NEW SOFTWARE TRACKS MEDICATION

A new software tool, Pandora, has been deployed at VUMC to track dispensing of medications at the AcuDose-Rx cabinet. Pandora facilitates the management of inventory and the ability to track dispenses for possible diversion. Pandora applies statistical analysis to AcuDose-Rx cabinet activity, including the timing and dosages of medications removed.

The goal of the program is to provide increased efficiency and safety of medication control in the AcuDose-Rx system. There are currently 165 AcuDose-Rx cabinets deployed with an average of 250 medications in each location. Approximately 14,000 doses are dispensed from AcuDose-Rx cabinets each day, so effective data support is essential.

“Diversion is a big problem in health care. Fifteen percent of nurses will struggle with impairment or addiction at some point in their career,” said Andrea Bryant, PharmD, MBA, MHA, program director for Controlled Substances and Inventory Integrity in the VUMC Pharmacy.

In the terminology of the United States Drug Enforcement Administration, medication diversion is the channeling of prescription drugs for uses that are not medically authorized. This includes theft,

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Using Pandora, Bryant compares user groups to look for trends in dispensing patterns. Deviation from these trends calls for further evaluation.

“For example, a report may show that there are 33 nurses on a unit who dispense a certain drug. The average number of dispenses per nurse is 12 doses, but one nurse has dispensed 60 doses. We would look more closely to determine why one person’s dispenses were so much higher than the peer group. There may be a good explanation, but we want to determine what that reason is."

In an average month, there may be up to 70 instances flagged for further evaluation, but only four to five that cannot be explained after detailed review. In these cases, the information is forwarded to the nurse manager for further investigation.

A pilot group of 10 nurse managers has been trained to use Pandora, and all managers will be trained by the end of April.

Pandora allows users to run reports in myriad ways – looking at trends in a single day or whole month, looking at a specific drug or all narcotics, looking at all nurses in a peer group or a single nurse.

“We in no way want to discourage appropriate use of medications and the provision of excellent pain management. But at the same time, if there is a trend we cannot explain, we will look into it,” Bryant said. “Pandora is really about patient safety and detecting potential problems quickly."

Another benefit of Pandora is the ability to monitor medications stocked in the Acu-Dose Rx cabinet and tailor the items to meet each unit’s specific needs. “For example, a report may indicate that a unit routinely runs out of a specific item. Pandora allows us to adjust the par level based on average daily dispenses. Also, Pharmacy can remove items that are no longer being used to make more space for things that are dispensed daily. We want nurses to have what they need every time they go to the cabinet.”

Ultimately Pandora is about being proactive. “We can spot unusual trends before they become a bigger problem,” Bryant said.

Certification is the formal recognition of specialized knowledge, skills and experience demonstrated by the achievement of standards identified by a nursing specialty to promote optimal health outcomes. After meeting defined eligibility criteria, a certification candidate achieves a nationally recognized credential through successful completion of a rigorous examination.
CLINICAL/TRANSLATIONAL RESEARCH STAFF COUNCIL CREATED

Nurses have a new group to turn to for issues about clinical and/or translational research.

The Clinical/Translational Research Staff Council provides a forum for discussion, information sharing, advising both clinical and translational research staff and leaders, and evaluating systems designed to support clinical research activities under the Shared Governance model.

“This Council represents all of human research occurring within Vanderbilt – not just within the borders of the patient’s ICU room, but into the outpatient setting and further out into the community and then even beyond to the translational level of research. It is not solely a nursing council. It is not solely clinically based,” said Wendi Mason, MSN, RN, ACNP, Interstitial Lung Disease Coordinator, and co-chair of the council.

Along with Mason, Vicki Sandlin, MSN, RN, Research Nurse Specialist III, is also co-chair of the council.

There are 12 council representatives and three executive sponsors: Katherine Hartmann, MD, PhD, associate dean for Clinical and Translational Scientist Development; Gordon Bernard, MD, associate vice chancellor for Research and director of the Vanderbilt Institute for Clinical and Translational Research (VICTR); and Marilyn Dubree, MSN, RN, NE-BC, executive chief nursing officer.

The new council, operating under the Nursing Staff Bylaws, replaces the former Clinical Research Staff Council. The group held its first meeting in December and plans to meet about six times per year.

“Through the scope of our work we intend to provide a voice for research staff to speak through their representative with Nursing and Research Administration – and vice versa – in order to enhance our work environments, develop mentorships, recognition and continued education,” Mason said.

The council will hold a Town Hall meeting on Monday, Feb. 4 at noon in Light Hall room 208 to introduce their work and the 12 representatives to clinical and translational research staff members.

The council is also developing a SharePoint website to facilitate information sharing between the group and research staff. Staff should contact a council representative or the council co-chairs to discuss ideas for future agendas or to get additional information.

NURSES WEEK 2013

Awards & Recognition Celebration: May 3 at 3 p.m.
State of Nursing Address: May 14 at 8:30 a.m.
Award nominations due March 4.
Click here for information and online forms
CERTIFICATION EXAM REVIEW COURSES

Nurses who achieve and maintain professional certifications validate their professional knowledge and commitment to improving patient healthcare standards.

Vanderbilt University Medical Center’s Department of Nursing Education and Professional Development is pleased to host Certification Exam Review Courses to help you take your nursing career to the next level.

Courses are free to VUMC staff nurses and open to community nurses for a fee. Contact hours are offered. Click here for more info.

CNOR Exam Review  
Feb. 16-17

Nursing Executive Exam Review  
May 16-17

Pediatric Nursing Certification Exam Review  
June 5-6

REFERRAL AND RELOCATION PROGRAM

Vanderbilt will pay $2,500 to any employee who successfully refers a BSN nurse with at least one year of prior experience for a full-time (.75 FTE) nursing position. The referring employee will receive $1,250 once the nurse has been employed 90 days and another $1,250 once the nurse has worked at Vanderbilt for one year. The referral program will run from Feb. 1 until April 30. Click here for more information.

CHANGE IN LICENSE RENEWAL PROCESS

As of Feb. 1, 2013, the Tennessee Board of Nursing will no longer issue letters to nurses who are late getting their license renewed at the end of the month. These letters have been issued in the past to enable nurses to work until their license renewal was viewable on the Board of Nursing website.

Starting in February, nurses will need to renew their licenses early enough for the renewal to be viewable on the Board of Nursing website, which typically takes up to 72 hours. If the license is not renewed on time, the nurse will be on unpaid administrative leave until the license is viewable online.

Nursing licenses are renewed every two years in your birth month. Each nurse has a professional responsibility for his or her own license renewal. If you have questions, please contact your manager, or click here for more information on the Tennessee Board of Nursing website.

WELCOME NURSE RESIDENTS

The Nurse Residency Program helps new nurses transition from nursing school to professional practice through hands-on clinical experience, interactive education sessions and the support and guidance of staff. Meet the Winter 2013 cohort:

554 Inquiries  
322 Applications  
214 Interviews  
125 Nurse Residents

- Pediatrics: 38  
- Adult Critical Care: 18  
- Adult Medicine: 28  
- Adult Surgery: 19  
- Adult ED: 12  
- Psychiatric Health: 2  
- Women’s Health: 4  
- Burn: 4

94% BSN  
3% ASN/ADN  
3% matriculating to MSN  
3.54 Average GPA

64 Nursing Programs  
25 States, plus D.C.