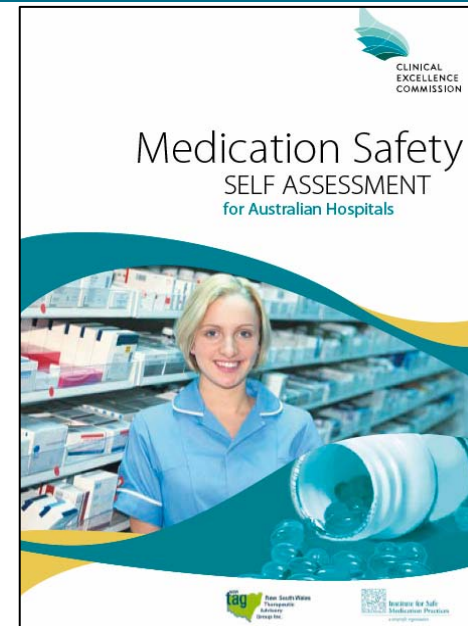


What MSSA measures

- **Assessment survey addressing:**
 - 10 key elements of medicines management
 - 20 core characteristics of a safe system for medication use
- A password-protected website for reporting
- Access to aggregate results



MSSA – Key elements

1. patient information
2. drug information
3. communication of drug orders and other drug information
4. drug labelling, packaging & nomenclature
5. drug standardisation, storage & distribution
6. medication delivery, device acquisition, use & monitoring
7. environmental factors
8. staff competency & education
9. patient education
10. quality processes & risk management

MSSA – process

- multidisciplinary team review of all 10 key elements and 20 core characteristics
- team members rate level of implementation for each representative self assessment item using a process of discussion and consensus
- each self assessment takes on average three X 2 hour meetings to complete
- some additional co-ordination time for project team leader

MSSA – the team

Ideally:

- director of pharmacy
- patient safety officer
- IT representative
- at least 2 staff nurses
- at least 2 staff pharmacists
- at least 2 active staff doctors
- senior hospital administrator
- **One of these people assigned as the team leader**

Role of the team leader

- coordinating the activities of the team
(on average three team meetings are required to complete the MSSA)
- verify demographic information with hospital administration
- responsible for recording and keeping scores
- data entry onto the website.

MSSA – scoring

- A = There has been no activity to implement this item
- B = This item has been formally discussed and considered, but it has not been implemented
- C = This item has been partially implemented in some or all areas of the organisation
- D = This item is fully implemented in some areas of the organisation
- E = This item is fully implemented throughout the organisation.

MSSA – scoring for individual items

- each item has a specific weighting (range 0-16)
- scoring is not the same for each item, for example:

A = 0 or A = 2
B = 2 or B = 4
C = 4 or C = 8
D = 6 or D = 12
E = 8 or E = 16

Rank order of error reduction strategies

forcing functions and constraints



automation and computerisation



standardisation and protocols



checklists and double check systems



rules and policies



education / information

MSSA – scoring for individual items

- The self assessment items with the highest weight are those that:
 - don't rely heavily on human memory and vigilance
 - demonstrate through scientific evidence that they are effective in reducing serious medication errors
 - solve several medication-error related problems at the same time
 - prevent errors with high-alert medications with greatest potential to cause patient harm
 - simplify complex, error-prone processes
 - safeguard high-risk patient populations; *and*
- Some items are weighted with no numeric score unless there is full implementation

MSSA document

- introduction and acknowledgements
- key definitions
- frequently asked questions
- demographic information
- survey items



Medication safety self assessment for Australian hospitals

sample questions

Core characteristic 1:

- Essential patient information is obtained, readily available in a useful form and considered when prescribing, dispensing and administering medication.
- Key element 1: patient information

MSSA sample question:

1.16. Information about the patient's co morbid and/or chronic conditions (e.g., hypertension, diabetes, renal or liver impairment, pregnancy, lactation) is available to pharmacists at the time and place of decision making

FAQ – see page 14

FAQ 1.16 What does “available to the pharmacist at the time and place of decision making” mean?

- The pharmacy system is either populated automatically with information about the patient's co morbid and/or chronic conditions or pharmacists can access this information without exiting the pharmacy dispensing system.
- Score “E” if this information is readily accessible to pharmacy staff for ALL patients throughout the hospital
- Score “D” if this information is readily accessible to pharmacy staff for some parts of the hospital only eg. all wards but not the ED
- Score “C” if this is partially accessible to some pharmacy staff eg available for only some pharmacists and for some types of patients/wards



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MSSA sample question:

1.7 A prescriber routinely adjusts doses of medications that may be toxic in patients with renal or liver impairment

- Score “E” if this procedure is implemented for all patients throughout the hospital
 - Score “D” if this implemented fully in some parts of the hospital
 - Score “C” if only partially implemented
- Note: In deciding on an appropriate score it may be helpful to consider relevant evidence

Core characteristic 2:

- Essential drug information is readily available in useful form and is considered when prescribing, dispensing and administering medications.
- Key element 2: drug information

MSSA sample question:

- *2.1. A complete medication history, including prescription and over-the-counter medications, vitamins, herbal products, and illicit drugs is obtained on every inpatient and outpatient upon admission or initial encounter (including during the pre-admission process)*
- If this service is provided by the pharmacy 5 days per week on 9 to 5pm basis, that is, the service does not occur “after hours” or on weekends, then the score is “C” = This item has been **partially implemented** in **some or all areas** of the organisation

MSSA sample question:

- *2.10. There is a process of PHARMACEUTICAL REVIEW within 24 hours of admission for all inpatients*
- Key terms with definitions are designated throughout the text with **CAPITAL LETTERS**, for example 'PHARMACEUTICAL REVIEW'
- Refer to the Key definitions section at the front of the document
- If pharmacists provide this service but only on 5 day per week basis then score "C"

MSSA sample question:

- *2.11. Pharmacists regularly work directly in outpatient care units (e.g. emergency departments, ambulatory surgery, clinics) performing clinical activities such as reviewing patient records and drug orders, attending multidisciplinary rounds, providing input into the selection and administration of drugs, and monitoring the effects of medications on patients.*

Scoring guideline: Choose NOT APPLICABLE if your hospital does not have outpatient care units

- Outpatient unit can be day surgery, ED or clinic setting
- If this service is performed 24/7 but only in one outpatient area the score is "D"
- If this service is only provided 5 days per week then the score is "C"
= partially implemented in some or all areas

Core characteristic 9:

Unit-based ward stock or imprest stock is restricted

Key element 5: Drug standardisation, storage & distribution

MSSA sample question:

- *5.25A. At least one pharmacist is physically present onsite 24 hours a day, 7 days a week.*
 - **OR**
- *5.25B. An after-hours cabinet with a restricted formulary has been established for when the pharmacy is closed, and a pharmacist is on-call for questions and to come into the hospital if needed and non-pharmacy personnel are prohibited from entering the pharmacy when it is closed.*
 - **OR**
- *5.25C. An after-hours cabinet with a restricted formulary has been established for when the pharmacy is closed, but a pharmacist at a remote location is available for questions and to enter and screen medication orders before the drugs are removed from the cabinet. Exceptions: Urgent lifesaving situations.*

- *FAQ - see page 14*

Questions with two or more parts

- *Example of multi-part question, only answer part A, B or C*
- *FAQ 5.25 What if my hospital has a policy not covered by options 5.25A, 5.25B OR 5.25C ?*
- *The main safety principle here is that non-pharmacy personnel should be prohibited from entering the pharmacy. If your hospital policy permits non pharmacy personnel to enter the pharmacy then you should choose Option 5.25C and score A or B.*

Core characteristic 11:

- The potential for human error is mitigated through careful procurement, maintenance, use and standardisation of devices used to prepare and deliver medications.
- Key element 6: Medication device acquisition, use & monitoring

MSSA sample question:

- *6.13. General infusion pumps with SMART PUMP TECHNOLOGY are in use with full functionality employed to intercept and prevent wrong dose/wrong infusion rate errors due to misprogramming the pump, miscalculation, or an inaccurately prescribed dose or infusion rate.*
- Refer to key definitions for “Smart Infusion Pump”
- Example of a “stretch” question (this technology is likely to become more commonly available in the future in Australia)
- If this item has not been considered in your hospital the score is “A”
- If considered but not implemented for any reason then the score is “B”