Who’s in Charge of Patient Safety?
Work Practice, Work Processes and Utopian Views of Automatic Drug Dispensing Systems
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ABSTRACT

In June, 2003, a large, Canadian tertiary care facility introduced automatic drug dispensing machines on all units when it opened up a new building. In this paper, we provide an overview of the automatic drug dispensing system (ADS) implementation at the hospital. Our findings, based on daily field observations and interviews during and after implementation, with regular follow-up visits to the field site illustrate how the introduction of the ADS brought to light work practices that sometimes compromised patient safety.

We suggest that utopian views of automatic drug dispensing machines obfuscate the challenges inherent to implementing such systems, and deters stakeholders from performing rigorous evaluation of the costs (both social and economic) and benefits of investing in such systems. Our work contributes to debates about the socio-technical efficacy of automating medication dispensing and delivery, and suggests that the balance of power in the patient safety equation lies in the work context and implementation issues, and not just the technology. For technology implementations to be successful considering that technologies frequently cross over jurisdictional boundaries, planning and implementation have to be conducted at a system wide level.