Focus on JCAHO

ONLINE HOSPITAL DRUG FORMULARY — IMPROVING COMPLIANCE WITH NATIONAL PATIENT SAFETY GOALS

The Joint Commission on Accreditation of Healthcare Organizations’ (JCAHO) 2006 goals emphasize medication management. One key to facilitating compliance is the University Hospital online drug Formulary. Online formularies are becoming the standard for hospitals around the nation. They offer numerous advantages, including the ability to update new drug information immediately following Formulary changes or change other drug-specific information as it becomes available, while significantly reducing Formulary production and maintenance costs.

UAB physicians, pharmacists, nurses, and other health care professionals can easily access the Formulary with their user name and password on CDA-Horizon, the Health System’s secure Intranet site for clinicians, by selecting the SPP-SCR icon or clicking the desktop icon. Once the SPP-SCR Web page opens, click on “UAB Hospital” at the top of the page. Next, select “Reference,” and the “Drug Formulary” link option appears with other hospital references.

JCAHO Medication-based Goals

Reconciling medications is a major new JCAHO focus for 2006. As JCAHO Perspectives on Patient Safety (March 2006) guidelines explain: “Organizations need to have a process in place for finding out what medications their patients have been taking before prescribing any more medications. This is a continuum-of-care goal rather than simply an upon-entry-to-organization goal. Staff members must repeatedly reconcile medications each time the patient is transferred to another department within the organization or to another organization."

Reconciling medications requires:
• Developing a complete and accurate list of the patient’s medications (and maintaining this list separately throughout the rest of the steps)
• Comparing (reconciling) the listed medications created in step 1 with any new medication orders. Check for potential errors: omission of a medication, medication duplications, possible drug interactions, and name/dose/route confusion
• Creating a new medication list that now includes all the patient’s current medications
• Continuing to update this list as orders change throughout the patient’s length of stay
• Upon discharge or transfer to another organization, reconciling list 1 and the updated list with the discharge medications and giving the next provider of care, as well as to the patient, a complete and accurate list of all medications the patient is to take after discharge

Another key 2006 JCAHO goal involves look-alike/sound-alike drugs and labeling medications, containers, and solutions. JCAHO Perspectives notes that “an organization’s list of look-alike/sound-alike drugs must contain a minimum of 10 drug combinations of medications with similar names (pairing two drugs that sound alike). The Joint Commission does

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Health System NEWS

NEW RADIATION ONCOLOGY FACILITY BENEFITS FROM GENEROUS HAZELRIG GIFT

UAB Comprehensive Cancer Center has initiated a statewide fundraising initiative to replace its Wallace Tumor Institute radiation oncology facility, built in 1976. The “Rays of Hope” campaign set a community fundraising goal of $15 million to build a 50,000 square-foot, two-story building and an adjacent green space, the “Park of Hope,” located at 18th Street and 6th Avenue South.

UAB recently announced Birmingham businessman W. Cobb Hazelrig has given $5 million, one of UAB’s largest single individual gifts, to help build the Hazelrig-Salter Radiation Oncology Facility. The name honors Hazelrig’s parents, J. William and Virginia, and their longtime friends, Paul and Merle Salter, both Birmingham physicians. Now retired, Merle Salter, MD, joined the UAB faculty in 1967 following a residency here and chaired the radiation oncology department from 1986 to 1995. Groundbreaking will take place this spring, with completion scheduled for 2007.

UAB President Carol Z. Garrison, PhD, expressed the university’s gratitude to Hazelrig for “this most generous gift, which gives us enormous momentum toward completion of this important facility. We are delighted..."
Alexander Appointed To AΩΩA National Board

National honor medical society Alpha Omega Alpha (AΩΩA) recently appointed professor and vice chair of the Department of Pathology C. Bruce Alexander, MD, to a second term on its national board of directors. The AΩΩA board of directors elects the organization’s officers and is composed of leaders in medical education, a medical student, intern, and resident, and faculty chapter councillors.

“Dr. Bruce Alexander

“It is a privilege to continue to serve the AΩΩA, which for more than 100 years has recognized and perpetuated excellence in the medical profession — a mission we honor at UAB,” Dr. Alexander says.

Programs and communications between chapters and the national governing board are coordinated from the AΩΩA national office in Menlo, California.

Chartered in 1903 in Illinois, AΩΩA chapters were established in 17 medical schools within a decade of the organization’s founding. Today there are 124 active chapters in the United States and Canada.

For details: www.alphaomegalpha.org.

Online Hospital Drug Formulary

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not prescribe a specific method for managing look-alike/sound-alike drugs but offers safety strategies for avoiding look-alike/sound-alike drug errors.”

Regarding labeling medications, medication containers, and solutions: “This goal is applicable to ambulatory care, critical access hospitals, and office-based surgery as of January 1, 2006, and as of yet there are no dates to demonstrate organizational compliance.

“Organizations can follow standard MM.4.30 [Medication Management, the fourth chapter of the JCAHO Standards] to determine what is to be included on the label, including name, strength, amount (if not apparent), expiration date (when not used within 24 hours), and expiration time (when expiration occurs in less than 24 hours).”

One exemption for labeling occurs when a solution or medication is poured or drawn from a properly labeled container into another container or syringe and administered immediately. JCAHO Perspectives adds. “In this situation, labeling is not required. In addition, verification of the label is required unless the same person prepares, labels, and uses the medication or solution.”

Role in Safety

“UB’s online Formulary plays a huge role in reducing errors and increasing patient safety,” says Deborah Grimes, RN, JD, UAB director of JCAHO and Regulatory Compliance.

Maintained and updated by the UAB Health System Drug Information Service, the Web site is undergoing construction to enhance features, however, this work will not interfere with the Formulary’s availability. The site soon will also feature: guidelines for use of medications established by the Health System’s Pharmacy and Therapeutics (P&T) Committee, the Drug Information Bulletin, the monthly publication of the P&T Committee; updated warnings, alerts, and recalls from the Food and Drug Administration; as well as product shortage information.

For questions about the Formulary, contact the Drug Information Service at 934.2162. Suggestions for improvement of the Formulary are welcome and should be sent by e-mail to Rachel Slaton, Drug Information Pharmacist, rmslaton@uabmc.edu. If you have a Health System computer and cannot access SCR-SPP or experience other technical problems, call the HSIS Help Desk at 934.8888.

TKC Ends Lab’s 2nd Floor Bottleneck

The Kirklin Clinic® laboratory ranks as the building’s busiest area, where personnel process an average 700 lab requests a day, a number that often exceeds 900 on Mondays and Tuesdays. Recent changes have streamlined patient flow and shortened wait times, explains Administrative Director for Outpatients Labs Kathy Goolsby, who worked with the Department of Pathology, and TKC patient access management and administration to improve processes for patients and staff. TKC labs are jointly managed by the Department of Pathology and UAB Hospital, and people from both entities worked together to address wait times.

“During the busiest hours, long waits created a bottleneck for patients lining up at the 2nd floor registration desk, overflowing into the lab waiting area,” says Goolsby. “During peak times, patients often waited 45 minutes to an hour to complete their visits. Now, process improvement has trimmed the wait time to 30 minutes or less.”

To achieve this turnaround, lab and patient access management increased staffing during the lab’s busiest hours (9 AM to 1 PM). “During these periods, we’ve added registrars and developed a pool of phlebotomists we can call on as-needed,” Goolsby says.

“To address noise and congestion created by patients and families waiting to register for lab work, we redesigned the 2nd floor lobby area to ease patient flow. This was an especially important step, because this area serves as a main thorough-
fare through TKC to the UAB bridges,” explains Hospital Finance Manager Bruce Grasso, who helped facilitate the redesign.

“Many people from different departments contributed time and effort to revamp processes and redesign patient flow for maximum efficiency,” says University Hospital Assistant Executive Director Anthony Patterson. “We began making changes in September 2005, and by October we saw dramatic improvements. Patient satisfaction scores rose, and we’ve received compliments from new and returning patients.”

“Our goal is to provide compassionate and efficient care to our patients,” says TKC Chief of Staff Nancy Dunlap, MD, PhD. “Improving delivery of patient care is often complicated and challenging. Working with hospital and clinic staff, we initiated a number of small changes that decreased waiting times and increased patient satisfaction. These incremental steps and the combined effort of many people have led to substantial and sustained improvements.”

**NEW RADIATION ONCOLOGY FACILITY BENEFITS FROM GENEROUS HAZELRIG GIFT**

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the building will bear the names of individuals who have meant so much to this community and to UAB.”

The Cancer Center Supporters group recently surpassed their goal of $780,000 by nearly $250,000, raising a record $1,016,000 for the radiation oncology replacement facility. The total was announced at the organization’s February 27 Gala 2006, a festive evening at The Kirklin Clinic. One-fourth of funds raised by the Supporters will benefit patient and family services, including comforting amenities for all patients, affordable lodging, prescription drugs, transportation and financial assistance for patients in need.

**Meeting Needs**

The Department of Radiation Oncology has doubled its faculty in recent years, enabling each member to specialize in one or two disease sites. Seven staff medical physicists help design treatment strategies and provide quality assurance as compared with many institutions that depend on a rotating pool of physicists. The department today treats more than 30,000 patients a year from around the southeast.

UAB radiation oncology specialists focus on the future of cancer treatment and, in particular, on therapies that spare healthy cells by tightly targeting malignant ones. "New radiation oncology equipment to achieve these goals requires considerably more space than available in our current location," says Radiation Oncology Department Chair James A. Bonner, MD, who holds the Merle Saltor Endowed Chair of Radiation Oncology. "These include large linear accelerators and other imaging and treatment equipment that will soon be standard for the field," he says.

"Few radiation oncology departments in the country have such significant research programs. UAB's department is among a handful earning National Institutes of Health grants," says Peter Emanuel, MD, acting director of the UAB Comprehensive Cancer Center. The department presently partners with Singing River Hospital in Pascagula, Mississippi, on a $3.6 million grant from National Cancer Institute’s Cancer Disparities Research Partnerships Programs. Among other noteworthy examples is Dr. Bonner’s study of small protein molecules as molecular targets that induce radiosensitization, enhancing the effects of radiation therapy.

**Urban Oasis of Healing**

“Patient comfort will be a highlight of the new facility,” says Arpan Limdi, director of hospital facilities planning and management. "Patient rooms and treatment facilities will feature warm and inviting spaces that provide a healing environment for both patient and staff. The Park of Hope will offer an island of greenery for quiet reflection in the midst of our busy urban campus.”

**Hazlerig Personally Touched**

Helping UAB Cancer Center with its fundraising goals has become a personal

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**INFOBAHN**

**Cancer Trends**

The National Cancer Institute has released “Cancer Trends Progress Report: 2005 Update,” which summarizes the nation’s progress against cancer in relation to Healthy People 2010, a national health promotion and disease prevention initiative developed by Health and Human Services. This online report was first issued in 2001 as the “Cancer Progress Report,” and is released biennially. This year’s expanded report offers updated national trends data and a variety of new features.

http://progressreport.cancer.gov/

To access a Synopsis article from the last 2 years, visit our Web site at www.uabhealth.org/synopsis. You can search by date or subject in the left sidebar.

UAB physicians: visit MSI, the password-protected Medical Staff intranet site, at https://horizon.hs.uab.edu.
New Radiation Oncology Facility Benefits from Generous Hazelrig Gift

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mattered for Hazelrig, whose family has been affected by cancer several times. “Birmingham is where I have lived my entire life, and I consider it a privilege to be able to give something back to the community. Each of my grandmothers died from cancer, and both my parents have been touched by this disease, so it’s very important to me to be involved in helping provide quality care to cancer patients of this area. Merle Salter has been with my family through all our battles against cancer. She’s the kind of friend I’d like to be.”

“Naming the building for both a local family and a former colleague and department chair is the right thing to do in this environment where relationships between university and community are extremely vital,” Dr. Bonner says.