State of Tennessee Department of Children's Services

Administrative Policies and Procedures: 20.59

Subject: Medication Error/Omission Management Guidelines

Supersedes: None

Local Policy: No
Local Procedures:
Training Required: No
Applicable Practice Model Standard(s): Yes

Approved by:

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Application

To All Department of Children's Services Employees and Contract Providers

Authority: TCA 37-5-106

Policy

Medication errors/omissions must be reported to the Department of Children's Services in accordance with the reporting of incidents (see *DCS Policy 1.4 Incident Reporting*) to promote continuous quality improvement and best practice for children/youth in DCS custody.

Procedures

A. Reporting, managing and tracking medication errors

1. Reporting, managing and tracking medication errors/ omissions are necessary to:

   a) Identify causes of the medication errors/omissions;

   b) Provide prompt and thorough healthcare after a medication error/omission occurrence;

   c) Evaluate the severity of the medication error/omission; and

d) To take corrective action to prevent further occurrences.

2. This practice promotes continuous quality improvement, which results in best practice for children/youth in DCS custody.

B. Categories of Medication Errors

DCS will use the following categories, extracted from a list developed by the *American Journal of Hospital Pharmacy*, in order to define types of medication errors/omissions.

1. **Prescribing Error**

   a) Incorrect drug selection; contraindications; known allergies; harmful interaction with existing drug therapy

   b) Incorrect dose, dosage form, quantity, route, concentration, rate of administration

   c) Illegible prescriptions or medications orders that lead to errors

   d) Omission/Missed Dose

   e) Failure to administer an ordered dose at time and interval scheduled.

2. **Wrong Time**

   Administration of medication outside a predefined time interval from its scheduled administration time (more than one (1) hour before or more than one (1) hour after).

3. **Unauthorized Drug**

   a) Medication not authorized by prescribing provider for the child/youth

   b) Wrong drug; a dose given to the wrong child/youth

4. **Improper/Wrong Dose**

   Administration of a dose that is greater than or less than the amount ordered by the prescribing provider.

5. **Deteriorated Drug**

   Administration of a drug that has expired or for which the physical or chemical dosage-form integrity has been compromised

6. **Other Medication Errors**

   Any medication error that does not fall into one of the above predefined categories including, but not limited to:

   a) Pharmacy error

   b) Documentation errors, e.g., administering medication but failing to initial the block on the MAR (Medication Administration Record).

   c) Administering psychotropic medications without consent. (See *DCS Policy 20.24 Informed Consent*)

   d) Finding medication in an inappropriate area, e.g., in child/youth's clothing, on the floor, packaged with a meal, in non-secure area, in an unmarked open container/dish, or mixed together in a container, etc.

   e) Failing to ensure that an adequate supply of medication is available or that new prescriptions are obtained within a reasonable time.

   f) Security/storage safeguards are not followed.

C. Classification of Harm

In order to track and quantify medication errors, they will be reported according to severity as described below.

1. **Classification: (I) Error, No Harm**

   - **Category 1** – An error occurred, but the medication did not reach the child/youth and no harm was caused.
   - **Category 2** – An error occurred that reached the child/youth, but it did not cause harm.
   - **Category 3** – An error occurred resulting in the need for increased monitoring of the child/youth, but no harm occurred.

2. **Classification: (II) Error, Harm**

   - **Category 4** – An error occurred that resulted in the need for treatment or intervention and caused temporary harm to the child/youth.
   - **Category 5** – An error occurred that resulted in initial or prolonged hospitalization and caused temporary harm to the child/youth.

- **Category 6** – An error occurred that resulted in the child/youth suffering permanent harm.
- **Category 7** – An error occurred that resulted in a near-death event (e.g., anaphylaxis, and cardiac arrest).

3. **Classification: (III) Error, Death**

- **Category 8** – An error occurred that resulted in a child/youth's death.

D. Reporting Medication Errors

1. Medication errors must be reported to the Department of Children's Services in accordance with the reporting of incidents.
2. Medication errors are Type A Incidents as described in the *Incident Reporting Manual*.
3. Form *CS-0311, Incident Report* must be completed and submitted to the home county case manger, regional resource management, and Central Office Quality Assurance Division.
4. Monitoring, treatment, or interventions required must be specified on the *Incident Report* form (*CS-0311*) for Categories 3, 4, 5, 6, 7, and 8 medication errors.
5. In addition, the medication error must be reported within a facility to the appropriate staff.
   - Facilities with nursing staff must ensure that the charge nurse or director of nursing receives the Incident Report and conducts appropriate follow-up.
   - In accordance with *DCS policy 20.15, Medication Administration, Storage and Disposal*, missed medications must be reviewed weekly in level 4 facilities and Youth Development Centers.
6. In Youth Development Centers and DCS Group Homes, the medication error/ omission must also be reported to the Health Services Coordinator in Central Office.

Forms

CS-0311 Incident Report

Collateral Documents

American Journal of Hospital Pharmacy

Dept. of Children's Services "*Standards of Professional Practice For Serving Children and Families: A Model of Practice*"

Standards

DCS Model of Practice Standard -2-602

DCS Model of Practice Standard - 7-100A

DCS Model of Practice Standard - 7-121C

DCS Model of Practice Standard - 7-100A

DCS Model of Practice Standard - 7-121C

Glossary

Term	*Definition*
Contraindication	A symptom or condition that makes a particular treatment or procedure inadvisable.
Medication error	A prescribed medication (substance) that is not administered according to physician's orders (e.g., missed dose, dose administered at wrong time of day, medication given to wrong individual).