

Technology and culture make hospitals safer

The article on medication bar-coding gives the impression that new technologies make no difference in reducing hospital errors ("Bar codes no cure for drug errors," July 1). This has not been our experience.

In 2004, we were among the first health systems to institute a medication administration bar-coding system. Since then, Our Lady of Lourdes Medical Center has reduced the number of reported medication errors by almost 40 percent. Additionally, more than 7,000 medication errors have been prevented across our

system by notifying the nurse before the wrong medication was given.

Although there is the potential that patient ID bands will fail to scan once damaged, our incidence of failed patient ID scans is less than one half of 1 percent. Technology is effective only if used properly and designed with input from the clinicians who actually use it. The author correctly indicates that the majority of the errors were human or process errors — not flaws in the systems.

We agree with Dr. David B. Nash's statement, "A bar code is

swell, but without a culture of safety, it is not nearly as valuable as everybody believes." Hospitals must not mistake technology for diligence. Extensive training, strict adherence to procedures and constant process improvement are imperative.

Used properly, medication bar-coding is a highly effective tool. Our hospitals are much safer having the technology than they would be without it.

Bar codes are only one component of an extensive safety program. We are also addressing hospital-acquired infections, and we

have instituted a fall-prevention program and electronic charting, among other initiatives. The results speak for themselves. Our Lady of Lourdes Medical Center was recently named among the top 5 percent of hospitals nationally for patient safety by HealthGrades, a health-care rating organization.

But we are not resting on our laurels. A culture of safety recognizes that our work is never done.

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