

JUVENILE COURT HEALTH SERVICES PHARMACY PROCEDURES

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Subject: Medication Error Reporting		Original Issue Date: 02/01/14	Procedure # 047
		Supersedes:	Effective Date: 02/01/2014
Departments Consulted: DHS Pharmacy Affairs JCHS Department of Medicine JCHS Department of Nursing	Approved By: (Signature on File) Pharmacy Supervisor (Signature on File) Medical Director	Approved by: (Signature on File) Health Services Administrator	

POLICY

1. It is the responsibility of any facility staff who becomes aware of an unreported medication error to immediately report the error in the Department of Health Services (DHS) Safety Intelligence (SI) online application and to notify the ordering practitioner. A clinical staff member shall also notify the affected patient of the error in a timely manner.
2. Definition of a Medication Error: Any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the healthcare professional, patient, or consumer.
3. A significant medication error would involve the facility's high-risk medications or a medication event that could lead to death, disability, or transfer to a higher level of care.

PROCEDURE

1. A medication error will be reported on the facility's intranet into the SI online application. Access to the SI online application is available through a link on the DHS Intranet Portal (<https://safetyintelligence.lacounty.gov/DHS/>).
2. The individual initiating the report will follow the prompts in the SI online application and provide a complete report as possible, including the medication involved and the circumstances or what precipitated the error.
3. The SI online application automatically sends a "Submission of an SI Event" alert to the responsible individuals of the facility (Location Manager, Pharmacist Manager, Ancillary Manager and Physician Manager). The responsible managers are required to conduct a quality assurance review of each discovered medication error.
4. The Pharmacy Supervisor (or designee) will initiate a review of each medication error as soon as possible, but no later than 2 business days from the date the medication error is discovered.
5. All medication error reviews are documented through the SI online application. The Medication Error report and associated manager reviews are maintained on the SI online application for an indefinite time.

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6. These reports and reviews are immediately retrievable in the Pharmacy upon logging onto the online application, using a secure facility computer with intranet access to the manager site (<https://safetyintelligence.lacounty.gov/DHS/>)

A quality assurance analysis of the medication errors will be presented at the P&T Committee and Quality Improvement Committee. Any trends identified (if any) will be used to modify pharmacy online applications and workflow processes to prevent future medication errors. The quality assurance review will include at least the following:

- a. The date, location, and participants in the quality assurance review
- b. The pertinent data and other information relating to the medication errors(s) reviewed
- c. The findings and determinations generated by the review
- d. Recommended changes to pharmacy policy, procedure, online applications or processes (if any)

7. The Pharmacy Supervisor will in-service the pharmacy personnel of any changes to policy, procedure, online applications or processes resulting from the medication error reviews.

MEDICATION SAFETY COMMITTEE RESPONSIBILITY:

- 1. Monthly analysis, trends, and recommendations will be presented by the Medication Safety Committee to the P&T Committee for review and action.

PHARMACY AND THERAPEUTICS COMMITTEE RESPONSIBILITY:

- 1. Review the Medication Safety Committee data and recommendations and implement the recommendations.