

# Friday, May 22, 2015 WebEx Draft Meeting Summary

# **Goals and Anticipated Outcomes**

- New and old Business
- Council reports and activities

## **Attendance**

Present: Frank Federico, IHI (Chair); Leigh Purvis, AARP; James Burris, American Geriatrics Society; Marsha Gilbreath, American Pharmacists Association; Joan Enstam Baird, American Society of Consultant Pharmacists; Bona Benjamin, ASHP; Donald Martin, Anesthesia Patient Safety Foundation; Mike Datena, Department of Defense; Todd Bridges, FDA; David Gaugh, Generic Pharmaceutical Association; Michael Gaunt, ISMP; E. Robert Feroli, Medication Safety Officers Society; Elizabeth (Scotti) Russell, NABP; Deborah Davidson, NCPIE; Patricia McGaffigan, National Patient Safety Foundation; Jennifer Van Meter, PhRMA; Rita Brueckner, VA; Shawn Becker, USP; Rita Munley Gallagher

**Absent**: AHRQ, AM A, AN A, ASHRM, TJC, NA SP A, NCS B N, HM, Chrissy Blackburn, Deborah Nadzem

**Alternates attending with Primary Delegates**: Deborah Pasko, ASHP; Matt Grissinger, ISMP; N. Lee Rucker, NCPIE

Observers: Emily Ann Meyer, USP

# 1. Opening, Procedural, and Administrative Matters

### a. Welcome, Call Meeting to Order

Mr. Frank Federico, Chair, called the meeting to order at 10:00 a.m.

Ms. Emily Ann Meyer called roll and determined that a quorum was present.

### b. Approval of the Summary of the Previous Meeting

Dr. Robert Feroli explained that American Society of Medication Safety Officers should be changed to Medication Safety Officers Society.

There were no other changes.

**Motion:** Ms. Patricia McGaffigan moved to approve the summary of the previous meeting, and the motion was seconded.

The motion was adopted by unanimous voice vote with no abstentions.

### c. Approval of the Agenda

The Council members reviewed the meeting agenda and made no changes.

**Motion:** Ms. Bona Benjamin moved to approve the agenda, and the motion was seconded.

The motion was adopted by unanimous voice vote with no abstentions.



## 2. Secretariat's Report

# a. Update on Membership

Ms. Shawn Becker invited Jennifer Van Meter, a new delegate from PhRMA, to introduce herself. She is the senior director of the policy department, and her work focuses on quality measurement and reporting as it relates to the use of medicines.

In follow-up to an action item from the previous meeting, Ms. Becker explained that she had sent a note to the AAPA, and received a response that they continue to see value in the work of the Council and wish it well despite the inability to continue participating.

Ms. Becker then presented a request for individual membership from Dr. Alan Polnariev, who presented MEPS approach to medication errors at the previous meeting. Participants discussed the request and noted the following:

- He appears to have a great deal of experience, but there may be a conflict because he is also selling a product related to the work of the Council.
- It does not seem to be worth it to add another individual member at this time.
- Though there may not be an actual conflict of interest, there will be a perceived conflict of interest and that is also important.

Participants generally discussed conflict of interest as it pertains to the Council and raised the following points:

- The concept of conflict of interest was raised earlier in the Council's history, and at that time, Council members felt there was not a need for anything formal. Rather, it was important to be mindful of people bringing information before the council and whether they were trying to sell something.
- Another option may be to ask members whether they have anything relevant to disclose in relation to the agenda or decisions being made.
- Most members represent their organizations, so conflicts were never considered to be a matter of concern.
- It seems reasonable to continue to trust members to recuse themselves as needed.

**Motion**: Mr. Federico moved to thank Dr. Polnariev for his interest in the Council, but not invite him to join as an individual member at this time. The motion was seconded.

The motion was unanimously approved with no abstentions.

#### Action Item

Ms. Becker will draft a response to Dr. Polnariev, which Mr. Federico will send.

# b. Permissions

Ms. Becker informed participants there had been two requests.

- Ms. Kamille Wong requested that the Council Website link to a list of affordable colleges. Ms. Becker responded that this is outside the Council's scope.
- Isabelle Anguish, Pharm D from Lausanne Switzerland sought permission to use the taxonomy in her doctorate program. Permission was granted as long as nothing was modified.
- APhA requested to include the algorithm in the July edition of its publication, Pharmacy Today.



## 3. NCC MERP Anniversary Report Status and Path Forward

Dr. Rita Munley Gallagher updated participants on the status of the 20th anniversary report, and what is needed to move forward.

- Members are seven weeks past the deadline for sending updates. About half are still missing.
- Statements and recommendations need to be finalized.

Dr.Gallagher informed members that the request to participate in ASHP's Midyear clinical meeting was declined. A random sample of past attendees had ranked the topic of low interest, and the timeframe requested was too long.

The Council will now need to find another opportunity for celebration. One such option would be to do so at the next face-to-face meeting in October. Additionally, a number of organizational members of the council have publications, which would be another way to publicize the anniversary.

#### **Action Items**

- Dr. Gallagher, Ms. Becker, and Ms. Meyer will work to plan an anniversary celebration at the October 2015 face-to-face meeting.
- Ms. Becker will prepare a press release announcing the anniversary for other members to share in their respective publications.

# 4. Subcommittee Updates

### a. Patient Representative Alternate

Mr. Federico explained that he had spoken with Ms. Chrissie Blackburn regarding an alternate for the patient representative position. There may be times when she is unable to participate in the meeting, and it would be important to ensure there is a backup available to represent the patient's perspective. The question before the council is: Is it necessary to have an alternate for individual representatives, and what is the process for finding someone?

#### Discussion

Participants raised the following points:

- Organizational members and alternates can share information between each other; it
  would be important that such a process is also set up for a patient representative
  alternate if one is chosen.
- Per the rules of the Council, individual and patient representative members may not appoint an alternative, but this does not preclude the council from appointing an alternate for the position. This can be clarified in the rules.
- Continuity is important; it would be hard to bring back-ups up to speed unless they can always be on the call.
- Ms. Blackburn should be consulted on the decision of an alternate.

#### Action Item

• Ms. Becker and Mr. Federico will revise the rules for clarity regarding a patient representative alternate.

# b. Polypharmacy Recommendations

Mr. Federico shared the most recent draft of the recommendations to reduce polypharmacy in older adults. Currently there are a total of 17 recommendations, and he is looking for advice from the Council on how to cull or combine some of them.



Participants suggested clustering the recommendations, and putting reinforcing bullets underneath.

Participants also made general style suggestions, which were captured in-line by USP staff.

#### **Action Items**

- Ms. Lee Rucker, Mr. Matt Grissinger, Dr. Mike Gaunt, and Dr. Robert Feroli will assist with clustering the recommendations.
- Council members will send comments on the draft in three weeks.

## 5. Member Updates

**ASHP**—Work is underway on an overall standardization process. The focus is on IV standardization of concentrations and dosing units for continuous infusion for adult patients. Recommendations will be made by an expert panel after a national survey. The next phase will be a similar project for pediatrics, and the final phase will be PCAs and epidurals.

There is a second, similar project on standardization of concentrations for compounded oral liquids. This started at the University of Michigan, and is now moving forward on a national basis.

Mr. Federico indicated that he would be willing to share information related to similar efforts at Children's Hospital in Boston.

**IHI**—An R&D Innovation project is looking for gaps in healthcare that need to be filled. One such result of this project is ventilator bundles that allow care teams to better coordinate their efforts and decrease ventilator-associated pneumonia.

A similar project is looking at safety across the continuum to ensure nothing is missing.

**NPSF**—At the annual meeting, there was a strong integration related to medication safety and HIT topics. A number of posters had medication safety elements. They will be releasing the results of a grant that culminated in a deliverable of an action document on successful practices and root cause analysis.

There will be a webcast in July that describes the outcomes of a marquee study on opioid safety priorities, which will mandate the continuous monitoring of any patient receiving opioids.

Ms. Rucker indicated that the Pharmacy Quality Alliance recently approved three new measures related to the use of opioids in non-cancer, non-hospice patients, which addressed such issues as high dosage, four-or-more e-prescribers, and four-or-more pharmacies.

**NCPIE**—The algorithm was recently published in the NCPIE e-newsletter. There has been a great deal of information recently published on the two websites—talkaboutrx.org and bemedwise.org.

**ISMP**—There is currently a survey open for practitioners to complete, that should result in medication-related measures for a dashboard. They have also published an updated set of recommendations for practitioners to prevent errors in vaccines, which are available via their website.

They are seeing increased momentum in a switch to the use of milliliters for dosing oral liquids.



**USP**—The draft General Chapter <800> *Hazardous Drugs in Healthcare Settings* is out for public comment until May 31, 2015.

USP is removing the use of teaspoons from General Chapters <7> Labeling and <659> Packaging and Storage Requirements.

**DoD**—Secretary Hagel ordered a top-to-bottom review of access to safety and quality in the military, and the recommendations are now being reviewed.

# 6. Next Steps and Next Meeting Dates

Mr. Federico noted that there has been discussion about the value of what the council does, and how to go forward. He encouraged members to think about how to move forward and about the value of the Council to their organizations in order to be sure that the Council meets their needs.

# a. Next Meeting: October 29, 2015

Please send any topic suggestions to the Chairs or USP staff.

The meeting adjourned at 11:45 a.m.