OneVA Pharmacy Implementation

**Meeting Information**

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| **Discussion:** | OneVA Pharmacy Implementation Daily Scrum Meeting | | |
| **Date of Meeting:** | 12/15/2015 | **Location:** | Teleconference |
| **Facilitator:** | Cecelia Wray | | |
| **Time:** | 2:30 pm-3:20 pm | | |

Today’s meeting included guest Naeem Mian and Rob Silverman. Both were invited for a deep dive discussion on the drug matching logic.

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| Attendee Name (P=Present) | | | |
| Birali Hakizumwami | **P** | Brad Fisher | **P** |
| Cecelia Wray | **P** | Tony Burleson | **P** |
| Kathy Coupland | **P** | Sherri Simons |  |
| Tom Bigelow | **P** | TJ Cope | **P** |
| Chris Parns |  | Bill Walsh |  |
| Naeem Mian | **P** | Rob Silverman | **P** |

**Action Items Outstanding**

| Action Item Origination Date | | Action Item | Owner | Status | Closed Date \*closed items will roll off in 48-hrs | |
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| 11/02/2015 | Cecelia see if there is a pharmacy MUMPS developer that could do the secondary developer checklist. | Cecelia | Follow Up with Josh who is supposed to submit Resource Request |  |
| 12/07/2015 | Tony will send the internal VA links to Cecelia and she will provide the templates from those links.  This was identified as a requirement in the HDR SDD. | Tony / Cecelia | Open |  |
| 12/10/2015 | Follow up with the Network SEDR folks and provide them with the new environment so they can capture the packets. | Cecelia | Open |  |
| 12/11/2015 | Determine what testing artifacts are required. | Cecelia | Open |  |
| 12/14/2015 | Determine if MVI services will be available in the VIP environment to be able to connect patients that are added. | Cecelia | Open |  |

| **Discussion Notes** |
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| * Rob walked through the scenario that in reality, if a generic prescription is prescribed the Pharmacist can dispense a brand name however if the brand name is prescribed, the Pharmacist is not authorized to dispense a generic version. If there was a one to many return on the drug list, the Pharmacist should be promoted to select the appropriate drug.   + For example, the Host Site could have one VA Product ID but the dispensing site may have one to many for the same VA Product ID.     - ALBUTEROL 90MCG (PROAIR) 8.5GM ORAL INH ALBUTEROL 90MCG (CFC-F) 200D ORAL INHL ALBUTEROL 90MCG(CFC-F) ORAL INH(PFT LAB   + Or displayed:     - GENERIC NAME: ALBUTEROL 90MCG(CFC-F) ORAL INH(PFT LAB)     - GENERIC NAME: ALBUTEROL 90MCG (CFC-F) 200D ORAL INHL     - ALBUTEROL 90MCG (PROAIR) 8.5GM ORAL INH   + All share one VA PRODUCT entry   + Host site dispensed ProAir [brand] - dispensing site may need dispense the brand, especially if the patient needs the brand...   + If host site dispensed the generic - dispensing site may have more flexibility.   + Host site dispensed ProAir [brand] - dispensing site may need dispense the brand, especially if the patient needs the brand...   + If host site dispensed the generic - dispensing site may have more flexibility.   + Host site drug name matches a dispensing site drug name - then there is no choice to be made * Rob provided these two constraints understood is being made with this version and release of the OneVA Pharmacy software:   + If there is not a one to one match within the drug matching logic, the drug multiples should be displayed on a screen to the Pharmacist, making the Pharmacists responsible for selecting the drug to dispense.   + When multiple drugs are presented to the Pharmacist, whatever drug the Pharmacists selects the system will generate a label using the original label information from the hosting site * In order to mitigate this scenario as best as possible, the Rob walked Brad through some logic options:   + Match the 40-character field referred to as ‘drug name’ during the conversation and when there is an exact match, use it.   + When a match is not returned, match the drug using the VA Product ID and if more than one drug is listed, display the drugs on the screen and allow the Pharmacist to make the decision.     - In other words, only if dispensing site doesn't have an exact 40-character match, then use VA PRODUCT match to constrain the choices of dispense drugs to select. * Brad and Rob conversed about cross reference fields and what routines to use for the process. They plan to take their discussion offline and use Email to flush out the details. * The question was presented to Rob if it was okay that the VIP environment being established only had 1 remote VistA. Cecelia explained to Naeem and Rob why and here was his reply:   *That would not be acceptable. Having only one dispensing site and one host site would not demonstrate the software’s capability to pull scripts from multiple sites*.   * Brad responded by stating he could use Silver1 for DEV and Silver 2, Gold 1, and Gold 2 could be integrated for testing. * Tom is continuing to work on the Web Service for Tony. * Tony is going to work with Birali and demonstrate the unit tests.   **TECHNICAL MEETING: Kathy, Birali, and Tony**   * Birali started the meeting by stating for the VAeMI-Middleware to be appropriately tested it would require two remote VistAs as stated by Rob Silverman. * Kathy dropped form the call and let Tony and Birali use the time as a working meeting. |
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