Healthcare Organization Commitment

Contact Details

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Position
Chief of Pharmacy Services

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Commitment Details

Commitment Name
Improve the overall quality and safety of the preparation and testing of compounded sterile products in the pharmacy department.

Participants
Chief of Pharmacy Services
Pharmacy Managers
Pharmacy Technicians
Pharmacists
Pharmacy Quality Assurance Coordinator

Patient Safety Movement Foundation | patientsafetymovement.org
What Patient Safety Challenge does your Commitment address?
Challenge 3 - Medication Management

How Many Hospitals Will This Commitment Represent
1

Commitment Summary
Medical and pharmacy literature clearly articulates the problems of medication errors with incorrectly compounded sterile products. In addition the New England Compounding crisis (fungal/bacterial contamination) further articulated the need to improve the compounding process and also the testing and quarantine process before releasing compounded drugs into general circulation. Furthermore, USP 797 regulations, as well as new federal and state legislation is expected to put further emphasis into improving the quality of IV admixture compounding services.

Commitment Description & Detail
The BWH pharmacy department is committed to improving the quality of the IV admixture compounding process and to reducing the incidence of compounding mistakes and potential for product contamination. The title of our project is to design and develop the Sterile Products Room of the future. This quality improvement and safety improvement process began with the implementation of IV Robotic compounding devices and IV workflow assist devices that use optical scanning, bar code verification, gravimetric assessment of compounding accuracy and electronic data storage in the sterile admixture process. The second phase of the process included the hiring of an on-site microbiologist in the pharmacy department to oversee and manage the quality assessment and testing program for all staff, all clean rooms, and compounded sterile admixtures. The third phase included a comprehensive testing and product quarantine program for non-immediate use products that would not release the products until all test results were confirmed and the products deemed to be defect free. The last phase will focus on moving all IV admixture compounding to be done with gravimetric accuracy assessment prior to dispensing to patients. This includes all patient specific and non-immediate use medications including chemotherapy. The goal for FY14 is 85% and ultimately to get to 100% gravimetric assessment.

Action Plan
BWH is a 793 licensed bed tertiary care academic medical center. BWH dispensed over 8.5 million doses of medications to our inpatients of which approximately 1.2 million are IV admixtures. Initial use of IV robotics began in 2008 with a Cytocare robot. We now have 4 IV Station robots on site, 4 IV soft workflow assist devices, and an IV station ONCO (Chemo robot) due on site early spring. Q/A coordinator (microbiologist) Hired June 2013. Interface of robot software with BWH pharmacy system complete. Implementation of Simplify documentation system November 2013. Currently 60% of IV admixtures are being made
with gravimetic assessment. Target is 85% by end of Fiscal year 2014

Commitment Timeline
Timeline is for total implementation to be at end of FY 2015