AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

Medication Safety Standard 4

Part 4 –Medication management processes, partnering with patients and carers

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NSQHS STANDARDS

Standard 4 **Medication Safety**

Medication management processes

The clinical workforce is supported for the prescribing, administering, storing, manufacturing, compounding and monitoring of medicines

Medication management processes

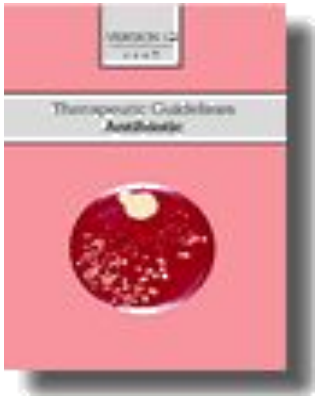
4.9: Ensuring that current and accurate medicines information and decision support tools are readily available to clinical workforce

- What?
  - Implement and maintain up-to-date medicines information resources and decision support tools (manual or electronic) that are accessible to staff in clinical areas (at point of care) (4.9.1)
    - formulary information, prescribing requirements, approval systems
    - reference texts
    - policies, protocols and guidelines
    - drug interaction database
    - guidelines for safe administration of medicines (eg administering medicines via enteral tubes, intravenous injection)
    - antibiotic approval systems

3. Medication management processes

4.9: Ensuring that current and accurate medicines information and decision support tools are readily available to clinical workforce

SHPA Australian Injectable Drugs Handbook
SHPA Don't Rush to Crush Handbook



Hospital protocols, guidelines

Medication management processes

- Clinical decision support for electronic medication management systems (EMMS)

- As a minimum the EMMS should reflect the **core** functional and technical features outlined in the Electronic Medication Management Systems - A Guide to Safe Implementation Guide 2nd edition and be working towards the **desirable** features. Guide available from

http://www.safetyandquality.gov.au/our-work/medication-safety/electronic-medication-management-systems/

Medication management processes

4.9: Ensuring that current and accurate medicines information and decision support tools are readily available to clinical workforce

- What?
  - Regular review of the use and content of clinical information and decision support tools, to ensure that resources are current, and are endorsed for use within the organisation (4.9.2)
    - Drug & Therapeutics Committee minutes/documentation
    - Risk assessment of drug information domain in MSSA

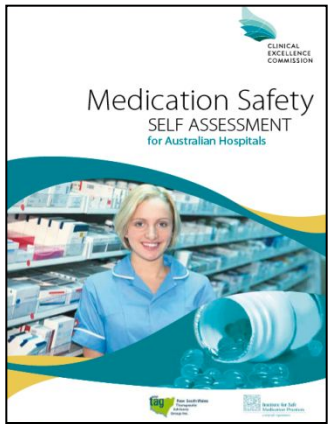
Q. These services are largely outsourced through the Clinical Information Access Portal (CIAP). We rely on the service provider to maintain up to date and relevant references. Is this sufficient?

A. *Yes for CIAP. However* the f*acility needs to review other resources used, hard and soft copy.*

Medication management processes

4.10: Ensuring that medicines are distributed and stored securely, safely (cont'd)

- What?
  - Regular review and risk assessment of medicines storage and distribution across the organisation.(4.10.1)
    - Do as part of overall self assessment
    - Audit against policies, procedures
    - Observation audits and "walk arounds"
    - Review medication incidents



Medication management processes

4.10: Ensuring that medicines are distributed and stored securely, safely (Cont'd)

- What?
  - 4.10.2. Actions taken to reduce risks associated with storage and distribution of medicines
    - Policies and procedures
    - Safe handling and disposal of S8 medicines, cytotoxic products and hazardous substances
    - Purchasing for safety
      - Identifying risks and putting in place mitigation strategies
    - Safer distribution systems
      - Individual patient supply
      - Bedside lockers
      - Automated systems with patient profiling
    - Staff communication, alerts, bulletins

Medication management processes

4.10: Ensuring that medicines are distributed and stored securely, safely

- What?
  - 4.10.2. Actions to reduce risks associated with storage and distribution (including confusion with look alike sound alike names)
    - Use of bar code scanners (dispensing, distribution)
    - Physical separation of products (e.g. look-alike, sound-alike products)
    - Use of Tall Man lettering (e-systems, infusion pump libraries, shelving, packaging)
      - National Tall Man lettering list

fluVOXAMine	fluOXETine
lamIVUDine	lamOTRIGine
niMOdipine	niFEdipine

Medication management processes

4.10: Ensuring that medicines are distributed and stored securely, safely

- What?
- Temperature sensitive medicines are monitored and integrity of temperature-sensitive medicines maintained (4.10.3)
  - Temperatures measured, recorded, reviewed
- Q. We have installed electronic fridges that alarm when fridge is outside of set parameters. Do we have to document daily Min/Max temps for these fridges ? Are we required to have documented evidence of daily checking?
- A. *Need to have regular testing, scheduled maintenance of alarms. Temperature recording device in the fridge – a record that the refrigerator is operating within the required temperature range. Monitor the record. This replaces the need to check and record the temperature daily.*
- *Health service needs to have policy for responding to the alarm.*

Medication management processes

4.10: Ensuring that medicines are distributed and stored securely, safely

- What?
  - Workforce disposes of unused, unwanted or expired medicines, in accordance with legislative and jurisdictional requirements (4.10.4)
    - S8 medicines audits
    - Disposal of cytotoxic products and hazardous substances (Work Health and Safetyissues)
  - Monitoring disposal of unused, unwanted or expired medicines (4.10.5)
    - Compliance with policy for disposal
    - Wastage

Medication management processes

- **4.10. 5 System for disposal of unused, unwanted or expired medicines is regularly monitored**

- Q. How are institutions auditing drug disposals? We can do S8 items but are other hospitals keeping a log of all items returned to their pharmacy departments.
- A. *No. But hospitals need to do a risk assessment of the management of their pharmaceutical waste in terms of work health and safety, environmental safety and security of storage and disposal.*

Medication management processes

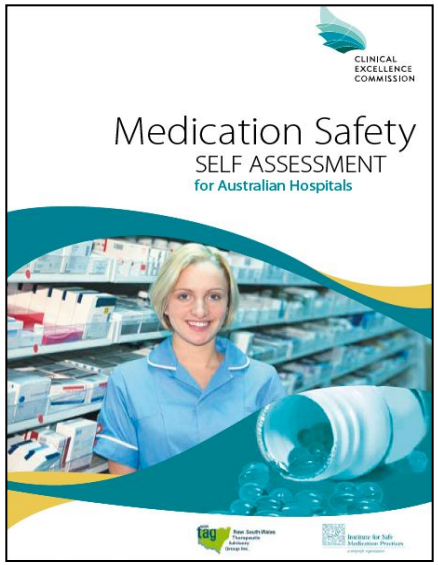
4.11: Identifying high risk medicines in the organisation and ensuring they are stored, prescribed, dispensed and administered safely

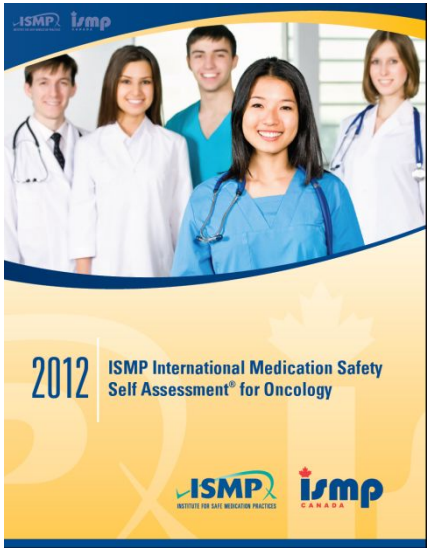
High risk medicines - APINCH (Antibiotics, Potassium, Insulin, Narcotics(S8s),Chemotherapy, Heparin (anticoagulants)

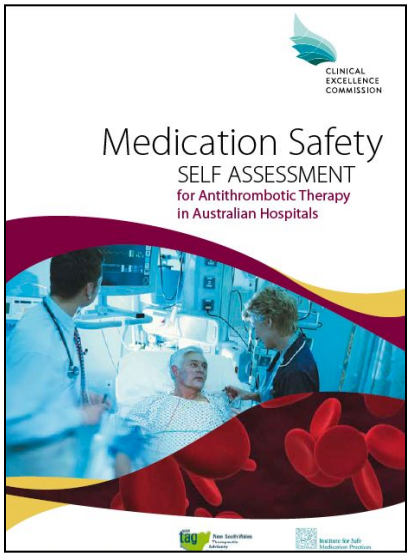
- What?
  - 4.11.1 Undertake an assessment of how high risk medicines are managed within the organisation
    - audits
    - incident analysis
    - risk assessment tools
    - drug usage evaluation programs
    - benchmarking activities.

Medication management processes

4.11: Identifying high risk medicines in the organisation and ensuring they are stored, prescribed, dispensed and administered safely

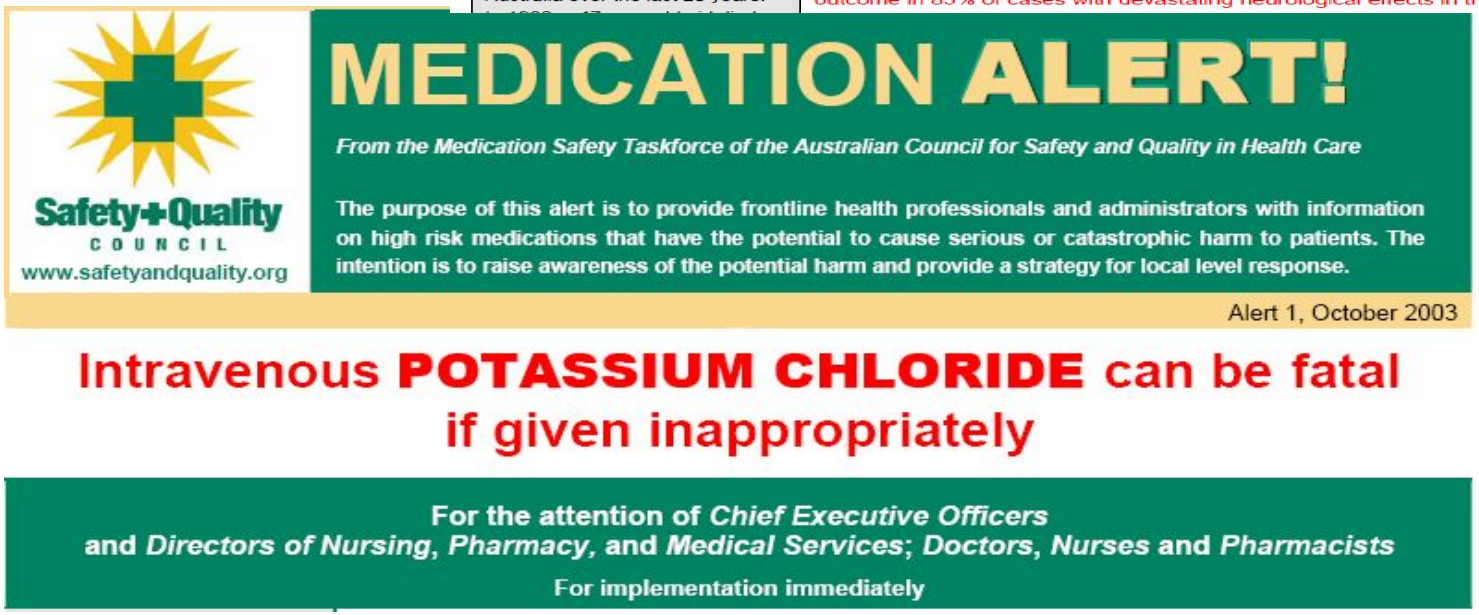






3. Medication management processes

Audits of compliance



Standard 4 **Medication Safety**

Medication management processes

4.11: Identifying high risk medicines in the organisation and ensuring they are stored, prescribed, dispensed and administered safely

- What?
  - Action taken to reduce risks of storing, prescribing, dispensing and administering high risk medicines (4.11.2)
    - List of high risk medicines available to staff, include in education
    - Policies, procedures and protocols
    - Guidelines for prescribing, dispensing, administering and monitoring specific high risk medicines such as anticoagulants, chemotherapy, opioids, insulin
    - Pre-loaded infusions potassium, heparin
    - Training on awareness of high risk meds
    - Implement safety alerts on high risk medicines
    - Monitor improvement activities
      - Warfarin – NIMC audit
      - Potassium – QUM indicator

Medication management processes

4.11: Identifying high risk medicines in the organisation and ensuring they are stored, prescribed, dispensed and administered safely

Q. What is a high risk medicine?

A. *Medicines that have a high risk of causing serious injury or death to a patient if they are misused or used in error. Errors not necessarily more common, effects more devastating.*

- *APINCH*
  - *Use to develop own list*
- *Institute of Safe Medication Practices list*

www.safetyandquality.gov.au/our-work/medication-safety/medication-alerts/

Q. Can we prioritise actions to address risks with high risk medicines?

A. *Yes*

Communicating with patients and carers

- The clinical workforce informs patients about their options, risks and responsibilities for an agreed medication management plan.

Developmental

Communicating with patients and carers

4.13: The clinical workforce informing patients and carers about medication treatment options, benefits and associated risks

- What?
  - Implement systems that support the provision of patient specific medicines information when medication treatment options are discussed (4.13.1)
    - Consumer Medicines Information provided (documented on MMP, in clinical notes)
    - Consumer information on specific medications, for example anticoagulants, chemotherapy
  - Patient specific medicines information accessible in clinical areas (4.13.2)
    - Hard copy or soft copy

Communicating with patients and carers

4.14: Developing a medication management plan in partnership with patients and carers

- Why?
  - 30 – 50% medicines prescribed for long term conditions not used as prescribed [1]
  - Failure to achieve informed agreement or identify and provide support that patient needs to manage their medicines can lead to non-adherence [1]
  - The medication management (action) plan is intended to support health professionals and patients/carers in developing strategies to manage medicines safely and achieve treatment goals

1. NICE. Medicines adherence – involving patients in decisions about prescribed medicines and supporting adherence Clinical Guideline CG 76 – January 2009

Communicating with patients and carers

4.14: Developing a medication management plan in partnership with patients and carers

- What?
  - Undertake assessment of the patient's medication risks to identify medication management issues
    - Use Medication Risk Identification section on National Medication Management Plan
  - Develop a medication management (action) plan that establishes treatment goals and specifies actions required to achieve medication management goals (4.14.1).
    - List of medicines, allergies, administration aids
    - Goals of therapy, action to achieve goals
  - Communicate plan to patient and with the patient's consent to other relevant health care professionals

Communicating with patients and carers

4.14 Developing a medication management plan in partnership with patients, carers

Q. What is a medication management plan? Is it the National Medication Management Plan?

A. No. It is the consumer medication action plan referred to in *APAC Guiding principles to achieve continuity of medication management.*

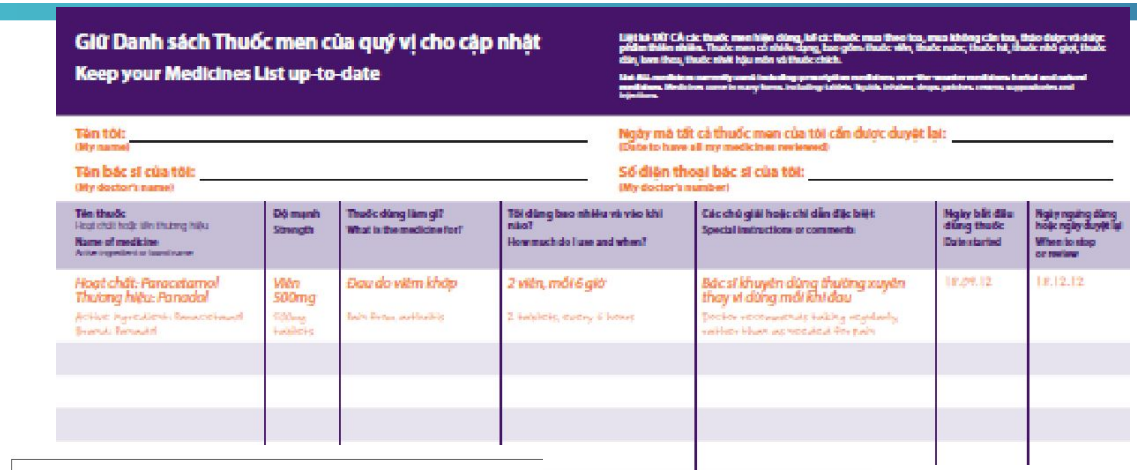
- *Plan for patient's medication management*
  - *Treatment goals and actions, medicines list, changes*
- *Provided to patient, carer*
- *Commission developing a template late 2013*

Communicating with patients and carers

4.15: Providing current medicines information to patients in a format that meets their needs whenever new medicines are prescribed or dispensed

- What?
  - Identify medicines information resources that are in a format that can be used and understood by patients and carers when new medicines are prescribed/supplied or medicines changed(4.15.1)
    - Similar evidence to 4.14
    - Interpreter services available for CALD patients
    - Written information in patients own language e.g. multilingual medicines lists
    - NPS MedicineWise resources
  - Improve medicines information provided in response to patient feedback (4.15.2)
    - Action taken in response to complaints, patient surveys

Communicating with patients and carers


Giữ Danh sách Thuốc men của quý vị cho cập nhật

Keep your Medicines List up-to-date

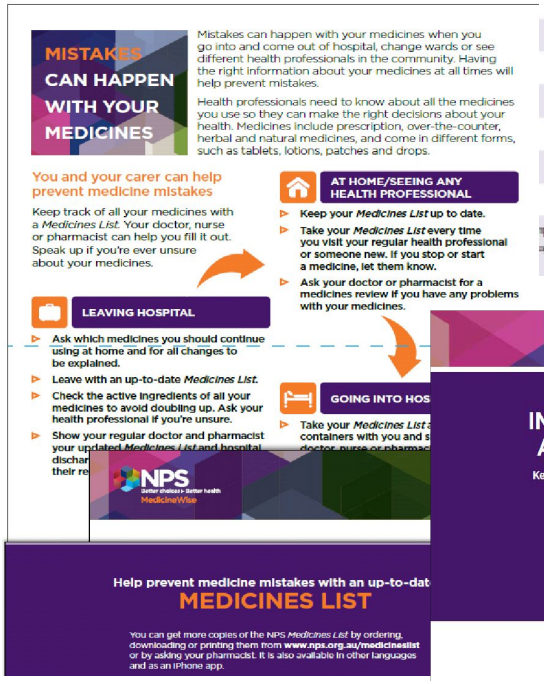
Tên tôi: (My name)

Ngày mà tất cả thuốc men của tôi cần được duyệt lại: (Date to have all my medicines reviewed)

Tên bác sĩ của tôi: (My doctor's name)

Số điện thoại bác sĩ của tôi: (My doctor's number)

Tên thuốc Hoạt chất hoặc tên thương hiệu Name of medicine	Độ mạnh Strength	Thuốc dùng làm gì? What is the medicine for?	Tôi dùng bao nhiêu và vào khi nào? How much do I use and when?	Các chỉ dẫn đặc biệt hoặc chỉ dẫn đặc biệt: Special instructions or comments	Ngày bắt đầu dùng thuốc: Date started	Ngày ngưng dùng hoặc ngày duyệt lại When to stop or review
Hoạt chất: Paracetamol Thương hiệu: Panadol	Viên 500mg	Đau do viêm khớp	2 viên, mỗi 6 giờ	Bác sĩ khuyên dùng thường xuyên thay vì dùng mỗi khi đau	18.09.12	18.12.12


MISTAKES CAN HAPPEN WITH YOUR MEDICINES

Mistakes can happen with your medicines when you go into and come out of hospital, change wards or see different health professionals in the community. Having the right information about your medicines at all times will help prevent mistakes.

Health professionals need to know about all the medicines you use so they can make the right decisions about your health. Medicines include prescription, over-the-counter, herbal and natural medicines, and come in different forms, such as tablets, lotions, patches and drops.

You and your carer can help prevent medicine mistakes

Keep track of all your medicines with a *Medicines List*. Your doctor, nurse or pharmacist can help you fill it out. Speak up if you're ever unsure about your medicines.

AT HOME/SEEING ANY HEALTH PROFESSIONAL

- Keep your *Medicines List* up to date.
- Take your *Medicines List* every time you visit your regular health professional or someone new. If you stop or start a medicine, let them know.
- Ask your doctor or pharmacist for a medicines review if you have any problems with your medicines.

LEAVING HOSPITAL

- Ask which medicines you should continue using at home and for all changes to be explained.
- Leave with an up-to-date *Medicines List*.
- Check the active ingredients of all your medicines to avoid doubling up. Ask your health professional if you're unsure.
- Show your regular doctor and pharmacist your updated *Medicines List* and hospital discharge

GOING INTO HOS

- Take your *Medicines List* containers with you and s

NPS MedicineWise

Help prevent medicine mistakes with an up-to-dat

MEDICINES LIST

You can get more copies of the NPS *Medicines List* by ordering, downloading or printing them from www.nps.org.au/medicineslist or by asking your pharmacist. It is also available in other languages and as an iPhone app.


IMPORTANT INFORMATION ABOUT YOUR MEDICINES

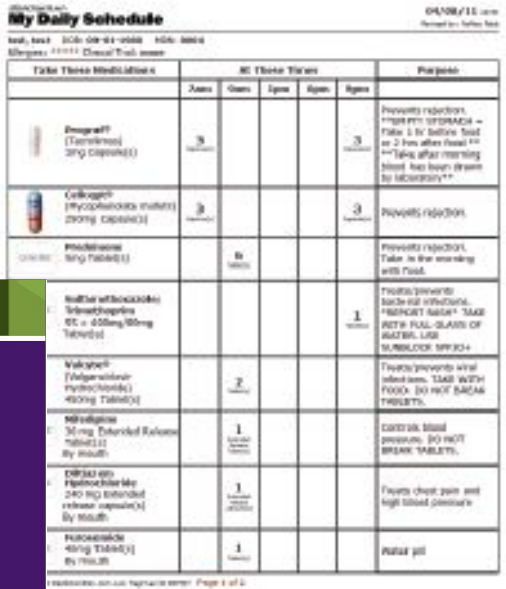
Keep this safe and refer to it each time you go into hospital

NAME: .....

If found, please call: .....

AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

NPS MedicineWise


My Daily Schedule

Take These Medications	At These Times					Purpose
	7am	11am	1pm	4pm	8pm	
Prograf® (Tacrolimus) 3mg capsule(s)	3				3	Prevents rejection.
Cellcept® (Mycophenolate mofetil) 250mg capsule(s)	3				3	Prevents rejection.
Prednisone 5mg Tablet(s)		6				Prevents rejection. Take in the morning with food.
Sulfamethoxazole/Trimethoprim 400 mg/80mg Tablet(s)					1	Treats/prevents lung infections. *REPEAT DOSE* TAKE WITH FULL GLASS OF WATER. USE SUNBLOCK SPF30+
Valcyte® (Valganciclovir Hydrochloride) 450mg Tablet(s)		2				Treats/prevents viral infections. TAKE WITH FOOD. DO NOT BREAK TABLETS.
Nifedipine 30 mg Extended Release Tablet(s) By Mouth		1				CONTROL BLOOD PRESSURE. DO NOT BREAK TABLETS.
DIPYRIDAMOLE Dipyridamole 240 mg Extended release capsule(s) By Mouth		1				Treats chest pain and high blood pressure
FUROSEMIDE 40mg TABLET(S) By Mouth		1				Water pill

Page 1 of 2

Panamax

Paracetamol

CONSUMER MEDICINE INFORMATION

What is in this leaflet

This leaflet answers some common questions about Panamax tablets, elixir and 240 elixir. It does not contain all the available information.

It does not take the place of talking to your doctor or pharmacist.

Keep this information with the medicine. You may need to read it again.

Before you use Panamax

When you must not use it

You should not take Panamax if you are allergic to paracetamol or any of the ingredients listed under "Product Description".

The symptoms of an allergic reaction may include a rash, asthma attack or hayfever.

Do not take this medicine if you have or have had any of the following medical conditions:

Acute breathing difficulties such as bronchitis, unstable asthma or emphysema.

Panamax may be used during pregnancy and if you are breastfeeding. However, it is recommended that non drug therapy such as rest and massage be tried first

Do not use Panamax after the expiry date (EXP) printed on the pack or bottle.

If you take it after the expiry date it may have no effect at all, or worse, have an entirely unexpected effect.

Do not use Panamax if the packaging is torn or shows signs of tampering.

Do not use this medicine to treat any other complaint unless your doctor says it is safe. Do not give this medicine to anyone for which it is not intended.

Before you start to take it

You must tell your doctor if:

- You have allergies to any ingredients listed under "Product Description" at the end of this leaflet
- You have liver or kidney problems
- You drink large quantities of alcohol

You should tell your doctor if you are taking any other medicines.

Including any of the following:

- Any medicines which thin the blood, for example warfarin
- Medicines to treat epilepsy
- Metoclopramide, a medicine used to control nausea and vomiting
- Propantheline, a drug used to treat stomach ulcers
- Chloramphenicol, an antibiotic used to treat ear and eye infections
- Alcohol
- Zidovudine and rifampicin, drugs used to treat infections

These medicines may be affected by Panamax or may affect how well Panamax works.

Your doctor or pharmacist can tell you what to do if you are taking any of these medicines.

If you have not told your doctor about any of these things, tell him/her before you take Panamax.

Standard 4 **Medication Safety**

Medication Safety Program

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margaret.duguid@safetyandquality.gov.au

Standard 4
Medicatio
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Safety