

*National Coordinating Council for Medication Error Reporting and Prevention*

**October 11, 2001**

Council delegates present:

Jerry Phillips (FDA), Chairperson  
John Combes (AHA), Vice Chair  
Diane Cousins (USP), Secretary  
Janet Myder (AHCA)  
Rita Munley Gallagher (ANA)

William Ellis (APhA)  
Jon May (NABP)  
Barbara Newman (NCSBN)  
Jeff Ramirez (VA)

Council delegates participating via teleconference

Andrew Smith (AARP)  
Joseph Cranston (AMA)  
Linda Hanold (JCAHO)  
Michael Cohen (ISMP)  
Rebecca DeVivo (NPSF)  
Deborah Nadzam (Cleveland Clinic)  
William B. Kelly – (ex officio) USP Safe Medication Use Expert Committee

Alternates present:

Rosalyn Correa (ASCP)  
Joseph Deffenbaugh (ASHP)  
Judy Milford (GPhA)

Alternates attending with their delegate:

Mary Gross (FDA)  
Shawn Becker (USP)

Delegates absent:

Kasey Thompson (ASHP)  
Monica Berry (ASHRM)  
Sal Peritore (GPhA)  
Lisa Clowers (HDMA)

Alternates participating via teleconference

Judy Smetzer (ISMP)

Observers:

Karen Drinkard (AONE)  
John Santell (USP)  
Marilyn Storch (USP)  
Kristin Hellquist (NCSBN)  
Dorothy Chaconas (USP)  
Jennifer Devine (USP)

Jerry Phillips called the meeting to order and asked everyone present and on the conference call to introduce him/herself and identify the organization for which he/she works.

***Meeting Summary - Final***

***General Items***

- Diane Cousins reported on the ballot results of the June meeting summary and asked that those who had not yet submitted their ballots to do so.
- Meds Publishing submitted materials to be reviewed by the Council with a request to make a presentation at the next Council meeting. Discussion focused on the myriad good products in the marketplace and the fact that the Council would not endorse products but continue to encourage development of appropriate programs and products that would prevent medication errors. The Council determined that it would not be necessary to invite Meds Publishing to present at the February meeting and decided that members could take the information sent to their individual organizations for endorsement or recognition.
- The Council decided to invite the following groups to make presentations at the February meeting: (1) Pittsburgh Regional Healthcare Initiative (PRHI) on the Toyota Learning Line; (2) Ken Barker on the study on medication errors in community pharmacy; and (3) ISMP-Canada on its use of the Taxonomy.
- Jerry Phillips mentioned that an article that he authored about mortality associated with medication errors was published in the October 1, 2001 issue of the AJHP. This article referenced the NCC MERP Taxonomy.

***ACTION ITEM: Copies of this article should be made available to the Council membership if they so wish.***

- Deborah Nadzam (Cleveland Clinic) introduced an algorithm for “Categorizing Medication Error Types”. The algorithm was distributed to the Council members for information and discussion. It was agreed that a subcommittee would be appointed to evaluate the algorithm and report back to the Council. It was also suggested that the algorithm might be tested at a MedMARx user group and by the USP MedMARx Strategic Research Partnerships facilities.

***ACTION ITEM: Deborah Nadzam will act as lead for this subcommittee composed of Bill Ellis, Judy Milford and Rosalie Correa to evaluate algorithm and report back to the Council. The USP will determine how best to test the algorithm among its MedMARx users.***

***Review of Action Items***

1. *Medical gases* – ISMP will post the information on its web site and link with the FDA. USP has already posted this information on its web site and will look into working with FDA on standards.
2. *Taxonomy report* – the subcommittee (Deborah Nadzam, Jerry Phillips, and Bill Kelly) had nothing new to report. The group will report at the next meeting. Monitoring AHRQ grant recipients may provide new opportunities for use of the Taxonomy. A question was raised about how the taxonomy dealt with visual impairments (color blindness, diabetes, etc.) of patients and how that affects medication errors.
3. *CPOE* – Questions arose regarding what resources were currently available on implementing CPOE and what kind of evaluations have been conducted. ECRI and

First Consulting (California) are both coming out with information about CPOE. John Combes will work with Deborah Nadzam on currently available information on CPOE from the AHA. Council members were encouraged to find out what their individual organizations are doing in regard to CPOE.

4. *Training Programs for non-licensed personnel* – Janet Myder spoke for the subcommittee and noted that there is very little data to indicate whether or not this is a real problem. Also if it is determined to be a real problem then what is the actual extent of the problem. Without that specific information, it is difficult to determine what the Council can do by way of recommendations. One suggestion from the subcommittee was to hold a Council sponsored consensus conference. It was agreed that additional work is needed to be done in the area before any such conference could be held. ASCP has drafted a new position paper dealing with unlicensed personnel that is posted on their web site. NCSBN has collected some information on the subject and even held a conference in March 2001. The subcommittee will reevaluate the issue and report back at the next meeting.
5. *Industry relating to culture of safety* – Judy Smetzer needed clarification on this agenda item therefore no information was prepared. Judy was provided additional information on the proposed teleconference and will provide an overview at the next meeting.

***ACTION ITEM: Judy Smetzer will be prepared to provide an overview of this topic for the next meeting.***

6. *Invite process experts to speak to the Council* – Council agreed that speakers should be invited to address the Council on these issues.

### ***Practitioner Accountability Workshop***

As a result of the tragic events of September 11, 2001 and consequent travel embargoes, the workshop scheduled for October 10, 2001 was postponed. The exact repayment of expended funds (\$1,900.00) for National Press Club is not currently available. All speakers were notified of the postponement. The following discussions evolved regarding the workshop and its preparations:

- (1) Lead time too short for budgetary and travel approval
- (2) Hotel and travel information not included in the initial invitation
- (3) National Press Club limited attendance
- (4) Hotels expensive in Washington DC compared to the suburbs where hotel rates are somewhat lower
- (5) Issue was raised as to whether or not the original goal of the workshop had been usurped by state efforts.

The Council reconfirmed its commitment that the workshop was still needed to provide direction to individual organizations and state agencies. Suggestions for the postponed workshop focused on submitting a request for an AHRQ small conference grant, doing a joint conference with AHRQ, and possibly web conferencing. It was agreed that it might be easier to get sign-off for travel money if the workshop is a collaborative venture with AHRQ and a joint meeting may be easier to arrange than going through the AHRQ grant requisition model. It was also noted by NCSBN that the Citizens Advocacy Center holds an annual meeting that has broad

representation from the boards of nursing, pharmacy, and medicine and that they may be willing to share time for the workshop. This would capitalize on the fact that no additional monies would have to be budgeted. A suggestion was made to possibly attach the workshop to the beginning or end of the Annenberg Conference. This suggestion was rejected because the Annenberg Conference does not attract the State Board professionals. A small group needs to meet with AHRQ (appropriate person may not be John Eisenberg) to discuss cosponsoring/collaborating on this workshop.

Funding for the workshop was also addressed. The following organizations offered to support this effort monetarily if needed:

APHA

ASHP

GPhA

ISMP

FDA

Other organizations may also be so inclined.

***ACTION ITEM: Before the end of November Diane Cousins, Jerry Phillips, and John Combes will set up a time with the appropriate AHRQ representative to discuss workshop goals and possible collaboration. Additionally, Diane Cousins will formulate a letter outlining the intent of the workshop.***

### ***Medication Error Rates Subcommittee Update***

Draft 5 of the Medication Error Rates recommendations was provided to the Council for discussion. Shawn Becker addressed the numerous questions concerning definitions and consistency within the document that were posed by the membership. The Council felt that the philosophy that error rates are meaningless and do not lead to the prevention of errors should be evident in the document. The definition of medication error should be restated in the document. The Council membership requested that the document be sent out via electronic mail so that all members could address revisions and suggestions. Once the new revisions are completed the revised draft will be sent to all members for approval prior to the February meeting.

***ACTION ITEM: Shawn Becker will send an electronic copy of the current draft #5 to Council members for suggestions/revisions.***

### ***Vermont Oxford Network- Use of Taxonomy***

Jeffrey D. Horbar, M.D., made a brief presentation by teleconference for his request to use the taxonomy. This teleconference was not ideal due to inadequate audio equipment problems. Dr. Horbar indicated that the Vermont Oxford Network is a non-profit organization that shares a database to improve safety practices within its 400 hospitals. Numerous questions were presented to Dr. Horbar regarding his use of the taxonomy and fees associated with his network. It was moved, seconded, and passed to allow the Vermont Oxford Network permission to use the Taxonomy providing they submit a periodic report to the Council on its effectiveness. It was

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mentioned that we had not heard back from Cardinal Health after we requested an update on how they used the taxonomy. The consensus was that we should send another request to Cardinal because that is what was agreed upon when NCC MERP allows use of taxonomy.

***ACTION ITEM: A letter will be sent to Cardinal Health requesting a follow-up report on their use of the Taxonomy.***

The membership, in general, agreed that the use of a teleconference as used for this meeting was preferable to members being absent from the meeting altogether. Diane Cousins mentioned that this has always been an option but it may not want to be encouraged for all meetings.

The meeting adjourned at 11:14 A.M. followed by an executive session of the Steering Committee for membership discussions.