MEDICATION MANAGEMENT
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Session Objectives:

• To provide a framework for an effective and safe Medication Management program.

• Evaluate the continuity of Medication Management from procurement of medication through evaluation.
Medication Management

A safe Medication Management system addresses the following:
- Planning
- Selection and procurement
- Storage
- Ordering
- Preparing and dispensing
- Administration
- Monitoring
- Evaluation
Medication Management-Planning

MM.01.01.01-The organization plans its medication processes.

• The organization has written policies that describe medication management processes that is accessible to Licensed Independent Practitioners (LIPs) and staff who are involved in the patient’s medications. Policies are implemented.

Policy-re: Medication Management

i.e. - acceptable orders (verbal, standing)
- medication recall (how handle in organization)
- diversion of medication
MM.01.01.03-The organization safely manages high-alert and hazardous medications.

• High-alert medication:
  -Involved a high percentage of error and/or sentinel events
  -Medication that carries a higher risk for abuse or other adverse outcomes
  -Lists of high-alert medication are available from the institute of Safe Medication Practices (ISMP)
Medication Management-Planning (cont.)

• Examples of high-alert meds:
  - controlled medications (Schedule 11 drugs)
  - psychotherapeutic medications
  - look-alike/sound alike medications
  - medication with a narrow therapeutic range

• Hazardous medications are those in which studies in animals or humans indicate that exposures to them have a potential for causing cancer, developmental or reproductive toxicity, or harm to organs.
  
  i.e. Chloroform use in dental clinic

Lists are available from National institute for Occupational Safety and Health (NIOSH).
Medication Management-Planning (cont.)

• For safe medication management, an organization must develop its own list(s) of high-alert medication and hazardous meds based on unique utilization patterns and its own internal data about medication errors and sentinel events.
  
  • Requirements
    - Organization identifies in writing, its high-alert and hazardous medications
    - The organization has a process for the management high-alert and hazardous medications.
    - Implements that process
  
  Challenges in implementation - Not doing an organization wide sweep. All areas where meds are stored i.e. dental, emergency carts, etc.
Medication Management-Planning (cont.)

MM.01.02.01-The organization addresses the safe use of look-alike/sound-alike medications.

- The organization develops a list of look-alike/sound-alike medication it stores, dispenses, or administers.
- Lists of look-alike/sound-alike medications are available from the institute of Safe Medication Practices (ISMP).
  - Applies to sample meds
- The organization takes action to prevent errors involving the interchange of the medication on its list of look-alike/sound-alike medications.
- The organization annually reviews and as necessary, revises its list of look-alike/sound-alike medications.
Medication Management
Selection and Procurement

MM.02.01.01-The organization selects and procures medications.

• Develop criteria for determining which medications are available for dispensing or administering to patients.

• The criteria for selecting medications are approved by the organization and indication for use, effectiveness and risk.

• Before using medications that are new to the organization, the organization determines a method to monitor the response of the patient.

• The organization maintains a written list of medications, including strength and dosage, for dispensing and administering.

• The organization has a process to communicate medication shortage and outages to LIP and staff.

• This applies to sample medications.
MM.03.01.01-The organization safety stores medications.  

• The organization:
  - Stores medication according to the manufacturer’s recommendation
  - Stores controlled (scheduled) medications to prevent diversion
  - Safely handles medications between receipt of LIPs or staff
  - Preventing unauthorized individuals for obtaining medications
  - Removes all expired, damaged, and stores them separately from medications available for administration
Medication Management-Storage (cont.)

MM.03.01.03-The organization safely manages emergency medication.

• Patient emergencies occur frequently in health care settings. Organization needs to plan how it will address patient emergencies and what medications and supplies it will need.

• Organization decides which if any emergency medication and their associated supplies will be readily accessible in patient care and based on population served. Looking for a risk assessment.

• Emergency medications and their supplies are readily accessible.

• Whenever possible, emergency medications are available in unit-dose, age-specific and ready to administer forms.

(*Treat emergency medications with the same care for safety as it does medications in non-emergency settings)
Medication Management-Storage (cont.)

**MM.03.01.05-Safely controls medications brought into the organization by patients and their families or LIPs.**

The organization:
- Defines when these medications can be brought into the health center by patients, their families or LIPs can be administered
- Visually evaluates the medication integrity
- Informs the prescriber and patient if medications brought into the organization by patients, their families, or LIPs are not permitted

**Note:** This element of performance is also applicable to sample medications
Medication Management
Ordering & Transcribing

MM.04.01.01-Medication orders are clear and accurate.

(This does not require the organization to have an electronic medical record in place).

Look at how the organization uses electronic prescribing

• The organization has a written policy that identifies the specifics types of medication orders that it deems acceptable for use:
  - PRN orders
  - Standing orders
  - Verbal orders-only in emergency
  - Telephone orders
  - Orders for medication related devices (i.e. nebulizer)
  - Orders for herbal products
Medication Management Ordering & Transcribing (cont.)

• The organization:
  - Is responsible for reducing the potential for medication errors and misinterpretation of medication orders
  - Determines the required elements of a medication order, the type of medication orders that are acceptable
  - The action to take when medication orders are incomplete, illegible and unclear
  - Has a written policy that identifies the specific types of medication orders that are deemed acceptable

• For PCMH organizations:
  1. uses prescribing process for at least 50% of allowable prescriptions
  2. uses a computerized order entry system for at least 60% of medication orders
Medication Management
Preparing and Dispensing

MM.05.01.01—Review the appropriateness of all medication orders for medications to be dispensed in the organization.

All medication orders are reviewed for the following:

- Patient allergies for potential sensitivities
- Existing or potential interactions i.e. food+meds
- Impact as indicated by lab values
- The appropriateness of the medication, dose, frequency and route
- All concerns issues or questions are clarified with the individual
Medication Management
Preparing and Dispensing (cont.)

MM.05.01.09-Medications are labeled.

• A label on every medication is a standard of care by the pharmacy profession and is required by law and regulation.

• Medication containers are labeled whenever medications are prepared but not immediately administered.

  An immediately administered medication is one that an authorized staff member prepares or obtains, takes directly to the patient, and administered to that patient without any break in the process.

• This element of performance is also applicable to sample medications.

• Information on medication labels is displayed in a standardized format, in accordance with law and regulation and standard of practice.
Medication Management
Preparing and Dispensing (cont.)

MM.05.01.15 - The organization safely obtains medication when it does not operate a pharmacy.

• If the organization does not operate a pharmacy, the organization has a process for obtaining medications for a pharmacy or licensed pharmaceutical supplier to meet patient needs. This process is implemented.

MM.05.01.17 - The organization follows a process to retrieve or discontinued medication.

• The organization:
  - Has a written policy describing how it will retrieve and handle medications within the organization that are recalled or discontinued for safety reasons.
  - Implement its policy or retrieving and handling medications when they are recalled or discontinued.
  - When required by law and regulation or organization policy-the organization informs patients that their medication has been recalled or discontinued.
Medication Management Administration

MM.06.01.01-The organization safety administers medication.

The organization:

- Defines, in writing LIPs and clinical staff disciplines that are authorized to administer medications, with or without supervision, in accordance with law and regulation.
- Before administering a new medication, the patient or family is informed about any potential clinically significant adverse drug reaction or other concerns.
- Verifies the five R’s (patient, drug, dose, route, time)
- Verify that the medication has not expired
  - Multi-dose injectable that are used for more than one patient when they are opened, should be discarded within 28 days of opening or according to manufacturer's recommendations, whichever is more stringent.
Medication Management
Monitoring

MM.07.01.01 & MM.07.01.03 –

The organization monitors patients to determine the effects for their medication(s).

The organization responds to actual or potential adverse drug events, significant adverse drug reactions, and medication errors.

• The organization:
  - Monitors patient’s perception of side effects and effectiveness of medications.
  - Monitors the patient’s response to medication(s) by taking clinical info., relevant lab value etc. (monitor first dose)
Medication Management Monitoring (cont.)

MM.7.01.03-The organization responds to actual or potential adverse drug events, significant adverse drug reactions, and medication errors.

• The organization:
  - Has a written process to respond to actual and potential adverse drug events, significant adverse drug reaction, and medication error.
  - Complies with external and internal reporting requirements for actual or potential adverse drug events error, significant adverse reaction, and medication.
  - Implements its process for responding.
Medication Management Evaluation

MM.08.01.01-The organization evaluates the effectiveness of its medication management system.

• The organization:
  - Collect data on the performance of its medication management system
  - Analyzes data on medication management system
  - Compares data over time to identify risk points patterns, trends and variations of medication management system

Note: This evaluation include reconciling medication info. (NPSG.03.06.01)
Medication Management
2017 Top Non-compliant Ambulatory Care Standards for Health Centers

• **MM.01.02.01 EP 2:** The organization takes action to prevent errors involving the interchange of the medications on its list of look-alike/sound-alike medications.

• Note: This element of performance is also applicable to sample medications.

• **MM.03.01.01 EP 2:** The organization stores medications according to the manufacturers' recommendations.

• Note: This element of performance is also applicable to sample medications.

• **MM.03.01.01 EP 6:** The organization prevents unauthorized individuals from obtaining medications in accordance with its policy and law and regulation.

• Note: This element of performance is also applicable to sample medications.
Medication Management
2017 Top Non-compliant Ambulatory Care Standards for Health Centers

• **MM.03.01.01 EP 7**: All stored medications and the components used in their preparation are labeled with the contents, expiration date, and any applicable warnings.
  
  • Note: This element of performance is also applicable to sample medications.

• **MM.03.01.01 EP 8**: The organization removes all expired, damaged, and/or contaminated medications and stores them separately from medications available for administration.
  
  • Note: This element of performance is also applicable to sample medications.

• **MM.03.01.03 EP 2**: Emergency medications and their associated supplies are readily accessible. (See also PC.03.01.01, EP 8)
References:

• CAMAC - Medication Management (MM) Chapter
• Institute for Safe Medication Practices (ISMP)
• National Institute for Occupational Safety and Health (NIOSH)
Questions
Thank you for partnering with us in your continuous journey to provide high quality care for health center populations.
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