

Bar-Code Scanning Reducing Medication Dispensing Errors

GS1 UK Conference 2019

Iain Davidson-Chief Pharmacist

BPharm. MRPharmS. MSc. FFCI.

Royal Cornwall Hospitals NHS Trust

One +



Medication Without Harm

who.int/patientsafety



***Third Global Patient
Safety Challenge***

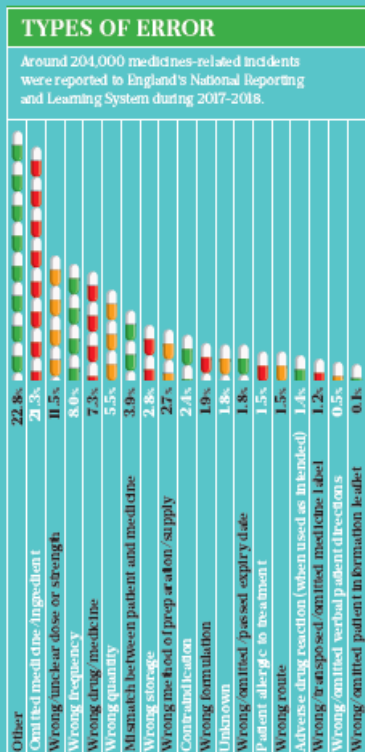


World Health
Organization

MEDICATION ERRORS: WHERE DO THEY HAPPEN?

Reducing medicines-related harm requires a clear understanding of where and when errors occur. This visual summary shows the latest estimates in England per year.

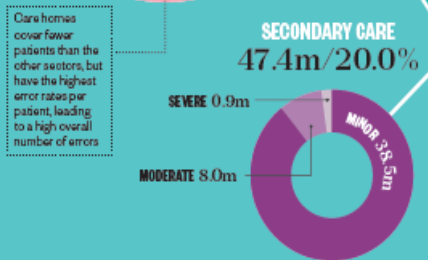
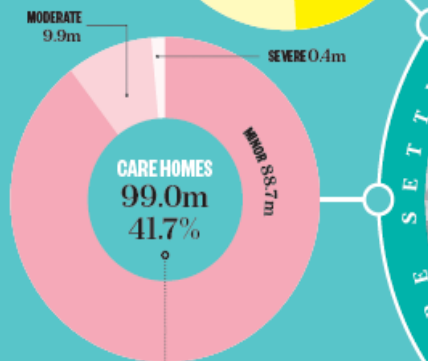
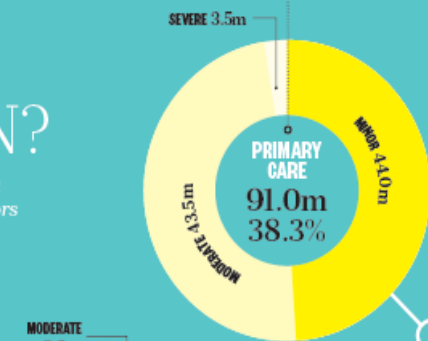
DAWN CONNELLY & MARTIN COTTERELL



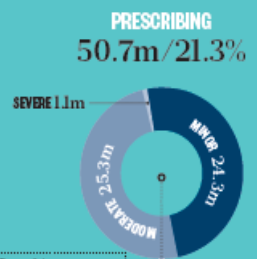
Source: Data obtained via a Freedom of Information request submitted by The Pharmaceutical Journal to NHS Improvement. Incidents reported to the NPLS as occurring between 1 April 2017 and 31 March 2018.



Error rates per patient are lowest in primary care but more medicines are used, so the overall number of errors is second highest



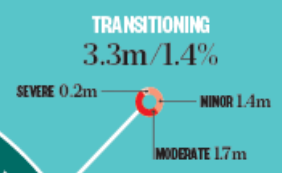
The World Health Organization wants to reduce severe avoidable medication-related harm globally by 50% by 2022



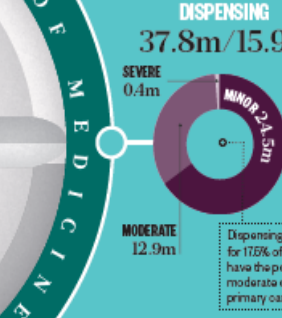
Deaths owing to definitely avoidable adverse drug reactions per year: 712

NHS costs of definitely avoidable adverse drug reactions per year: £98.5m

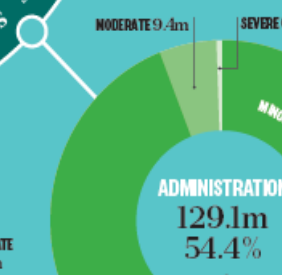
Prescribing errors are most likely to cause moderate harm (41.2% of moderate errors)



Transitioning errors account for 1.4% of total errors



Dispensing errors account for 17.6% of errors that have the potential to cause moderate or severe harm in primary care



Most administration errors (71%) occur in care homes



MINOR: Error with little or no potential to cause harm
MODERATE: Error with potential to cause moderate harm
SEVERE: Error with potential to cause severe harm



POTENTIAL SOLUTIONS

Several strategies can be employed to reduce medicines-related harm.

- Roll out and optimise electronic prescribing and medicines administration systems
- Roll out proven interventions, such as Pincer, where pharmacists identify patients who are at risk from hazardous prescribing (see page 95)
- Improve the information available to patients to promote joint decision-making
- Use patient-friendly packaging and labelling
- Improve shared care across different settings
- Embed adequate training in safe and effective medicines use in undergraduate training and continuing professional development
- Encourage reporting of medication errors (see page 120)
- Reduce inappropriate polypharmacy

Source: Department of Health and Social Care. The report of the short life working group on reducing medication-related harm, February 2018.

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Source: Policy Research Unit in Economic Evaluation of Health & Care Interventions. Prevalence and economic burden of medication errors in the NHS in England, February 2016.

Results

76%

Reduction in
Prevented
Error Rates
($p < 0.001$)



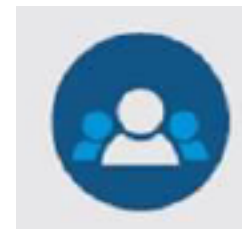
7%

Faster than
Manual
Process
($p = 0.015$)



97%

Users agree it
reduces the
likelihood of
medication



67%

Want to use
the bar-code
enabled
system



Home Patient Finder Name of Pharmacy is Displayed Here Name of User My Account Logout

POJAR, Cosmin (Mr) Born **14-Jul-1991 (23y)** Gender **Male** National No. **123 456 7890**

Address **Strada Cometi Nr. 340, 70123, Cluj-Napoca, CJ, Romania** Hospital No. **567898E** Allergy Status **Recorded Allergies**

Consultant **Chandrasekhar** Ward **Admissions** Body Surface Area **2.1 sqm (e)** Weight **81 kg (e)** Height **188 cm**

Communication Zone

[Clinical Drug Information](#) [Help](#)

Technical Check Patient Medication Record

DISPENSING EPISODE: 23-JUNE-2017 @ HH:MM (Number of items = 5) STATUS: PENDING

Amoxicillin 500 mg Capsules x 28	Product	Enalapril 5 mg Tablets
Bendroflumethazide 5 mg Tablets x 28	Directions	
Aspirin EC 75 mg Tablets x 28		
Enalapril 5mg Tablets x 28		
Simvastatin 20mg Tablets x 28		

Technical Check Alert

WARNING

The dispensed product does not match the issued product

Advanced

Expiry Date

Batch Number

Decommission

Action	User
H:MM Dispensed	Ethan Richardson
H:MM Checked	Paula Oughton
H:MM Dispensed	Ethan Richardson
H:MM Checked	Paula Oughton

Provide Steroid Card

Provide Warfarin Booklet

JAC Medicines Management Powered by TECKNOWORKS

Thank You For Listening

