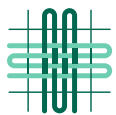


Drug Diversion Prevention Program Increases Efficiency, Improves Safety

About Dartmouth Health



Dartmouth Health

With roots dating back to 1797 when Geisel School of Medicine at Dartmouth — one of the

original four medical schools in America — was founded, Dartmouth Health has been committed to providing innovative and compassionate care for communities across New Hampshire and Vermont. Today, the system maintains nine community and critical access hospitals and clinics comprising more than 800 beds, recording nearly 3 million outpatient visits each year and employing over 16,000 professionals. The system also includes an academic medical center, Dartmouth Hitchcock Medical Center, Children’s Hospital at Dartmouth Hitchcock Medical Center and Dartmouth Cancer Center.

As a primarily rural health system, Dartmouth Health is a pillar of the community, and its leaders aim to continually enhance patient safety.

Drug Diversion Prevention Program

Hospitals and health systems closely monitor medication management, including controlled substances like opioid-based pain management drugs. Although drug diversion occurs infrequently, Dartmouth Health developed a Drug Diversion Prevention Program to further strengthen its protocols and minimize the potential for the mishandling of medications.

Leaders from across the system — including Dartmouth Health’s quality, pharmacy and security departments — worked together to develop the new program to protect patients, employees, care sites and the communities they serve. This shared operational development of the program provided the team with a wide variety of perspectives, responsibilities and authorities to carry out this important work. The team’s collective efforts involved a culture shift around accuracy and management of medications by frontline staff, including anesthesiologists and nurses. It also included developing new standards, processes, procedures and technologies that improved medication tracking.

Program Results

The program has been successful in ensuring patients’ medications are delivered safely and accurately. A new dose reconciliation process, for example, improves safety by requiring all drugs given in the hospital to be ordered, retrieved from a medication drawer, delivered to the patient and put through a wasting process if some medication is not used — all of which require documentation. Before this process was in place, average dose reconciliations took eight days on average. After implementing the new strategy and technology, Dartmouth Health reduced the turnaround time to less than three days.

An unexpected benefit of the program has been the recognition by leadership that this combined approach of operations and quality creates a good pathway to introduce other initiatives at Dartmouth Health.