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## CONTACT US

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## WELCOME

Important foundations for national uptake of safe medication management processes have been achieved by the SMM Programme team. The national medication chart and medicine reconciliation have been piloted in multiple sites, and these pilots have tested the tools and processes for national rollout which will be undertaken over the coming months.

The programme is now focussed on the national rollout of manual systems to improve patient safety, and the piloting of electronic systems.

Another foundation which the SMM Programme has links to is the NZ Universal List of Medicines (NZULM). The release of the NZULM in August 2010 is an opportunity for the sector to communicate medicine information using the same language. This is a key platform for the development of enhanced interoperability between electronic medication management systems in the primary and secondary health care settings.

## MEDICINE RECONCILIATION

The results from four of the paper based pilot DHBs (West Coast, MidCentral, South Canterbury and Hawke's Bay) have been collated and analysed. Across the four pilots a total of 2074 patients were admitted. Of these patients, the MR process was initiated for 59%, with 34% having the process completed within 24 hours of their hospital admission.

A total of 1581 discrepancies were identified, averaging 1.3 discrepancies per patient. 96% of these discrepancies related to medicines and 4% to allergies and adverse drug reactions (ADRs). Prescribers identified that 17% of the medicine discrepancies were intentional and 65% unintentional. The remaining 18% could not be classified, indicating that reconciliation did not occur. From the 1581 discrepancies found, 44% were signed as reconciled within 24 hours.

The results from Whanganui and Capital and Coast DHBs are still to be collated and analysed.

Key learnings to date from the pilot sites are:

- That the preliminary DHB visit by the SMM team was essential and invaluable. This time was used to lay the foundation for MR, start education and training, cover the measuring and reporting framework, lead stakeholder meetings and ensure risks are being mitigated.
- The pilot demonstrated to all staff in the pilot ward the importance of obtaining an accurate medication history.
- The involvement of an active multidisciplinary team in the project ensured its success by enabling continuous improvement.
- Further evaluation of medication inaccuracy needs to be undertaken to identify additional interventions to enhance overall accuracy and safe delivery of medications.
- Keep at it. Don't assume everyone is with you! Demonstrate the value of MR by providing data to the team, challenging them to improve.
- The generous and unfailing support of clinical champions was a critical success factor.

## National Roll Out of MR

The members of the SMM team would like to sincerely thank those DHBs for their hard work piloting paper based Medicine Reconciliation. We have identified a number of champions from the pilot areas to help us with the national roll out. Having clinical champions to inspire, guide and influence their colleagues is critical to the success of the SMM quality initiatives.

## STEERING GROUP

**Chris Fleming**  
Chief Executive Officer  
Acting Chair SMM Steering  
Group

**Helen Pocknall**  
Director of Nursing

**Nick Lanigan**  
Chief Information Officer

**Elizabeth Plant (PSNZ)**  
Chief Pharmacist

**Helen Lockyer**  
Ministry of Health

**Billy Allan (NZHPA)**  
Chief Pharmacist

**Anne Kemp**  
Quality & Risk Manager

**Keith Carey-Smith**  
GP Liaison

**Tim Maling**  
Chief Medical Officer  
Representative

**Paul Cressey**  
Board Member Counties  
Manukau DHB

**Beth Loe**  
Safe and Quality Use of Medicine  
Group

**Dale Oliff**  
Chief Operating Officer

**Barbara Holland**  
Consumer

**Jean Park**  
Consumer

The SMM Steering Group agreed that after successful completion of 6 pilots it was appropriate to move to the roll-out phase. A plan is therefore being developed to support all remaining DHBs in their implementation or development of MR in line with the SMM MR standards (developed for the NZ environment based on international best practice). The SMM team is available to provide education and training, including provision of the MR toolkit, education posters and the Measuring and Reporting Framework. If you would like the SMM MR team to visit you to assist in your development / implementation of MR contact the project manager Amanda Ashcroft, email:

[amanda.ashcroft@huttvalleydhb.org.nz](mailto:amanda.ashcroft@huttvalleydhb.org.nz)

As a starting point for national roll out the SMM team held a Medicine Reconciliation workshop on 3 August 2010. A representative from each of the 20 DHBs accepted the invitation to attend. There was very positive feedback from the day with each of the six MR pilot sites sharing their pilot experience and lessons learned. The two eMR pilot sites (Taranaki and Counties Manukau) also presented an update of their electronic pilot.

The focus of the workshop was:

1. To ensure all DHBs have an understanding of the SMM MR process.
2. To increase all DHBs' networking connections to collaborate and continue to share the successes and barriers in implementing MR and learn from each other.
3. To gain an improved understanding of the importance of the national measuring and reporting requirements for MR.

## NATIONAL MEDICATION CHART

The first of three pilots was completed at Bay of Plenty DHB last December. The national medication chart pilots at Lakes and Hutt Valley DHBs have now also been completed. The audit data is currently being collated with the analysis and final report due for publication in late September 2010.

The staff satisfaction surveys completed at both DHBs provide positive and constructive feedback, suggesting possible design improvements for the medication chart,

together with advice and guidance on roll-out.

A database to capture and assist with the analysis of audit data has been developed for the evaluation of the national medication chart and will form the basis for the electronic prescribing and administration audit database.

If your DHB is interested in implementing the national medication chart contact the project manager Sene Tala, email [sene.tala@huttvalleydhb.org.nz](mailto:sene.tala@huttvalleydhb.org.nz)

The members of the SMM team would like to sincerely thank those DHBs for their hard work piloting the National Medication Chart.

## ELECTRONIC PILOTS

### Taranaki DHB

Taranaki is scheduled to "Go Live" with electronic Medicine Reconciliation, integrated with the hospital pharmacy system, in November this year.

### Counties Manukau DHB

Counties Manukau is scheduled to "Go Live" with electronic Medicine Reconciliation, along with enhancements to the primary / secondary interface, in December this year.

### Southern DHB

Southern DHB has recently been granted a waiver to allow for electronic prescribing by the Director-General of Health. The electronic prescribing and administration pilot can now proceed at Dunedin Hospital. The pilot will "Go Live" in September this year.

### Expressions of Interest

Expressions of interest have also been received from three other DHBs (Waitemata / Counties Manukau, Taranaki, and Wairarapa) to run ePrescribing / eAdministration pilots. The evaluation of their business cases is currently underway.

### RNZCGP 'Drug Interactions that Matter'

The SMM Programme has received permission from the Royal New Zealand College of General Practitioners (RNZCGP) to incorporate material from their 'Drug Interactions that Matter' table into ePrescribing decision support functionality. Andrew Stensen, Group Manager, Business Performance at RNZCGP views the integration of the

## units and numbers...

...correct placement within the dose box!

Avoid 'squeeze to fit'.  
 Instead write the units in the lower half of the dose box.

- 40 mg ✓
- 62.5 mcg ✓
- 2.5 ml ✓

table into ePrescribing as "important work that will potentially make what we understand to be best practice available to a wider range of clinicians." RNZCGP holds the copyright for the table, developed for the Goodfellow Unit Symposium in 2007, and published in the June 2009 Journal of Primary Health Care.

The SMM Programme aims to reduce harm to patients from adverse drug events, an aim assisted by the development of robust knowledge-based decision support in electronic medication management systems. Southern DHB proposes to develop tools enabling it to identify where drug interaction table decision support activity has changed prescribing decisions, which can then inform future training and decision support development.

The Dunedin hospital project team and SMM take this opportunity to thank the RNZCGP for permission to include the 'Drug Interactions that Matter' table in ePrescribing decision support.

## DHB COLLABORATION

The Project Managers and Clinical Leaders of the DHBs implementing the electronic pilots have been in close contact to maximise interoperability between systems, develop standards, and standardise the content of the following items, which are common to the three pilots:

1. Information data-sets
  - Medicines: orders and prescriptions, administration records
  - Allergies and Adverse Drug Events
2. Patient Information
  - eYellow Cards
  - Patient Information leaflets
3. Electronic system presentation / functionality
  - Patient Banner: content and presentation
  - Decision Support: initially, at the point of prescribing

The first of the requirements was completed for consultation at the end of June, with the remainder released mid August. The consultation process will run over four weeks, involving SQM, SMM Working Group, and special interest groups, including consumers.

## NZ UNIVERSAL LIST OF MEDICINES

### Update from the NZULM project

The Associate Minister of Health, Hon. Peter Dunne, officially launched the NZULM at Hutt Valley DHB on the 31st of May 2010. The Directors of the National Health Board, National Health IT Board, SMM Programme Lead, NZULM Steering Group and project team members were in attendance.



Hon. Peter Dunne, Associate Minister of Health; Paul Cressey, Chair of the NZULM Steering Group; Shayne Hunter, NZULM Project Lead

The NZULM is a continuously updated dictionary of essential and practical information about medicines for doctors, pharmacists, nurses and other professionals working with medicines. It provides authoritative and standardised information about medicines covering registerable medicines approved for supply in New Zealand, products listed in the Pharmaceutical Schedule which fall outside of this category, and unapproved products supplied under Section 29 of the Medicines Act, 1981 (commonly referred to as a Section 29 medicine). At its heart is the medicines terminology. Medicines are described and coded using the SNOMED CT international standards for medicines terminology. It forms the common language and is the foundation upon which other information is attached.

The NZULM is free to use and can be viewed at [www.nzulm.org.nz](http://www.nzulm.org.nz).

Preparing the NZULM for evaluation release has been a major undertaking conducted over a short space of time. Information on thousands of medicines has been gathered, recorded and checked. More are being added daily.

While the NZULM team has been very thorough, we are all too aware there will be aspects of the system and information which can be improved. The

## Allergies & Adverse drug reactions (ADR)...

...do you know the difference?

An allergy is an immune-mediated response and can cause reactions ranging from mild to anaphylaxis.

An ADR is intolerance to a medication administered at its usual dose.

What type of allergies should be documented on the chart? All known medication, chemical and food allergies should be documented.

Consult with the patient to determine whether they have had an allergic reaction or an adverse drug reaction.

## Check all pages when...

...prescribing or administering!

- Don't forget to check all the pages:
- PRN
  - Regular 1
  - Regular 2
  - Once Only
  - Intravenous/Subcutaneous (on the back of the chart)

Examples of National Medication Chart Posters available to DHBs

Safe Medication Management Programme  
 "...putting the right systems in place!"  
 Medicine Reconciliation

*Taking an accurate Medication History is an important part of good patient care....*



**...help us to help you!**

NZULM is being released for evaluation prior to general release for vendors and others to incorporate in systems for use by clinicians and other professionals using medicines information.

What we want to do now is test the NZULM in depth, both the information and the system. We need to be sure the information is fit for purpose and clinically safe. The feedback has been very positive with either praise for the work done or constructive input on some data issues or refinements to the website. We want to know what you think so please take the time to try the system.

## NZ MEDICINES FORMULARY

### Update from the NZMF project

The New Zealand Medicines Formulary (NZMF) is a core medicines information resource to be used as a 'one-stop shop' and first reference source of standardised and evidence-based information about medicines for health-care providers.

The NZMF builds on the NZULM as a foundation by adding clinical information to aid clinical decision support including:

- Determining which medicines should be used to treat specific conditions, how they should be administered, and in what dose.
- Highlighting what precautions to take, what adverse reactions may need to be monitored, and what kind of interactions may occur if the patient is taking other medications.

It will be continuously updated and fully integrated into prescribing and dispensing software. It will also be accessible online and in portable devices.

Work on the NZMF is underway and by November a specification of requirements will have been completed and we will be approaching the market for content sourcing by Request for Proposal.

## PRIMARY CARE WORK STREAM

A plan to consult with primary care on the content and format of the discharge summary and yellow card has been developed.

Difficulties with the MedTech medication merge fields, designed to fix existing problems, have been identified and need to be resolved before being widely adopted by primary care.

Initial planning is underway to pilot medicine reconciliation in an aged residential care facility in conjunction with a general practice.


## LEGISLATION

### Update from the Ministry

The Ministry has sent the Minister of Health a report on the feedback that was received from a wide cross section of stakeholders on the proposed changes to the Medicines Regulations. For the most part, submitters supported the proposals (including the change to allow electronic transmission of prescriptions), and in some cases they suggested additional useful changes. The Ministry hopes the Minister will make decisions on final proposals for medicines regulations changes in the near future. The Ministry will then prepare a Cabinet paper which seeks agreement to the regulation changes (including the issuing of drafting instructions), and the release of a summary of the analysis of submissions. Subject to Cabinet approval, and drafting time, the Ministry anticipates that the new regulations will be passed and come into force around the end of this year.

Safe Medication Management Programme  
 "...putting the right systems in place!"  
 Medicine Reconciliation

*Taking an accurate Medication History is an important part of good patient care....*



**...it helps to reduce medication errors!**

**Examples of the Medicine Reconciliation Posters available to DHBs**