BUSINESS RULE: SESLHDBR/078 - Use of Bar-code Scanning within the Dispensing Process in SESLHD Pharmacy Departments

Name	Use of Barcode Scanning within the Dispensing Process in SESLHD Pharmacy Departments		
What it is	Barcode scanning reduces the likelihood of dispensing errors through electronic verification of the selected product against the dispensing label. This business rule describes the process for the use of barcode scanning during the dispensing process.		
Risk Rating	Medium	**Review Date**	September 2024
What it is not	This process does not apply to areas outside of pharmacy departments. It does not apply to supply of imprest or bulk medications.		
Who it applies to	All pharmacy staff involved in the dispensing of medications.		
What to do	Barcode verification is incorporated into the dispensary workflow such that it acts as a checking process, rather than a product selection process. It should be used just prior to attaching the label to the product. The dispensing process incorporating barcode verification is as follows: 1. Ensure a check of the clinical appropriateness of the prescription has been performed prior to dispensing. 2. Process all the required medications for that patient in iPharmacy, generating dispensing labels. 3. Select the appropriate products, using the prescription to guide selection (not the labels). For the first medication, scan the barcode on the dispensing label and the barcode on the product. Visually check iPharmacy to ensure that the product scanned matches. (Note: When scanning there is no audible alert if the product does not match; there is a need to look at the screen and confirm.) 4. Attach the label. 5. Repeat steps 4 and 5 for the next product. 6. Repeat until all products have been labelled. 7. Visually recheck all labels and products against the prescription. 8. Pass to the checking pharmacist for a final check (where possible) or double check your own work.		

When to use it	This process applies to dispensing of all inpatient medication orders, discharge and outpatient prescriptions.
	
	The only exclusion to the use of barcode scanning is the dispensing of/from medication packs that do not include an appropriate barcode. This may be because they are:
	   • Not in the original pack e.g. returned from the ward
	   • Supplied as a part of a trial or study
	   • Obtained under the Special Access Scheme (SAS)
	   • Extemporaneously prepared

Why the rule is necessary	This business rule ensures that all pharmacy staff are aware of the agreed process for using barcode scanning during the dispensing process, to ensure that the technology effectively reduces dispensing errors as intended.

Who is responsible	Directors of Pharmacy should:
	  - ensure that all pharmacy staff members are made aware of the need to use barcode scanning during dispensing, and undergo appropriate training
	  - monitor the use of barcode scanning and the occurrence of dispensing errors to ensure compliance with this business rule
	  - Monitor the rate of unscanned and failed items to identify issues and optimise the rate of barcode scanning.
	Pharmacy staff should:
	  - use barcode scanners when dispensing medications in pharmacy in accordance with the agreed processes described in this business rule
	  - understand that barcode scanning is an aid to minimising selection errors but not a substitute for other checking procedures.

Functional Group(s)	Pharmacy
Ministry of Health / SESLHD reference	1. NSW Health IB2014_048 - Implementation of Barcode Scanning in NSW Public Hospital Pharmacy Departments 2. PSA Professional Practice Standards: Version 5 (2017): Standard 3: Dispensing and Other Supply Arrangements 3. PSA Dispensing Practice Guidelines (2019) 4. Pharmacy Board of Australia: Codes and Guidelines – Pharmacy Guidelines for Dispensing of Medicines (accessed 28/02/17)
Executive Sponsor	Executive Director Operations, SESLHD
Author	Katie Kerr, QUM Lead Pharmacist, SESLHD

Revision and Approval History

Date	Revision Number	Author and Approval
February 2017	DRAFT	Katie Kerr, QUM Lead Pharmacist, SESLHD
March 2017	DRAFT	Reviewed by Pharmacy Directors
August 2017	0.2	Approved by QUM DoP Sub-Committee
August 2021	1.0	Minor review by Mickson Yam, Deputy Director of Pharmacy, TSH
September 2021	1.0	Approved by Executive Sponsor