

Case Study



NE Georgia Uses Pharm Tech Service To Improve Nursing Satisfaction

At a Glance

Northeast Georgia Medical Center
Gainesville, GA

Solution Spotlight

- AcuDose-Rx®
- MedCarousel®
- PACMED™
- ROBOT-Rx®

Results

- Gained significant pharmacy efficiencies via integrated automation solutions
- Enhanced service to nursing via unit-based pharmacy technician redeployment
- Increased nursing staff satisfaction by 50%
- Increased HF-1 (heart failure) medication reconciliation to nearly 100%
- Saved nurses and other caregivers 15 minutes per patient admission and discharge

Overview

With the ROBOT-Rx system yielding quantifiable productivity improvements, Northeast Georgia Medical Center shifted pharmacy technicians into unit-based roles to improve service to nursing staff. These “concierge technicians” generated significant improvements in nursing staff satisfaction, and facilitated increases in HF-1 medication reconciliation scores that now approach 100 percent.

Challenges

Northeast Georgia Medical Center (NGMC) in Gainesville, Georgia, is a 557-bed facility serving 13 counties northeast of Atlanta.

By 2006, NGMC had realized significant productivity gains from its ROBOT-Rx implementation, which automates bar coding and distribution of 83 percent of medications. Unit-dose packaging is managed through the ROBOT-Ready™ PACMED™ high-volume packager, bulk packager, and overwrap packager. AcuDose-Rx® automated medication dispensing cabinets are stocked with narcotics and PRN medications. The MedCarousel® system is used for some first doses, cabinet restocking and inventory optimization.

“Automation freed up pharmacy technicians, giving us an opportunity to look at new ways to optimize medication distribution and improve service to patients and caregivers,” said Steve

Carlson, R.Ph., MHA, NGMC’s director of pharmacy services.

Answers

Carlson’s team interviewed nursing managers and conducted a pharmacy customer service survey that measured nursing staff satisfaction and identified remaining issues in several areas, including missing doses, turnaround time, bar code scanability, and telephone response time. Based on the results, NGMC launched a pilot program that stationed concierge technicians on unit floors from 7 a.m. to 5:30 p.m., to perform a variety of duties, including:

- Delivering medications directly to nurses or nurse servers outside patient rooms.
- Stocking and tracking controlled substances and urgently needed medications stored in automated dispensing cabinets.
- Facilitating medication transfers as patients moved.
- Removing discontinued medications and replacing them in ROBOT-Rx.
- Tracking and reporting medication errors and adverse drug reaction data to the pharmacists, along with patient allergy, height and weight information.

Additional duties included monthly unit inspections to pull expired medications and restock refrigerator units, assisting with order faxing to the pharmacy, and expediting medication delivery.

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Director of Pharmacy Services
Northeast Georgia Medical Center

In 2007, the program rolled out to four units at NGMC—cardiology, oncology, women & children including pediatrics and obstetrics, and surgery, which account for 423 total beds within NGMC.

“These units all have higher numbers of transfers in and out of units, similar types of services, high volume or intensity of services, and are geographically grouped within the hospital,” Carlson explained. “The technicians act as concierges for their units. Their mission is to serve as advocates for patients and staff in ways that enable nurses to work more effectively, and contribute to the overall quality of patient care.”

While the program requires the equivalent of 7.6 full-time technicians, productivity improvements from automation freed an equivalent of 4.8 full-time technicians, minimizing the need for new staff.

“We could show administration that redeploying technicians from the pharmacy limited the need for new hires, which helped build support for the program.” Carlson said.

With the concierge program in place, Carlson’s team turned its attention to medication reconciliation. “We find that recent nursing graduates do not have a strong pharmacological knowledge base,” he noted. “Our technicians have that knowledge base, so we asked, ‘Can they help improve the process by becoming involved?’”

In late 2008, NGMC implemented a pilot medication reconciliation program targeting heart failure (HF-1) improvements. From 7 a.m. to 11:30 p.m. daily, technicians assist with reconciliation in the emergency department, where

61 percent of admissions occur, and in medical/cardiac inpatient units. During admission, they interview patients, document the home medication list, and attach it to the chart. During discharge, they record physician medication orders in the patient’s clinical profile and alert nursing staff of any discrepancies.

“Technicians don’t replace nurses or doctors,” Carlson explained. “They complete the logistical portions of the process under their supervision, which saves nurses and other providers about 15 minutes per patient during both admission and discharge.”

Results

Deploying unit-based technicians had a significant, positive impact on both the quality of service and staff satisfaction.

A follow-up survey of nursing staff showed that overall satisfaction with pharmacy services increased by 50 percent in units served by technician/concierges. Overwhelmingly, nurses recognized the benefits of having technicians dedicated to their needs.

The medication reconciliation pilot program also yielded positive results. The Hospital HF-1 scores rose by 22.3 percent overall, the adjusted scores measuring the results of the performance of the unit based technicians. The adjusted scores demonstrated a 92.1 percent accuracy in the first quarter of 2009, and a 95 percent accuracy by the end of the year. By early in 2010, Carlson said, “the HF manager indicated that technicians were tracking at 100-percent accuracy on reconciliation. We could not achieve these numbers without their participation.”

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