



**NCC MERP Meeting
September 27, 2019
10:00 a.m.–3:00 p.m.
USP – Rockville**

Attendees:

Matthew Grissinger (ISMP), Chair; Shawn Becker (USP), Secretariat; David Gough (AAM); James Burris (AGS); Amy Cadwallader (AMA); Michael Ganio (ASHP); Tara Modisett (APMS/NASPA); Arnold Clayman (ASCP); Lubna Merchant (FDA); She-Chia S. Chen (FDA); Frank Federico (IHI); Bob Feroli (MSOS); Scotti Russell (NABP); Robert Campbell (TJC); Rita Brueckner (Department of Veterans Affairs); Rita Munley Gallagher; Deborah Melnyk.

USP Observers: Abbey Ammerman; Donna Bohannon; Lauren Pearson (APPE Student)

Opening, Procedural, and Administrative Matters

Mr. Matthew Grissinger called the meeting to order at 10:00 a.m. and welcomed everybody to the meeting. Ms. Ammerman called roll and acknowledged a quorum was present lacking. The agenda and summary of the previous meeting were reviewed and approved by unanimous consent.

Secretariat's Report

Ms. Shawn Becker provided updates on the NCC MERP membership. She noted that she had reached out to Diane Cousins to invite her to join as an individual member, but she had declined at this time. It was also noted that she reached out to AHRQ and NCSBN to identify the new delegates and had not heard back. Members agreed that if there continued to be a lack of response, these organizations should be removed from the membership.

Ms. Donna Bohannon shared high level web analytics highlighting the continued increase in traffic. There have been nearly 10,000 pageviews thus far in 2019. The Medication Error Index and the Taxonomy continue to be the most downloaded items on the site.

Indication Based Prescribing

Mr. Grissinger introduced Dr. Gordy Schiff and Pam Garabedian who shared their findings from an AHRQ funded project focused on indication-based prescribing. The project sought to improve prescribing safety by redesigning medication computerized prescriber order entry (CPOE) by incorporating the medication indication into the prescription order. The study aimed to:

1. Convene 6 stakeholder expert panels on rationale, multi-user needs, operational and interoperability requirements, interface design elements, limitations and barriers, and policy implications of incorporating indication into CPOE; publication of Sounding Board and White Paper
2. Build working prototype indications-enabled CPOE using user-centered design incorporating Aim 1 recommendations
3. Formally test and compare prototype to two widely deployed CPOE systems using use-case clinical scenarios re: ordering speed, error rate, user experience/satisfaction, plus usefulness and safety of the prescriptions generated for pharmacists and patients.

They shared a demo of the tested prototype and noted that it is not yet in the marketplace, but there are small vendors piloting the system. It was noted that there is a mechanism to handle off-label prescribing. A member asked what kind of terminology would be used for the labels. It was noted, that the 2nd generation decision support would allow for a medical/health literacy description on the label to be more useful for the patient/family member.

It was noted that several member organizations have statements supporting indication-based prescribing and they appreciated the update on this work.

Statement Updates

Mr. Grissinger reminded members that at the last meeting it was agreed to begin a more systematic review of our current statements to determine whether they required revision. Any statements/recommendations that are deemed no longer relevant or outdated will be archived.

The first statements reviewed are:

- Recommendations for Manufacturers to Prevent Medication Errors Associated with the Label, Labeling and Packaging of Pharmaceutical (Drug) Products and Related Devices
- Recommendations for Regulators and Standards Setters to Prevent Medication Errors Associated with the Label, Labeling, and Packaging of Pharmaceutical (Drug) Products and Related Devices

FDA noted that they now have 2 final Guidances that cover these issues and there was a suggestion to archive these recommendations. A motion was made to archive the recommendations, the motion seconded and approved unanimously.

It was noted that the recommendation "Promoting the Safe Use of Suffixes in Prescription Drug Names" originated from a 2004 Joint Commission Meeting. FDA noted that there is now a draft Guidance with recommendations for regulators in how to address the use of suffixes and modifiers. It was suggested that this recommendation be reviewed next.

Action Item: Mr. Grissinger will review and share first draft with the Advisory Committee.



Recommendations and Statements in Process

Inappropriate Polypharmacy:

It was noted that this recommendation is now more focused and has now shifted to addressing Inappropriate Polypharmacy. Dr. Feroli was tasked with revising the polypharmacy recommendation draft to focus on inappropriate polypharmacy.

Leadership in Medication/Patient Safety:

There is an opportunity to highlight the value of Medication Safety Officers with leadership and demonstrate ROI which may include improved patient experience/satisfaction scores around Medication Education while in the hospital.

Avoiding Medication Errors with Drug Samples

This recommendation highlights the risk of medication errors with the use of drug samples and provides guidance for a standardized approach to distribution of drug samples in all practice settings. It was noted that this recommendation doesn't require significant revision.

For all three Recommendations, member feedback will be incorporated and distributed for electronic balloting. It was suggested that the barcoding on labels statement be the next in the queue for review.

Items for future work

Members discussed areas that could be explored for new recommendations or statements.

- Antibiotic stewardship in outpatient settings
- Standards for infusion preparation regardless of setting
- Indication-based prescribing
- Recommendations for consumers – the role of consumers in medication safety

Member Updates

Several members shared updates from their organizations

- AAM is looking at issues surrounding the consumer level of medication adherence.
- FDA noted work they are doing with the international medication safety network and international regulators regarding container storage and labeling recommendations
- USP highlighted their Call for Candidates and noted that the newly published compounding chapters are currently under appeal.
- ISMP is working on smart pump guidelines and international best practices.
- MSOS highlighted their discussion board and monthly webinar series.
- IHI noted their work with WHO regarding the challenge regarding medication safety particularly the work being done in Africa to test models to share with WHO.

Closing

Members were reminded that this was an election year and that they would receive a call for nominations in the weeks to come. The chair thanked the Council members and adjourned the meeting at 3:00 p.m.