University Hospitals Specialty Pharmacy Event Reporting

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Introduction

- University Hospitals Health System (UHHS)
  - University Hospitals Specialty Pharmacy (UHSP) is a part of an integrated health-system delivery network model within UHHS
  - UHSP is dually accredited by URAC (Utilization Review Accreditation Commission) and ACHC (Accreditation Commission for Health Care)
  - Compliance with accreditation measures is necessary for optimizing patient care, improving patient outcomes, and reducing overall healthcare burden and costs
  - There are 5 mandatory measures that must be reported to URAC on an annual basis, in order to meet the specialty pharmacy accreditation requirements.
  - 2 of the 5 mandatory measures focus on dispensing accuracy and distribution accuracy

Methods

- The UHSP team reports clinical interventions, near misses, and errors to the UHSP intervention email outbox or to a physical log on-site, which is then recorded into the Pharmacy Event Log (PEL) on SharePoint
- The results for all of the errors documented between 10/7/2019-3/31/2020 in the intervention log has been extracted and analyzed
- Inclusion:
  - All errors and clinical interventions reported within this time frame
- Exclusion:
  - Interventions that pertained to labs being ordered for treatment
- Information collected from the Interventions Log:

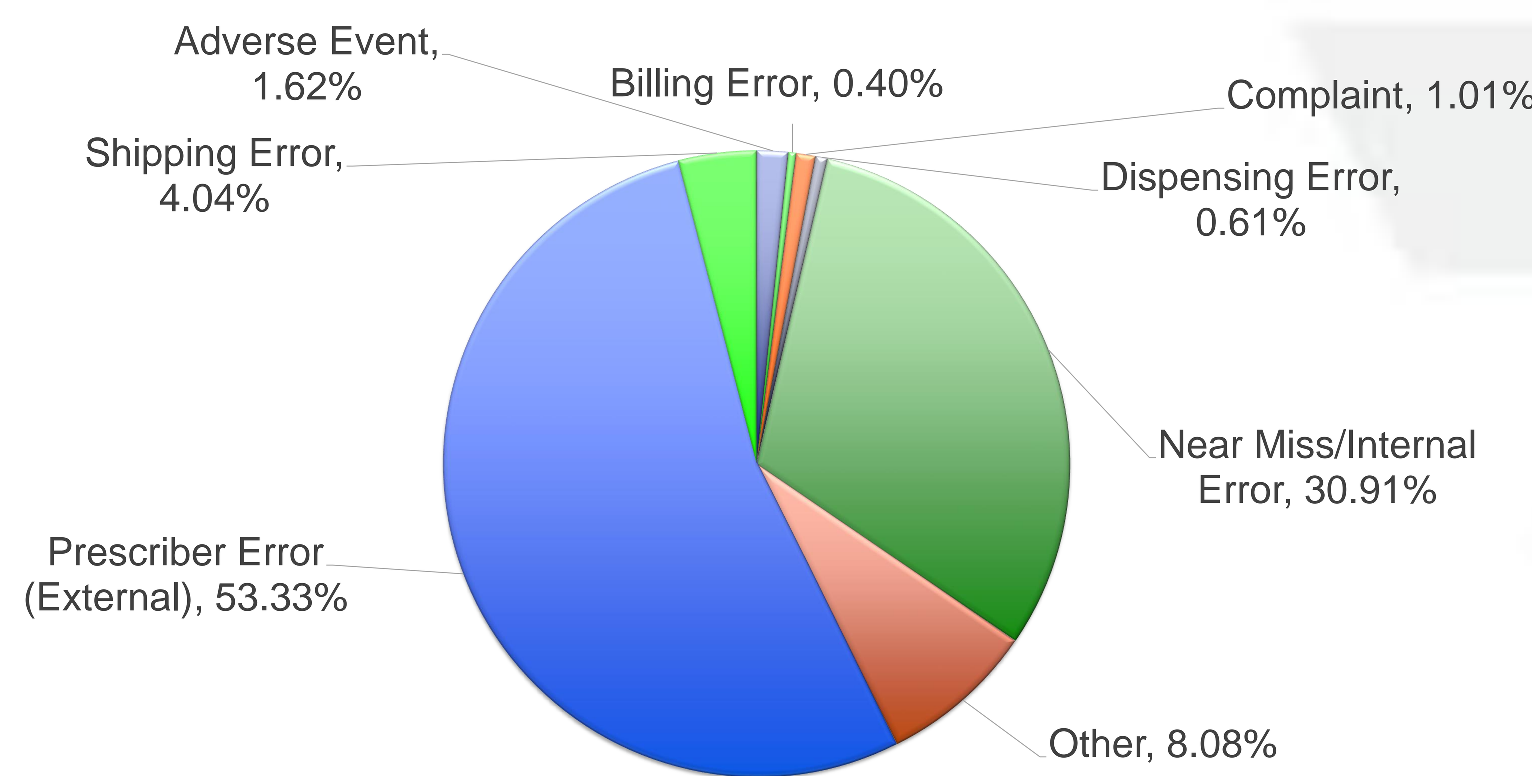
- Patient name
- Date of birth
- Fill Type (Refill or Initial Fill)
- Type of Insurance
- Event Type
  - Complaint
  - Shipping Error
  - Cold Chain Shipping Error
  - Adverse Event
  - Dispensing Error
  - Near Miss/Internal Error
  - Prescriber Error/External Error
  - Equipment Malfunction
  - Billing Error
  - Other
- Description of Issue
- Description of Resolution
- Outcome
  - Patient satisfied
  - Escalated to Pharmacist
  - Quality Audit initiated
- Date Resolved
- Rx Number
- Service Line
- PA Only Script (Y/N)
- Dispensing Accuracy

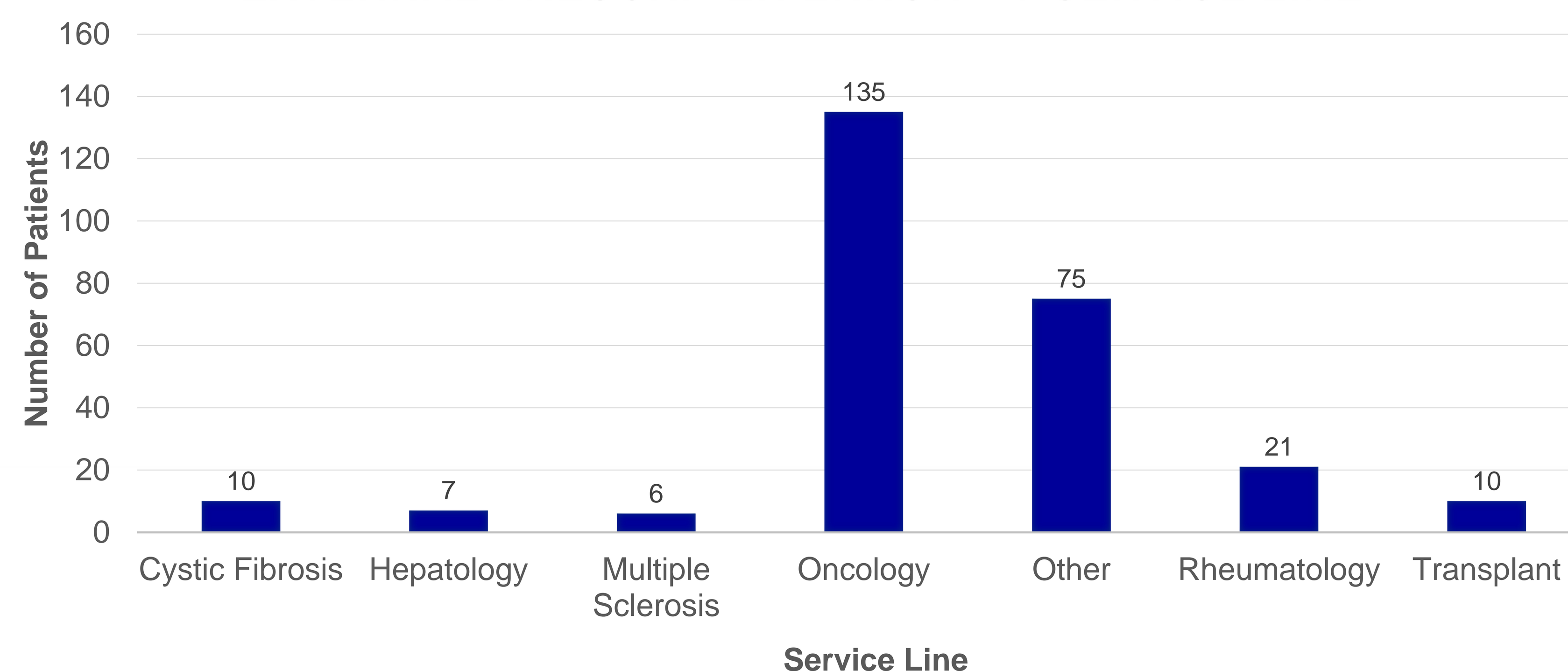
Objectives

- **Primary Objective**: Determine the dispensing and distribution accuracy of University Hospitals Specialty Pharmacy by the percentage of different types of errors reported
- **Secondary Objective:** Describe the percentage of external prescriber error by service line

Results

MEASURE (QUALITY ID #)	URAC DOMAIN	DOCUMENTATION DESCRIPTION
MANDATORY URAC MEASURES		
Dispensing Accuracy (MP 2012-06)	Safe Care	• Six- part measure to assess the percentage of prescriptions that the organization dispenses inaccurately. • Measure includes: A) Incorrect Drug and/or Product Dispensed B) Incorrect Recipient C) Incorrect Strength D) Incorrect Dosage Form E) Incorrect Instructions F) Incorrect Quantity
Distribution Accuracy (MP 2012-07)	Safe Care	• Assesses the percentage of prescriptions delivered to the wrong recipient • Measure includes: A) Prescriptions mailed with an incorrect address B) Prescriptions mailed with a correct address to the incorrect location





Discussion

- Total number of prescriptions during this time period was 15,524 prescriptions. 707 of these 15,524 prescriptions were reported to contain an error. The error rate during this time period was 4.5%
- Out of 707 total errors that were reported within this time frame, 53% of these errors reported were external prescriber errors
- There were a total of 264 external prescriber errors, the majority (51%) of these errors were from the oncology service line

Strengths

- Ease of error reporting and documentation to encourage UHSP to report all errors and clinical interventions encountered
- Implementing URAC measures into intervention log questions

Limitations

- Not all errors and clinical interventions are forwarded to the interventions email outbox or are documented onto the physical log on-site
- Types of Error are not mutually exclusive categories. For example, an error that is categorized as a “near miss” could also potentially be a result of a prescriber error
- Manual process requiring human interpretation
- Categories are not well defined and there is a lack of subcategories within the intervention log

Next Steps

- URAC criteria discussed and implemented into the design of the intervention log questions

Future Steps

- Add additional questions onto the intervention log:
  - Severity of error
  - Prescriber of Rx
- Add subcategories within the intervention log
- Create Clinical Interventions Subcommittee
  - Retail pharmacists meet once a month to discuss actionable items in a manner similar to ISMP
  - Quality Improvement Projects based on identification of trends

Anticipated Barriers

- Data Collection: time consuming documentation
- Data Integrity: lack of automation in error reporting process, consistency in reporting, unintended omissions of error reporting, and consistency of interpretation of collected data

Disclosure/References

The researchers report no potential or actual conflicts of interest relevant to this poster or research.

1. URAC Standard and Measures at a Glance. https://www.urac.org/standards-and-measures-glance. Accessed May 5, 2020.