

## Industry Standards

# New JCAHO guidelines: Mandating a new approach to medication management.

In January 2005, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) began implementing new standards that place a greater emphasis on medication safety than ever before—with specific requirements that affect how health care facilities and personnel handle medications from preparation to point of care.

### Who is JCAHO?

JCAHO is an independent, not-for-profit organization responsible for setting health care practice standards in nearly 15,000 health care facilities in the US. Their comprehensive accreditation process evaluates how organizations comply with current medical practice standards that have been established to improve the safety and quality of patient care.

### What's new in the JCAHO guidelines?

- The new JCAHO guidelines have been reorganized around an expanded 6-step medication management process.
- Two new steps focused specifically on medication selection and procurement and medication storage now precede the existing standards for ordering and prescribing, preparing and dispensing, administration, and monitoring.
- Detailed changes have also been made to the existing guidelines to enhance patient safety.

*Compliance with the new JCAHO medication management standards will be an ongoing challenge for customers in many health care facilities. Baxter's portfolio of enhanced packaging solutions offers unique opportunities to help customers meet their medication goals.*

### Which changes affect my customers' packaging decisions?

#### Medication Selection and Procurement:

Having medications available in alternative forms of packaging may help support compliance with *new contingency planning requirements for drug shortages and outages*.

**Medication Storage:** Drug concentrations must now be standardized and limited to a specific number of concentrations available hospital-wide. In addition, all medications stored in patient care areas must be packaged in *ready-to-administer* forms—such as prefilled syringes and premixed bags.

#### Preparing and Dispensing Medication:

Similar to Medication Storage, these guidelines specify that medications be dispensed in the most *ready-to-administer* forms available. Facilities are also required to consistently use the same *dose-packaging system* to minimize potential dosage errors.

#### Evaluating Medication Management

**Systems:** This special section of the guidelines calls for *routine evaluation of new technologies and successful practices* to enhance patient safety. Packaging that simplifies preparation and optimizes dosing accuracy and administration may help your customers achieve this goal.

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# USP 797—A new chapter in sterile medication preparation.

The United States Pharmacopeia (USP), the organization responsible for establishing and maintaining standards for medication quality, purity, and packaging, introduced the first national guidelines on sterile preparations in January 2004. Unlike previous recommendations, these guidelines may be enforced by the US Food and Drug Administration, state boards of pharmacy, and other regulatory agencies.

### What is Chapter 797?

Chapter 797 is a recent and comprehensive addition to the United States Pharmacopeia—National Formulary (USP-NF). It establishes new practice standards to “prevent harm and fatality to patients that could result from microbial contamination (nonsterility), excessive bacterial endotoxins, large content errors in strength of correct ingredients, and incorrect ingredients.” Compliance with these stringent sterility and accuracy requirements is mandatory in any practice setting where sterile preparations are compounded.

### How can packaging help my customers achieve Chapter 797 compliance?

The procedures and requirements outlined in Chapter 797 have a direct impact on how medications are ordered, prepared, identified, and stored. Chapter 797 also outlines 3 specific risk levels for compounded sterile preparations (CSPs) based on the degree of risk of a CSP becoming contaminated during preparation.

**Low-risk CSP**—Simple admixtures compounded using closed-system transfer such as single-dose vial reconstitution of small-volume parenterals

**Medium-risk CSP**—Admixtures compounded using multiple additives or manipulations, such as batch preparations of syringes

**High-risk CSP**—Nonsterile/bulk ingredients and open-system transfers

*Ready-to-administer packaging systems can help health care facilities better manage these risks by simplifying preparation, eliminating unnecessary admixture steps, and minimizing potential contamination.*