

Department of Pharmacy POLICY AND PROCEDURE

POLICY NUMBER: 896 VERSION: 1

SUBJECT: Quality Control Program - Outpatient Pharmacy

POLICY:

The Director of Pharmacy will monitor the drug distribution performance of the Outpatient Pharmacy on a routine basis. Quality control indicators will be evaluated periodically. The Director of Pharmacy will maintain a log of monthly findings.

PROCEDURE:

1. Indicator: Accuracy of Prescriptions

- Method: Review for correct
 - Patient's name,
 - MRUN #
 - Name of Provider
 - Medication name
 - Direction
 - Quantity
 - Number of refills

Review 100 prescriptions at least per quarter

Report of findings to Patient Safety committee

Corrective actions taken

- Standard: less than one error per month
- Data source: Prescriptions in file

2. Indicator: Correct drugs and patient in the bags

- Method: Monthly open 30 bags ready for pick up on the rack and check the medication vials with the prescription labels
- Ensure that there is no vials for the wrong patient (medications for 2 patients in the same bag)
- Standard: 0 errors
- Data Source: 0 errors

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3. Indicator: Appropriate patient consultation

- Method: Verification of 2 patient's ID
- Review of drug name and instruction for use, direction, compare with prescription. Check for auxiliary labels

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- Review potential drug/ drug interaction
- Ask if patient has any additional questions
- Standard: 0 errors
- Data Source: Patient consultations at the window

4. Indicator: Outpatient pharmacy controlled substances inventory.

- Method: Perform controlled substances inventory monthly
- Report to pharmacy supervisor any discrepancies found.
- Reconcile the drug usage list with the record in the inventory book to resolve discrepancies.
- Standard: 0 shortages
- Data source: Controlled Substances Inventory Records

Approved By: Romina Panoussi (PHARMACY SERVICES CHIEF II)			
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