Connecting the disconnected: How can you bring greater efficiency into your Ambulatory Surgery Center?*

Success in the ASC market depends on several drivers including efficiency.

Urgency around being efficient can be especially important as patient volumes continue to increase in outpatient settings.

Of course, you must also keep costs under control—while addressing patients' heightened safety concerns.

But the attention on the pandemic is masking a more significant long-term trend: ASC centers like yours are taking on greater responsibility and risk as more complex and diverse procedures shift out of the hospital, putting a strain on efficiency.

And medication management is one of the increasingly complex problems where efficiency is critical to your success.

But if you look at your current workflow, it's disjointed and relies on several manual steps—documenting and tracking inventory, storing and securing meds and controlled substances, administering the right med to the right patient, etc.

Without a standardized workflow, staff often depend on collective experience or "muscle memory" to do these tasks. Others may use cabinets or "tackle boxes," which are dependent on keys and passwords that can be compromised.

What risks does this approach pose to your organization?

- Inadequate medication controls opens the potential for drug diversion that can result in investigations and fines
- Documentation requirements can be challenging for a lean staff, which may require additional time to resolve discrepancies
- Despite your staff's best intentions, they could dispense and administer an incorrect medication—particularly when they're stressed

10%-15% of healthcare professionals will **misuse drugs** or alcohol[1]

* According to ISMP and ASHP guidelines on the use of ADCs

BD

Bring medication management up to industry standards

Healthcare facilities are recognizing that they must look at the medication management process as a complete system, rather than disconnected transactional segments.

And when you work with BD, you'll use automation to help your facility achieve a more standardized medication management workflow.

With BD Pyxis™ MedBank, you can:

Help take the guesswork out of inventory management: With BD, you'll electronically log every med added or removed from the BD Pyxis™ MedBank—and automatically track expiration dates, item costs, lot numbers, and par levels entered into the system—relieving the burden of manual tracking. You'll use inventory reporting to adjust par levels and tailor your formulary based on usage patterns, helping you address unused meds while clearly understanding which items are costing you the most. And with CUBIE™ pockets inside your BD Pyxis™ MedBank, you can reconfigure your medication real estate without disrupting your medication management best practices.

Help control and trace who accesses each medication: When you subdivide your inventory into CUBIE™ pockets, you can restrict access to single line items—especially the controlled substances and high-cost meds that may be at higher risk for diversion. You'll assign medication access privileges by person, item, or workflow, so you have visibility at the individual level. And with discrepancy-related reports—pulled from the cloud-enabled myQLink data reporting warehouse—you can quickly provide the details auditors request, down to the exact date or person.

Advance med management despite your constraints: With BD's expertise in medication management, you'll be able to bring medication management best practices into your ASC based on your specific goals. Using the BD Pyxis™ MedBank platform—which includes the myQLink reporting engine, EMR integration capabilities, and highly configurable inventory devices—you can design a system that can be reconfigured as you grow. And with multiple deployment options, you could potentially implement a whole new platform in as little as 90 days, freeing you to focus on both progress and revenue.

Ready to see what this could look like at your ASC? LEARN MORE NOW

References:
1 ASHP Guidelines on Preventing Controlled Substance Diversion 2022, pg 2.

Manufactured by: CareFusion 303, Inc. a wholly-owned subsidiary of Becton, Dickinson and Company (BD) 10020 Pacific Mesa Blvd.
San Diego, CA 92121, U.S.

bd.com