PGY1 Medication Safety Rotation
Indiana University Health

Preceptor
James R. Rinehart, R.Ph. MS., FASHP
Office: 962-2697

Learning Experience Description
The goal of the medication safety rotation is to offer the resident experience in identifying ways to enhance the medication use system to minimize the risk of adverse drug events. The resident will have the opportunity to provide evidence-based information for initiatives being considered by the medication safety team. The resident will gain an understanding of the administrative duties related to medication safety and the clinical analysis of medication variance reports. The resident will demonstrate the ability to work in interdisciplinary teams to enhance medication safety and patient safety within the IU Health system.

Requirements of Learning Experience
Pre-Rotation Requirements
• It is expected that the resident will send an email 2 weeks before starting the rotation to the respective preceptor. The email should include, but is not limited to, the following:
  o Dates and times of required longitudinal commitments, Indiana Pharmacy Teaching Certificate seminars (if applicable), and Residency Forum (if applicable)
  o Attending mandatory activities (i.e., Pharmacy Grand Rounds) and other meetings as they are scheduled.
  o Paid time off approved by both the RPD and respective preceptor

Required Meetings
• Attend all scheduled medication safety meetings and provide evidence based input on proposed initiatives, as requested.
  o The core meetings include:
    ▪ Medication Safety Department Staff Meeting
    ▪ Medication Variance Review Committee
    ▪ Medication Safety Committee
    ▪ Medication Safety Advisory Committee
    ▪ Facilities’ Open Intervention Meetings
    ▪ Medication Variance and Information Systems Phone Conference
    ▪ System Pharmacy & Therapeutics Committee
  o Attendance at these meetings will depend on agenda items. Possible meetings include the following:
    ▪ IU Health System Policy Council
    ▪ Clinical Information Systems (CIS) Council
    ▪ Various Drug Specialty Panels
    ▪ Chemotherapy Safety Committee
• Pre-meetings for various committees
• Academic Health System Pharmacy & Therapeutics Committee
• A multidisciplinary root cause analysis (RCA) or a Failure Mode and Effects Analysis (FMEA) meeting

• Prepare accurate and effective meeting minutes for the Medication Safety meetings during the rotation month that satisfy the requirements of organizational, regulatory, and accreditation considerations, as applicable.

**Required presentations:**
• Prepare and present one of the required reading assignments at the department staff meeting.
• Present completed projects that are ready for system wide implementation.
• Present updated or new policies at the System Policy Council and the Pharmacy & Therapeutics Committee.
• Present the medication variance report at the monthly Medication Variance Review Committee.
• Present the quarterly medication variance data at the various committees that have a standing agenda for this topic.
• Present information related to the ISMP quarterly action agenda at the Medication Safety Committee.

**Required Project**
• Assist the medication safety staff by investigating medication variances.
• Assist the medication safety staff by completing the reviewed adverse drug reaction incident reports.
• Demonstrate the ability to retrieve MCCM reports as well as compile and analyze the data in order to complete assigned projects. Within given specifications.
• Prepare an article regarding a medication safety topic for distribution in a facility newsletter.
• Implement, evaluate, and /or update safe medication use guidelines, policies & procedures, and medication safety resources on the IU Health Pulse webpage.
• Identify and address a medication safety issue throughout the IU Health system.
• Provide an evidence based solution and a final presentation for the various committees to create a system-wide process improvement action plan.

**Required Readings, recommended websites, and training slides**
• American Society of Hospital Pharmacists (ASHP) guidelines on preventing medication errors in hospitals. *Am J Hosp Pharm*. 1993;50:305-14

**Websites:**

**Training slides:**

**Learning Experience Evaluated Goals:**
**Goal R1.1:** Identify opportunities for improvement of the organization’s medication-use system.
**Goal R1.4:** Demonstrate ownership of and responsibility for the welfare of the patient by performing all necessary aspects of the medication-use system.
**Goal R2.1:** As appropriate, establish collaborative professional relationships with members of the health care team.
Learning Experience Activities, Assessment Criteria and Corresponding Learning Experience Goals/Objectives

<table>
<thead>
<tr>
<th>Learning Experience Activity</th>
<th>Learning Experience Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explain the concepts of systems theory and system error. Define terms associated with adverse drug events, medication safety, and culture of safety. Identify limitations to the current ADE reporting system and formulate strategies for improvement.</td>
<td>R1.1.1</td>
</tr>
<tr>
<td>Describe methods for analyzing processes within a medication-use system (e.g. root cause analysis, failure mode and effect analysis). Explain the characteristics of a clinically significant ADE and categorize medication errors using the ASHP Guidelines on Preventing Medication Errors in Hospitals and the National Coordinating Council for Medication Error Reporting and Prevention index.</td>
<td>R1.1.2</td>
</tr>
<tr>
<td>Participate in the pharmacy department’s ongoing process for tracking and trending ADEs.</td>
<td>R1.1.3</td>
</tr>
<tr>
<td>Display initiative in preventing, identifying, and resolving pharmacy-related patient-care problems. Identify and contact the appropriate parties when a problem in the medication use process is identified, and explain the role of assertiveness in presenting pharmacy concerns, solutions, and interests.</td>
<td>R1.4.1</td>
</tr>
<tr>
<td>Describe the roles of the interdisciplinary team members involved with medication safety. Explain the limits imposed on possible collaborative relationships by legal and regulatory requirements and organizational policies and procedures. Exercise skill in the coordination and integration of a pharmacy services care within the contributions of other members of the interdisciplinary team.</td>
<td>R2.1.1</td>
</tr>
</tbody>
</table>

Methods of Evaluation

Evaluation of residents will be based on the above learning experience goals. The preceptor and resident will review the resident’s customized plan and the learning experience introduction document on the first day of rotation. Feedback will include, but not be limited to: verbal and/or written mid-point and end of rotation evaluations of the resident, preceptor and learning experience.