be a 72-drawer medDISPENSE Base 72 paired with a 45-drawer Auxiliary Combo Tower and a Supply Tower for larger items, such as IV bags. These three components comprise our dispensing workstation. Each drawer in the Base 72 holds up to six different medications, or one controlled medication for increased security, so the capacity for a typical medDISPENSE workstation at Regency easily exceeds 425 line items.

We did have to make some spot-implementation workflow adjustments related to nurses pulling their morning medications earlier than anticipated and the increased demand for time on the automated dispensing cabinets. When eliminating a cart-fill-based distribution system, it is important that pharmacy and nursing work closely together to ensure a successful transition during the practice change. Once we established our new routine, we found the new approach worked well for us.

Our medDISPENSE equipment and our CPSI pharmacy management software communicate and exchange data via a profile interface. By selecting a patient's name on the touch screen, nurses can view all of the medications prescribed to that patient that have been reviewed and approved for dispensing by pharmacy. From this list, the nurse selects all the medications needed for the medication pass. The nurse then presses "Drawer Open," causing

only one drawer to open at a time, thus ensuring that the nurse picks the correct medication and decreasing the chance for a wrong drug error. Finally, all charges for dispensed drugs are transmitted from the dispensing cabinets to our pharmacy management system, eliminating the need for manual billing.

Over time, medDISPENSE automated dispensing devices have lowered our inventory costs, reduced medication errors, increased productivity, and reduced risk. Moreover,

their equipment is reliable and affordable—important factors to consider when analyzing capital expenditures and issues we pay close attention to at Regency. When deciding if dispensing automation is right for your facility,

ask your colleagues about their experiences with the devices. If you were to ask both our pharmacy and nursing staff if we would be willing to give up our medDISPENSE machines and go back to the old way of doing things, the answer would be a resounding "no."

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The corporate director of pharmacy at Regency Hospital Company, Bill Maguire, RPh, is a 1981 graduate of Northeastern University School of Pharmacy.

Using medDISPENSE cabinets, Regency nurses have 24-hour access to patient medications.



Where to find it:

medDISPENSE Circle reader service #25 or visit www.med-dispense.com.

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