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## Reducing Medication Errors Using Barcode Technology, by Sean McPhillips, CPHIMS

TriHealth has spent a great deal of time, money and effort tackling the challenges of minimizing medication errors within the healthcare delivery process. Recently, they have made significant progress towards a practical solution employing state-of-the-art technology coupled with the commitment from clinicians to improve workflow and the overall quality of care.

National statistics indicate that 38% of all medication errors in hospitals occur during drug administration to the patient. Once the nurse is ready to give the drug to the patient there is no other check to make sure that this is the right patient & the right drug. Patients have similar names, as do drugs. In a room with two patients the nurse could be interrupted when giving medications and give the first patient's medication to the second patient inadvertently.

From the time that medication is dispensed from pharmacy, the doctor may write an order to hold the medication or to discontinue it. The nurse may not realize that this has happened and give the medication anyway. When medication administration documentation is delayed, a second nurse may give the drug again and not realize the patient is receiving twice the dose.

According to Sue McBeth, TriHealth's Project Manager over this initiative, several solutions were considered. One included

pharmacy controlled changes by increasing the frequency they send the medication. The workload generated by this option was too much for current staffing. Another one was having a second nurse check the medication to be given before they go to the patient - again too labor intensive.

TriHealth's approach married barcoding of both medications & patients to close the loop of administration errors. The problem is addressed with technology instead of more people.

Scanning technology is more accurate than even having a second person check the medication before they are given to the patient. The scanning option also allowed for real time documentation of the medication administration. The doctor could see up to the minute medication received by the patient. Duplicate doses due to delayed charting would be eliminated. A prompt would inform nurses that the medication was discontinued or on hold. Stat medications, which are stocked on the patient area, would cause an alert to show if the patient had an allergy to the medication as the nurse tried to administer the medication. The nurse could be more efficient since medication administration and administration documentation would happen at the same time by way of scanning the patient wristband and medication.

All medication needs a barcode but only about 60% comes from

the manufacturer with a useable barcode. TriHealth bought a unit dose packaging machine so that repackaged medication has a barcode. Usage of RobotRx had already started TriHealth down this path since it works by way of barcode scanning for picking medications for the patient's daily set of drugs. This approach required TriHealth to purchase new equipment to create barcoded wristbands for patient identification.

TriHealth uses laptops on carts with attached scanners, in lieu of handheld devices to give nurses the ability to do more than just scan medications. By using laptops, nurses can document in computers other information associated with patient care. Nurses are working through a reticence to document in the patient's room. Some are more comfortable using the computer than others. Getting nurses and physicians comfortable using computers instead of paper charts for patient info is still a challenge.

Demos of the scanning process were well received by nurses. Ease of use has been a plus. Some of the physicians have embraced the project and are excited about the potential outcomes with respect to safety and timeliness of information about the care of the patient.

The goal ultimately is that all inpatients utilize the new medication administration and that they benefit from additional safety provided by process and technology. Med administration errors should drop to zero.

TriHealth hopes that all Medical/Surgical patients will be on-line with the system by the end of 2004. The next focus will be on Rehab and OB patients.

Finally, they will bring Critical Care patients on-line with the system. Target completion of this project is June 2005.

**Member Spot Light:**  
**Rick Moore, VP/CIO, TriHealth Inc., Cincinnati, Ohio.**

With over 25 years in IT, 20 years in Healthcare and 14 years at the CIO level, Rick has amassed a wealth of expertise in the healthcare IS/IT arena and is a recognized leader within our region. Rick has been a rather active member of HIMSS for over 10 years.

In community initiatives, Rick has participated in the formation of CHINs (Community Health Information Networks). His first involvement with CHINs was at GDAHA when he worked for Kettering Medical Center in Dayton. Now, Rick sits on the HealthBridge Board of Directors and is implementing a CHIN in the Greater Cincinnati area. HealthBridge has implemented a collaborative network that supports healthcare delivery by connecting hospitals and physicians in the Greater Cincinnati area.

**Success Story: TriHealth Wins "Most Wired" Award**

TriHealth was named one of the Top 100 "Most Wired" Hospitals or Health Systems in the country based on an annual Survey and Benchmarking Study conducted by *Hospitals and Health Networks*, a publication of the American Hospital Association.

Almost 1,300 hospitals were represented in the study, which is nearly 20% of US Hospitals. TriHealth was the only local hospital system in the Top 100 and one of only three in Ohio.

"We're thrilled to be among this elite list of hospitals and

systems recognized by *Hospitals and Health Networks Magazine*," said Rick Moore, VP & CIO of TriHealth. "I think the fundamental qualities of the IS/IT Plan TriHealth put in place several years ago to work in conjunction with TriHealth's strategic plan have enabled this achievement. We have made significant strides over the last several years in IS/IT and are positioned to meet the demands of tomorrow's technology."

"These hospitals/systems realize the power of electronic medical records to improve quality, safety and the patient experience," said Alden Solovy, executive editor of *Hospital and Health Networks Magazine*, which has named the 100 Most Wired hospitals and health systems for the past six years.

The 2004 scoring was based upon the hospitals' and health systems' use of IT and the Internet to address five key challenges: safety & quality, business processes, customer service, workforce, and public & health safety.

"Healthcare technology continues to be a critical component of our healthcare delivery system," says Mark Wheeler, MD, Chief Technical Architect, IDX Systems Corp. "The 100 Most Wired Hospitals not only demonstrate what is possible today, but also are innovators in focusing on future needs of our national health information infrastructure."

Rick Moore proudly represented TriHealth when he received the award at the Health Forum Leadership Summit in San Diego in August. Visit [www.hhnmag.com](http://www.hhnmag.com) for more information about the Top 100 "Most Wired" Hospitals.

## Chapter Business, Activities and Participation:

### Calendar of Events:

Event	Date & Time	Location	Registration
<b>CSOHIMSS Fall Conference 2004</b>	November 12 <sup>th</sup> , Time: TBD	Quest Business Center, Wingate Inn, 8405 Pulsar Place, Columbus, Ohio	<a href="#">Register</a>
<b>Improving Patient Safety Through Technology</b>	October 15 <sup>th</sup> , 8:00am to 4:00pm	Holiday Inn East, 4560 Hilton Corporation Drive, Columbus, Ohio	<a href="#">Register</a>

### Open Positions:

Currently, the only vacancy on the CSOHIMSS Chapter Board of Directors is the **Advocacy Chairperson**. We encourage our membership to become more involved in any way possible.

Active participation has its advantages! Members who participate in this capacity earn valuable HIMSS points which are necessary for advancement to Senior Member or Fellow status within HIMSS.

In addition, you will be plugged into what is going on at the chapter level and have an influential voice in what activities and conferences our chapter sponsors.

If you are interested in becoming more involved in chapter activities or if you are interested in volunteering in any other capacity, please contact Darby Dennis, at [contactus@csohimss.org](mailto:contactus@csohimss.org).

### Open Request to Members:

The CSOHIMSS Chapter has an open request to all members for any subject or issue that they would like to see the chapter address.

Addressing the issue could be in the form of a feature article or a conference presentation (either locally or nationally).

All suggestions welcome. Please consider those that are current, relevant and of

pressing concern to the contemporary healthcare environment.

Presentation and article suggestions should be forwarded to the Board at [contactus@csohimss.org](mailto:contactus@csohimss.org) for consideration.

### Academic Scholarships:

CSOHIMSS has modified the scholarship program to be a single \$1,000 award once a year, awarded in the Spring.

The CSOHIMSS Board of Directors unanimously agreed to the new program at the Board Retreat in June, 2004.

In addition to the scholarship awards, winning applicants will receive a complimentary one-year membership in National HIMSS as well as membership in the CSOHIMSS Chapter.

Anyone interested in applying for this scholarship, should go to the CSOHIMSS website to download an application for consideration.

### Chapter Sponsorship:

As mentioned in previous quarterly newsletters, the Board of Directors for the Central and Southern Ohio Chapter of HIMSS has revised the Chapter Sponsorship Program to better serve the membership. The new pricing structure and benefits are as follow:

#### Five Star (\$1,000 per year):

- *Two Full-Day CSOHIMSS Event Sponsor (Spring and Fall) with two Event Passes*

- *Premium representation at CSOHIMSS Luncheon*
  - *All other Three Star Benefits*
- Three Star (\$500 per year):
- *One Full-Day CSOHIMSS Event Sponsor (Spring or Fall) with one Event Pass*
  - *Attendee List for Event*
  - *Sponsor Display table and Introductions at Event*
  - *Logo featured on website*
  - *Listed in all CSOHIMSS communications*
- One Star (\$300 per year):
- *Contributes to CSOHIMSS Luncheon at National HIMSS Annual Conference, Includes free attendance to Luncheon, free to mingle with other attendees*

If your company is interested in becoming a Chapter Sponsor or if you have any suggestions as to how companies may benefit better from sponsorship, please request an application at: [contactus@csohimss.org](mailto:contactus@csohimss.org).

### Member Feedback:

## WE WANT TO HEAR FROM YOU!!!

This section posts questions and comments from chapter members. If you have a comment or question, send them to Sean McPhillips at [newsletter@csohimss.org](mailto:newsletter@csohimss.org) for consideration.