

## BACKGROUND

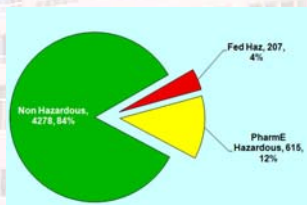
Medstar Health is a not-for-profit community based network of 9 hospitals and other healthcare services in the Baltimore/DC area with 3,300 licensed beds and 26,000 employees. They are the largest healthcare system and one of the largest employers in the region. With a growing awareness of fines being levied to hospitals by the EPA, Medstar Health desired to be the first system in the area to have a hazardous pharmaceutical waste program.

## PROGRAM IMPLEMENTATION

- Vendor Selection Process
- Executive Summary
- Rollout Timeframe
- Training (tiers)
- Ongoing Refinement

## MEDICATION CHARACTERIZATION PROCESS

- Obtain annual purchase history for the system
- PharmEcology characterization
- Medacist analysis for Pyxis location(s)



## VENDOR RESPONSIBILITIES / VALUE ADDED OFFERINGS



- Container Selection
- Site Meetings
- Education
  - Nursing in-services, SITEL (computer-based training), posters and handouts.
- Waste Pickup
- Sorting
- Transportation

## PHOTOS



Clockwise from top left – RCRA benzoin compound tincture D001, manifest completion by EMSI driver, TSDF drums, administrative meetings, RCRA – etoposide D001, TSDF drum storage, nurse HPW disposal with poster, RCRA UID packaging white rectangles.

## LESSONS LEARNED

- Many **COMPETING INITIATIVES** affected the rollout timeframe. These included a system-wide Cerner installation, initiating work with a repackaging facility and workup to be registered as a manufacturer with the FDA.
- COSTS** for FY10 were not budgeted so the program costs were allocated using internal formulas. The cost history by site for year one and the move to line item billing facilitated budgeting for FY11.
- The focus of compliance was on **NURSING**. The success of the pharmaceutical waste program was dependent upon on nursing due to their responsibility for administering medications.
- KEY GROUPS** that participated in program roll-out meetings and training sessions were Pharmacy, Nursing, Facilities, Environmental Services, and Safety. The Pharmacy is responsible for identifying pharmaceuticals on the formulary that are hazardous waste by placing labels, black rectangles and black labels with the letters- EPA.
- The **SCOPE** of the pharmaceutical hazardous waste program extended across more departments, than chemical hazardous waste, thus involving more staff. Also, the number of pharmaceutical products that are hazardous waste far exceeded the number of chemical hazardous waste items.
- TRAINING** for staff who handle, transport, and provide administration of the program was necessary.
- OUTPATIENT OFFICES AND SUPPORT FACILITIES** that prepare or handle pharmaceuticals had to be evaluated to determine what medications would become hazardous waste.
- MedStar has collaborated and maintained contact with the **REGULATORY AGENCIES** responsible for our service territory. The agencies have provided documentation with exemptions for certain pharmaceuticals that have been excluded from RCRA requirements.
- Attending H2E, Practice Greenhealth, MHA, and DCHA meetings helped to educate us on **WHAT THE AGENCIES WILL BE AUDITING** for pharmaceutical waste.
- The use of **ONE HPWV** was best since it helps foster consistency and compliance and facilitated implementation.