Standardize 4 Safety Webinar Series

1. Background and purpose of the Standardize 4 Safety Initiative – Let’s go back in time
2. A look at current and future S4S medication lists – Where are we now?
3. How the S4S lists are being evaluated – What does the data say?
4. Challenges with implementation of the S4S Initiative – Jumping over the hurdles
5. How to ensure successful implementation of the S4S initiative – Gather your tools
6. Implementation of the S4S Initiative at an Academic Medical Center – An adoption story
ASHP and Bainbridge Health Collaboration

- Bainbridge Health
  - Organization focused using data from infusion devices to improve safety and drive standardization
  - A network of infusion pump data from >100 hospitals
- Goal of collaboration: to enhance the distribution, adoption, and sustainability of the Standardize 4 Safety Initiative

Learning Objective

- Outline the steps that have been taken to develop the S4S initiative and medication lists
Case example

- **Level 1 Trauma Center**
  - Heparin 25,000 units / 250 mL
  - Final concentration: 100 units / mL

- **Tertiary Care ICU**
  - Heparin 25,000 units / 500 mL
  - Final concentration: 50 units / mL

Background: Statement of the problem

- No national consensus for standard concentrations of IV medications
  - Continuous, intermittent, etc.
- Patients are transferred between patient care areas and locations
- IV medications have inherent potential for errors:
  - Compounding
  - Pump programming
  - Documentation
- Vulnerable patients are involved
  - Critically ill
  - Pediatric
  - Geriatric, neonate
- Weight categories, dosing units, and special administration (route other than IV)
Standardize 4 Safety

▪ First national, interprofessional effort to standardize medication concentrations to reduce errors and improve transitions of care
▪ Expert panels
  – Physicians, nurses, and pharmacists
▪ Process
▪ Funding received from the Food and Drug Administration (FDA) Safe Use Initiative

Standardize 4 Safety: Goals

▪ Goals:
  1. Identify nationwide expert interprofessional panels
  2. Create standards for:
     • Adult and pediatric continuous IV infusions
     • Adult and pediatric compounded oral liquid medications
     • IV intermittent infusions
     • PCA and epidural medications
     • Oral liquid standardized doses
  3. Disseminate the standards and assess adoption

“Representing the culmination of a multi-year, multidisciplinary effort to improve medication safety for children and adults nationwide.”

Benefits of Standardization

- Improves patient safety: More seamless transitions of care
- Improves technology integration: Promotes use of formularies and drug libraries
- Accelerates manufacturing: Streamlines production, allows for formulation of premixed medications
- Ensures consistency during transitions of care: Reduces potential for dosing errors
- Reduces operational variation: Enhances provider efficiency
- Simplifies ordering: Fewer choices decrease provider uncertainty

Questions & Feedback

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www.ashp.org/standardize4safety