

Fact Sheet

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**39 Joint Commission Standard
Elements of Performance and 4
National Patient Safety Goals Directly
Addressed or Facilitated by Your Use
of Sentri7 and Quantifi**

MEDICATION MANAGEMENT (MM)

Standard MM.01.01.01 The [organization] plans its medication management processes.

Elements of Performance #2

The hospital implements its policy to make information about the patient accessible to licensed independent practitioners and staff who participate in the management of the patient's medications.

Standard MM.04.01.01 Medication orders are clear and accurate.

Elements of Performance #5

The hospital has a written policy that defines the following: Actions to take when medication orders are incomplete, illegible, or unclear.

Standard MM.05.01.01 A pharmacist reviews the appropriateness of all medication orders for medications to be dispensed in the [organization].

Elements of Performance #4

All medication orders are reviewed for the following: Patient allergies or potential sensitivities.

Elements of Performance #5

All medication orders are reviewed for the following: Existing or potential interactions between the medication ordered and food and medications the patient is currently taking.

Elements of Performance #6

All medication orders are reviewed for the following: The appropriateness of the medication, dose, frequency, and route of administration.

Elements of Performance #7

All medication orders are reviewed for the following: Current or potential impact as indicated by laboratory values.

Elements of Performance #8

All medication orders are reviewed for the following: Therapeutic duplication.

Elements of Performance #9

All medication orders are reviewed for the following: Other contraindications.

Elements of Performance #10

All medication orders are reviewed for the following: Variation from the hospital's approved indications for use.

Elements of Performance #11

After the medication order has been reviewed, all concerns, issues, or questions are clarified with the individual prescriber before dispensing.

Standard MM.05.01.17 The [organization] follows a process to retrieve recalled or discontinued medications.

Elements of Performance #1

The hospital has a written policy describing how it will retrieve and handle medications within the hospital that are recalled or discontinued for safety reasons by the manufacturer or the Food and Drug Administration.

Elements of Performance #2

The hospital implements its policy on retrieving and handling medications when they are recalled or discontinued for safety reasons.

Standard MM.07.01.01 The [organization] monitors [patient]s to determine the effects of their medication(s).

Elements of Performance #1

The hospital monitors the patient's perception of side effects and the effectiveness of his or her medication(s).

Elements of Performance #2

The hospital monitors patient response to medication(s) by taking into account clinical information from the medical record, relevant lab values, clinical response, and medication profile.

Standard MM.07.01.03 The [organization] responds to actual or potential adverse drug events, significant adverse drug reactions, and medication errors.

Elements of Performance #1

The hospital has a written process to respond to actual or potential adverse drug events, significant adverse drug reactions, and medication errors.

Elements of Performance #2

The hospital has a written process addressing prescriber notification in the event of an adverse drug event, significant adverse drug reaction, or medication error.

Elements of Performance #3

The hospital complies with internal and external reporting requirements for actual or potential adverse drug events, significant adverse drug reactions, and medication errors.

Elements of Performance #4

The hospital implements its process for responding to adverse drug events, significant adverse drug reactions, and medication errors.

Elements of Performance #6

For hospitals that use Joint Commission accreditation for deemed status purposes: Medication administration errors, adverse drug reactions, and medication incompatibilities are immediately reported to the attending physician, and, as determined by the hospital, to the organization-wide performance improvement program.

Standard MM.08.01.01 The [organization] evaluates the effectiveness of its medication management system.

Elements of Performance #1

The hospital collects data on the performance of its medication management system.

Elements of Performance #2

The hospital analyzes data on its medication management system.

Elements of Performance #3

The hospital compares data over time to identify risk points, levels of performance, patterns, trends, and variation of its medication management system.

Elements of Performance #5

Based on analysis of its data as well as review of the literature for new technologies and best practices, the hospital identifies opportunities for improvement in its medication management system.

Elements of Performance #6

The hospital takes action on improvement opportunities identified as priorities for its medication management system.

Elements of Performance #7

The hospital evaluates changes to confirm that they resulted in improvements for its medication management system.

INFECTION CONTROL (IC)

Standard IC.01.05.01 The [organization] has an infection prevention and control plan.

Elements of Performance #8

The hospital identifies methods for reporting infection surveillance and control information to external organizations.

Standard IC.02.01.01 The [organization] implements its infection prevention and control plan.

Elements of Performance #1

The hospital implements its infection prevention and control activities, including surveillance, to minimize, reduce, or eliminate the risk of infection.

Elements of Performance #8

The hospital reports infection surveillance, prevention, and control information to the appropriate staff within the hospital.

Elements of Performance #9

The hospital reports infection surveillance, prevention, and control information to local, state, and federal public health authorities in accordance with law and regulation.

LEADERSHIP (LD)

Standard LD.03.02.01 The [organization] uses data and information to guide decisions and to understand variation in the performance of processes supporting safety and quality.

Elements of Performance #3

The hospital uses processes to support systematic data and information use.

Elements of Performance #5

The hospital uses data and information in decision-making that supports the safety and quality of care, treatment, and services.

PERFORMANCE IMPROVEMENT (PI)

Standard PI.01.01.01 The [organization] collects data to monitor its performance.

Elements of Performance #14

The hospital collects data on the following: Significant medication errors.

Elements of Performance #15

The hospital collects data on the following: Significant adverse drug reactions.

Standard PI.02.01.01 The [organization] compiles and analyzes data.

Elements of Performance #1

The hospital compiles data in usable formats.

Elements of Performance #3

The hospital uses statistical tools and techniques to analyze and display data.

Elements of Performance #4

The hospital analyzes and compares internal data over time to identify levels of performance, patterns, trends, and variations.

Elements of Performance #5

The hospital compares data with external sources, when available.

Elements of Performance #8

The hospital uses the results of data analysis to identify improvement opportunities.

HUMAN RESOURCES (HR)

Standard HR.01.07.01 The [organization] evaluates staff performance.

Elements of Performance #1

The hospital evaluates staff based on performance expectations that reflect their job responsibilities.

NATIONAL PATIENT SAFETY GOALS

Goal 2 Improve the effectiveness of communication among caregivers.

NPSG.02.03.01

The [organization] measures, assesses, and, if needed, takes action to improve the timeliness of reporting, and the timeliness of receipt of critical tests and critical results and values by the responsible licensed caregiver.

Goal 3 Improve the safety of using medications.

NPSG.03.05.01

Reduce the likelihood of [patient] harm associated with the use of anticoagulation therapy.

Goal 7 Reduce the risk of health care associated infections.

NPSG.07.03.01

Implement evidence-based practices to prevent health care associated infections due to multiple drug-resistant organisms in acute care hospitals.

NPSG.07.04.01

Implement best practices or evidence-based guidelines to prevent central line-associated bloodstream infections.

NPSG.07.05.01

Implement best practices for preventing surgical site infections.

Goal 9 Reduce the risk of [patient] harm resulting from falls.

NPSG.09.02.01

The [organization] implements a fall reduction program that includes an evaluation of the effectiveness of the program.