



from the Automation Expert

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HIGH-TOUCH, HIGH-TECH PATIENT-CARE APPLICATIONS

I'VE BEEN THINKING ABOUT COCKER SPANIELS, groceries, and patient satisfaction.

I don't believe in reincarnation, but if I did, I'd want to come back as a cocker spaniel. It all goes back to a tour I made of a veterinary teaching hospital a few years ago. Gigi, my friend and the director of pharmacy services, served as my guide. When we passed through admitting, she saw a familiar friend who was being readmitted for cancer treatment. Dropping to her knees, she began assuring the little tail-wagger, eye to eye, that while she was glad to see him again, she was very sorry he had relapsed, and that they would take very good care of him—all the time scratching his back and roughing up his ears.

I visit a good number of people hospitals each year. When passing through admitting areas, I sometimes wonder if it might not be a good idea for nursing and medical schools to require a rotation in a veterinary hospital. Eventually, I make my way to a patient-care ward for the purpose of observing medication administration utilizing bar code point-of-care (BPOC) technology. I've seen the routine several dozen times. The nurse scans the bar code on the patient's wristband and on the medications they are about to administer. I can't help it: I usually ask the patients if they feel like a grocery item.

Have you seen the television commercial that opens with a young man approaching a bank window and informing the teller that he wants to make a deposit? She asks for his account number, then tells him to lean forward and applies a label to his forehead—with a staple gun. Bang. "Ouch! What is this?" he asks. "It's your customer tracking number and bar code. It will speed you right through the line. Over there." In what turns out to be a long, slow-moving line, the customer asks the person in front of him, "What's the hold up?" A voiceover asks us, the viewers, if our banks are getting a bit impersonal, while the camera pans to the front of the line, where a teller is impatiently passing a customer's head, as if it were a melon, back and forth over a built-in scanner, lamenting, "I hate it when these things don't scan."

So, back to the hospital bedside, how do patients respond to my feel-like-a-grocery question? Far from registering complaint, every one of them has had something good to say about being scanned.

Why is that?

First, because patient fears are calmed by high-tech systems, they feel safer. An ASHP survey a few years back revealed that the number-one fear of hospitalized patients is that they will be given the wrong medication.

My son, in junior high at the time, asked me to explain what I do for a living to one of his friends. I told the boy that I help hospitals automate the medication-use process, and then explained, "For example, before a nurse gives a

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medication to a patient, she scans a bar code on the patient's wristband. Then, she scans the medication and..." My son's buddy interrupts me with, "And then there won't be a mistake."

You don't have to be a physician or scientist to get it; this is not rocket surgery. Patients have been living with scanning at supermarkets and department stores for years. They immediately get it when they meet the technology in a hospital.

Subliminally, patients are reassured that the latest technology is at work when they hear the beeps accompanying the scans. Scanning is one more way for a hospital to send a message to their patients: "We are high-tech around here."

Second, I believe patients gain comfort from the increased touch that accompanies bedside scanning. I think we tend to overlook how BPOC makes the medication administration process more—and not less—personal. It is not uncommon for some nurses, in the early days of employing BPOC, to complain that the technology requires more time with patients. "It takes more time to explain what we are doing with the bar code read-

ers, not to mention more time to administer each medication." Hmm...that's interesting. Did I hear "more time with patients"? For years, nurses have rightfully protested that the increase of technology has resulted in decreasing their time with patients.

BPOC requires the nurse to spend more time with each patient. Whether or not the reasons register with patients, they love it. Furthermore, while BPOC requires more time at the administration phase, it requires less of the nurse's time in the documentation process. Some hospitals tell me the time required for BPOC compared to manual systems is a wash when everything is said and done. Others tell me that the net time decreases with BPOC.

In any instance BPOC brings higher technology, higher touch, and higher patient satisfaction to a hospital. So, if I am ever admitted to your hospital, you don't have to scratch my back or ruffle my ears. But don't look at me like I'm from Pluto, if—before you give me my meds—I prefer that you would take me to your reader. **R&P**

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Photo courtesy of Cerner/Bridge Medical