

# HEALTHWEST

## Policy and Procedure

No. 06-008

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Approved by:

Subject: Medication Errors and  
Medication Documentation Errors

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*Rich Francisco*

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Executive Director

### I. POLICY

Medication must be accurately administered and documented. All staff must report suspected medication errors and medication documentation errors. Program Supervisors, in consultation with Health Professionals, will assure appropriate and immediate follow-up care to affected individuals.

### II. PURPOSE

To assure that prescribed medications are accurately and safely administered to individuals and that medication and documentation errors are appropriately addressed by agency supervisory staff.

### III. APPLICATION

All employees, volunteers, and student interns of HealthWest.

### IV. DEFINITIONS

#### A. Medication Error:

1. Giving medication that is not prescribed, or which has been discontinued.
2. Giving the prescribed medication at the wrong time (more than thirty (30) minutes prior to or past the designated administration time).
3. Administering the incorrect dosage of the prescribed medication.
4. Administering a medication to the individual with a known allergy to said medication.
5. Failure to follow established physician/drug company guidelines for proper administration, e.g., taking pulse before administering Lanoxin.
6. Failure to administer the prescribed medication.
7. Failure to administer using the prescribed route.

B. Medication Documentation Error:

1. Signing for a medication not given and/or documenting inaccurately.
2. Failing to sign for or document a medication that was given.
3. Documenting in the wrong individual's record.
4. Failure to document giving a PRN medication; or, failure to document individual's refusal of a PRN medication.
5. Failure to properly transcribe a prescription or physician order for medication.
6. Failure to properly copy medication sheets.
7. Incorrect completion of a prescription.
8. Incorrect documentation of a prescription.

C. Health Professional: Physician, Physician's Assistant, or RN/NP.

D. Non-Serious Medication Error: A medication error that results in either no harm or non-serious physical harm to the individual receiving services.

E. Non-Serious Physical Harm: Physical damage suffered by an individual that a physician or registered nurse determines could not have caused, or contributed to, the death of an individual, the permanent disfigurement of an individual, or an impairment of his or her bodily functions.

F. Serious Medication Error: A medication error which results in, or could have resulted in, serious physical harm to the individual receiving services.

G. Serious Physical Harm: Physical damage suffered by an individual that a physician or registered nurse determines caused or could have caused the death of an individual, caused the impairment of his or her bodily function, or caused the permanent disfigurement of an individual receiving services.

V. PROCEDURE

A. The Pharmacy Work Group will routinely review agency medication error data as requested by the Recipient Rights Officer. When appropriate, it will identify and recommend specific improvement activities to be implemented and monitored or will authorize a project team/individual to do the same and report back to the Pharmacy Work Group.

B. The agency will provide instruction in medication administration and documentation to employees in the following manner:

1. Registered Nurses will be trained by the Integrated Health Care Manager regarding medication administration/documentation procedures which are site or program specific, utilizing consultation with Physicians and other Nurses as necessary.

2. Non-nursing staff in outpatient programs who administer medication will be trained by agency Nurses, with documentation of training placed their training record.
  3. Residential staff who administer medication will be required to successfully complete agency approved training specific to their program site(s) before they assume their responsibilities of administering medication. Completion of such training must be documented in their training record.
- C. In all cases, staff discovering a medication related error will immediately document it on an Incident Report form following the procedure outlined in HealthWest Policy No. 4-019. If the medication error is suspected to be abuse or neglect, the staff discovering the error will also promptly complete a Recipient Right's complaint form and send it directly to the agency's Office of Recipient Rights. The Office of Recipient Rights will conduct an investigation in accordance with HealthWest Policy No. 4-020.
- D. When a medication error occurs, the supervisor or designee, shall:
1. Take action, as necessary, to ensure appropriate medical treatment of the individual receiving services.
  2. Notify appropriate medical personnel as indicated, i.e., prescribing physician/PA/NP or emergency room physician.
  3. Thoroughly and promptly review the alleged medication error determining whether one has been committed and by whom according to HealthWest Policy No. 4-019.
  4. In consultation with the agency Medical Director or designated Health Professional, determine if the medication error is non-serious or serious in nature.
- E. The agency's Supervisory staff will counsel and/or administer discipline in the following manner to the involved full-time employee(s) when medication administration errors occur.
1. Non-Serious Medication Error:
    - a. An employee who has three or less non-serious medication errors during any six (6)-month interval will receive counseling and instruction at the time of each error to prevent future occurrences. The medication errors and subsequent follow-up action must be promptly documented by the supervisor. The supervisor may require his/her employee to retake formal training in medication administration offered by the agency after the commission of any medication error.
    - b. An employee who commits a fourth (4<sup>th</sup>) non-serious medication error in any six (6)-month period will automatically require formal retraining in medication administration. Such training will be specific to the system in

place at the program site(s) where the staff person administers medications. In addition, a fourth (4<sup>th</sup>) error will be considered as “Faulty Work”, a Group I Offense under the County of Muskegon Personnel Rule 8. Progressive discipline will be administered each time an employee commits a non-serious medication error beyond the three (3) allowable, during any six (6)-month time period. All non-serious medication errors committed more than six (6) months in the past will not count toward the fourth (4<sup>th</sup>) medication error required to trigger the next step of progressive discipline. The employee will be subject to progressive levels of disciplinary action up to two (2) years following the commission of their first formally disciplined non-serious medication error.

- c. The agency Executive Director may determine that certain non-serious medication errors have resulted from staff making decisions or judgments outside of the scope of their discipline, or that errors have been committed intentionally. In these and other similar cases, staff performance may be considered as “Unprofessional” Conduct under the County of Muskegon Personnel Rule 8, or Neglect, Class II or III, or Recipient Abuse, Class II, and the Director may respond accordingly with disciplinary action.

2. Serious Medication Error:

- a. A medication error in this class will require disciplinary action for each occurrence. Depending on specific circumstances and the level of resultant/potential harm, the agency Executive Director has the latitude to respond to a serious medication error as a Group I, II, or III Offense under County of Muskegon Personnel Rule 8.

F. Agency Response to Medication Documentation Errors

1. Supervisors will thoroughly review medication documentation errors and instruct/counsel staff involved.
2. This standard will not prevent the Supervisor from considering a pattern of medication documentation errors as “Faulty Work” and appropriately disciplining under the County of Muskegon Personnel Rule 8 when counseling has been demonstrated to be ineffective.

- G. In the case of hourly employees, the progression of discipline for medication errors and medication documentation errors may deviate from the specified progression for full-time, regular status employees as described in the County of Muskegon Personnel Rules, Rule 9.