

# Medication Management Update

2009 MEDCOM-TJC Conference  
Joint Commission Resources  
Consultant



## Frequent Findings Jan – July, 09

Standard	Statement	Percentage
	Hospital	
MM.03.01.01	Safe Storage	33%
MM.04.01.01	Clear, Accurate Orders	32%
	Ambulatory	
MM.03.01.01	Safe Storage	27%



Client name/ Presentation Name/ 12pt - 2

## Army Findings

Standard	Element of Performance	Statement
MM.01.01.03	EP 3	Implements High Alert Med Process
MM.03.01.01	EP6	Unauthorized Access to Meds
MM.04.01.01	EP 13	Implements Med Orders
MM.05.01.01	EP 2	Order review when pharmacy closed
MM.05.01.13	EP 1	Meet patient needs when pharmacy closed
MM.06.01.01	EP 3	Before administration verify order and label



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## MM 01.01.03 High-Alert & Hazardous Meds

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- EP 3:implement process for managing high-alert medications
  - Written list of high-alert medications
  - Staff can refer to the list
  - Staff can discuss safety measures



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## MM 01.01.03 High-Alert & Hazardous Meds

For Deemed Status: New EP  
Report abuses and losses of controlled substances to individual responsible for pharmacy services



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## Medication Storage

### MM.03.01.01

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3. Store all medications, biologicals, controlled medication in secured area and locked when necessary
6. Prevents unauthorized individuals from obtaining medications in accordance with its policy and law and regulation.
7. All stored medications and components are labeled with
  - Contents
  - Expiration date
  - Applicable warnings
9. Concentrated electrolytes
18. Periodically inspects all areas.

Deemed Status: New EP

19. Pharmacy directed by registered pharmacist or hospital has supervised drug storage area



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## Compliance Tips

Understand definitions of levels of security

Determine organization policy

- Law and regulation

Risk assess

- Incidents

Prevent diversion

Access to date labels

Includes vaccines

Temperature monitoring in ambulatory sites



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MM.04.01.01 Medication orders are clear and accurate

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- EP. 13: Implements policies for medication orders
  - Consistency with previous elements.
  - Throughout the organization



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## Typical Findings

Policies do not cover types of medication orders used within the organization

Policies too broad

- Inconsistent implementation



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## Compliance Tips

Review types of medication orders accepted and ensure clear policy

Ensure policy clear

- Test implementation process



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## Pharmacy Closed

MM.05.01.01 pharmacist reviews orders

- EP.2 When the pharmacy is closed a health care professional determined to be qualified by the hospital reviews the medication order in the pharmacist's absence.

- Physician, nurse



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## Pharmacy Closed

- Identify those who will review the medication order
- Use another facility for review
- Non-pharmacist requires training and competency to verify knowledge for review.
- Include EP 4 -10 in training
- Include use of electronic references
- Pharmacist available if needed



Client name/ Presentation Name/ 12pt - 12

## MM.05.01.07 Preparation

For Deemed Status: New EPs  
Medications prepared and administered in accordance with orders of LIP responsible for patient's care

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In-house preparation of radiopharmaceuticals is done by/under supervision of appropriately trained pharmacist or doctor

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## Label Medications

MM.05.01.09

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- Includes all the elements
  - Patient information
  - Medication information
    - Date, time, expiration date



## Pharmacy Closed

- EP.1 process to meet patient needs when the pharmacy is closed.
  - Limited access to medications
  - Based on usage patterns
  - Only designated prescribers and nurses
  - Quality control in place

## Administer Medications

MM.06.01.01

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- EP 3. verifies that the medication selected matches the medication order and product label.
  - Observation on tracer

## MM.07.01.03 Adverse events

For Deemed Status: New EP  
Immediately report to physician and, as determined, organization-wide performance improvement program:

- Medication administration errors
- Adverse drug reactions
- Medication incompatibilities

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## Questions



