

Pharmacy Resident Membership on a Medication Error Prevention Committee: Integrating Medication Safety, Team Participation, Leadership, and Management Skills

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The logo for MCGHealth features a blue wavy line above the text "MCGHealth". "MCG" is in a bold, black, sans-serif font, and "Health" is in a lighter, grey, sans-serif font.

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Objective



- **List and describe skills the pharmacy resident can develop while serving as a member of a health-system medication safety committee**



Longitudinal Experience



- **All pharmacy residents are full members of the Medication Error Prevention Committee (MEPC) beginning August of their residency year**
- **Residents rotate responsibility for taking minutes (act as Secretary, typically twice per resident, also provide support for their co-resident taking minutes during other meetings)**



PGY1 Goals & Objectives



- **Manage and improve the medication use process R1.1, R1.2, R1.4**
 - Identify opportunities for improvement of the organization's medication-use system.
 - Design and implement quality improvement changes to the organization's medication-use system
 - Demonstrate ownership of and responsibility for the welfare of the patient by performing all necessary aspects of the medication-use system.
- **Provide evidence-based, patient-centered medication therapy management with interdisciplinary teams. R2.1 (includes teams not providing direct patient care)**
 - As appropriate, establish collaborative professional relationships with members of the health care team.
- **Exercise leadership and practice management skills R3.1, R3.2, R3.3**
 - Exhibit essential personal skills of a practice leader.
 - Contribute to departmental leadership and management activities.
 - Exercise practice leadership.
 - Use knowledge of an organization's political and decision-making structure to influence accomplishing a practice area goal.
 - Use group participation skills when leading or working as a member of a committee or informal work group.
- **Utilize medical informatics R6.1**
 - Use information technology to make decisions and reduce error.
- ***Demonstrate additional competencies that contribute to working successfully in the health care environment. E1, E2, E3***
 - Communicate effectively, achieve balance, time management



Committee Charge (1995)



The Medication Error Prevention Committee (MEPC)

“a subcommittee of the Pharmacy & Therapeutics Committee, will provide an ongoing, systematic process of quality improvement and peer review with respect to the safe use of medication by”



Committee Charge



- **Reviewing reported medication errors and trends**
- **Identifying opportunities to prevent medication misadventures**
- **Improving interdisciplinary communication on medication use issues and error prevention**
- **Providing education on safe medication practices to the medical and hospital staff**
- **Encouraging the detection and reporting of actual and potential medication errors.**



Committee Membership (initial) MCGHealth

- **Pharmacy Services**
- **Nursing (Patient Care Services)**
- **Quality Management**
- **Risk Management**
- **Medical Staff**
- **Hospital Education**



Committee Members (current)



Med Safety Pharmacist
Pharmacist, Pediatrics
Pharmacist, Adult
Pharmacy Residents
Nurse, Pediatrics
Nurse, Pediatric ICU
Nurse, Adult Med/Surg
Nurse, Adult ICU
Nurse, Ambulatory Care
Nurse Administrator
(Ambulatory Care)
Nursing Council Rep

Nurse, Peri-operative
Patient/Family Rep
[Respiratory Therapist]
Physician, Family Medicine
Physician, Surgeon
Physician, Internal Medicine
Physician, Pediatric
Nurse Educator
Quality Management Rep
Risk Management Rep
Clinical Informatics Rep



Standing Agenda Items



- **Review medication error reports, trends**
- **Root cause discussion, harmful events**
- **High risk med gap analysis, safeguards**
- **Order form/set review for safety**
- **National Patient Safety Goals**
- **Sentinel Event Alerts**
- **“Lessons Learned” from national reports**
- **Follow-up on local critical incidents**



Pharmacy Residents Role



- **Active participation and discussion**
- **Take minutes**
- **Lead discussion of assigned high-risk medication topic**
- **Present results of audits conducted on Drug Info, Management, Med Safety rotations, other projects as applicable**
- **Email response to order sets under review**
- **Review readings (ISMP newsletters)**
- **Often generate project ideas in response to committee-identified need**



Sampling of Topics 2007-2008



- **Smart Pump Evaluation Process**
- **Look-alike Drug List Update**
- **Pediatric Medication Sentinel Event Alert Gap Analysis**
- **System-wide Chemotherapy Policy**
- **Response to Event in News (L-arginine)**
- **Pediatric Infusion Rate Calculator Developed**
- **Failure Mode & Effects Analysis (FMEA) Assigned**
- **Medication Reconciliation Audits & Process Improvement**
- **Override Audits**
- **“Write It Right!” Audits**



Some Of The Dividends



- **Broader understanding of medication safety and med use system issues**
- **Several residency graduates later became MEPC Committee representatives at MCG, other hospitals**
- **Pharmacy residents able to assume leadership role on a work-group during second half of residency year**
- **Enhanced written communication and organizational skills**