

Medication Errors Detection and Prevention:

The use of Medication Safety Tracers

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Background

- How to prevent errors
 - Requires understanding of the process/system
- Effective Medication Management Process
 - Utilizing the Tracers Rounds
 - Conducting Periodic Inspections
 - Involving Pharmacy Staff
 - Tracer Rounds
 - Wards/Clinic inspections
 - Medication errors



Objectives

- Demonstrate the pharmacist's contribution as a member of the multidiscipline team
- Understand how to apply TJC requirements and institutional policies
- Understand the “Just Culture”
- Understand the Medication Errors and Potential Medication Errors
- Demonstrate ability to identify the variation of practice vs confirming the consistency of the practice



Medication Safety Tracer

- The purpose of the tracer:
 - To identify the areas that need improvement
 - Annual evaluation of the WD/Clinic/Department
 - To reduce Medication errors

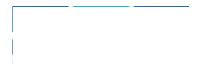
2 big categories of Medication Errors

➤ Medication Errors-

Actual Errors (reached the patient)

➤ Potential Medication Errors

Near Miss (Did not reach the patient)



Tracer Team Members

HUMAN RESOURCES (HR)
MEDICAL STAFF (MS)
NURSING SERVICES (NR)
HOUSEKEEPING (EC)
PATIENT ADMINISTRATION DIVISION (RC)
PATIENT SAFETY (NPSG)

PHARMACY (MM)
QUALITY MANAGEMENT P
CLINICAL ENGINEERING QA (EC)
JOINT COMMISSION COORDINATOR
INFECTION CONTROL (IC)
HIPAA
Laboratory (DPALS)

20-30 Min Interview Before the Tracer

- Inclusive of Head of the Department, Charge Nurse, Physician (i.e. cardiologist for Cardiac floor/Word)
- Introduce ourselves
- Explain why you are doing this tracer
- Ask questions about things you cannot directly observe
 - For example, awareness of a new policy, how to communicate between shifts, i.e., handoff procedures
- Ask for a nurse to assist you
 - For example, the need to know the patient's name who just transferred/came back from OR, etc
- Ask what they think of the pharmacy service



Medical Patient Tracer: Medication Management

Topic	Standard #	Survey Instructions	Meets (Y/N/NA)	Findings
Medications are stored for product stability	MM.03.01.01 EP 2	Check medication refrigerators for temperature monitoring, cleanliness and that employee food is not stored with medications		
Medications are safely stored	MM.03.02.02 EP 4	Observe that no medications are sitting out and available to unauthorized persons		
Medications are not expired	MM.03.01.01 EP 6	Check medication storage for outdates		
Medication areas are inspected	MM.03.01.01 EP 18	All medication storage areas must be inspected as per hospital policy.		
Emergency medications are replaced ASAP	MM.03.01.03 EP 6	Ask about the process for replacing emergency medications		
Medications brought in by patients (Reference: TX.09)	MM.03.01.05 EP 1-3	Ask about staff's knowledge of the hospital's policy re: medications brought in by patients. Medications must be identified and visually evaluated for integrity.		
Medications ordered include reason	MM.04.01.01 EP 3	Medications that can be used for more than one condition must state the reason the medication is being prescribed		
Range orders	MM.04.01.01 EP 1	Compare against hospital policy. Ensure that the process is designated so any caregiver would do it the same way		
High risk medications are administered per hospital policy	MM.01.01.03 EP 2-3	Survey the administration of high risk drugs per hospital policy		

During the Tracer

- **Observe “Med Pass”**
 - From the moment of order being written to the administration of the medications
 - Key:
 - Labels
 - The time of documentation
 - High Alert medications
 - Diluents
 - Missing medications
 - Monthly inspection documentation: Spot check



During the Tracer

Interview: The patient/family member and nurses
IMPORTANT to know *how we phrase the questions*

- Own meds
- Be aware of your surroundings
- Hardcopies/hand written
- Medication reconciliations process
- Understanding of the medication orders (PRN orders, Medications with multiple indications)
- Education of the new medication
- Make sure to ask if the Nurses have any questions

During the Tracer

Documentation tracer:

Transferred patients chart - look for:

1. Transfer orders
2. PRN orders without indications, multiple PRN orders with the same indications
3. Allergies
4. ANY prohibited abbreviations free texted
5. High Alert medications (HAM) - In Accordance with policy

The measurement of the success/failure of the process



“Just Culture”

ISMP and other institutions are pushing hard for a “Just Culture”

You can learn more about the “Just Culture” at ISMP website

The basic idea is a “Blame free culture”

Questions??

