How Your Medication Error Happened, and
How You Plan to Keep it From Happening Again

Date of medication error: _____

UCI #:

SANDIS Incident #:

What went wrong with your resident's medications (meds)? (Please check all that apply.)

☐ Missed dose ☐ Wrong med(s) ☐ Wrong dose ☐ Wrong Route ☐ Wrong person ☐ Wrong time

Who was tasked to give the meds? (Please check one.) ☐ Nurse ☐ Other Staff ☐ Family

Giving/taking meds happens in steps:

Step 1: Set-up > **Step 2:** Give/Take Meds > **Step 3:** Record/Check
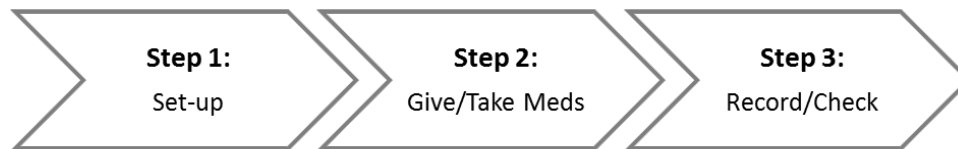
What step(s) went wrong and how did they go wrong? (Please check all that apply.)

Step 1: Set-up/Prepare Meds
☐ Did not start on time.
☐ Did not check med log before getting meds from storage.
☐ Did not compare labels on meds with med log when getting meds from storage.
☐ Meds in log not the same as current physician orders.
☐ Meds in log not the same as labels on bottles, packaging.
☐ Took wrong meds from storage: misread label or med log.
☐ Did not get all meds: left some meds in storage.
☐ Not able to find some meds: meds not in usual place.
☐ Not able to find some meds: meds not ordered or re-ordered.
☐ Not able to find some meds: pharmacy failed to fill some ordered meds.
☐ Physician orders not copied correctly by the pharmacy or in med log.
☐ Resident was away from home and did not have meds along.

Step 2: Give/Take Meds
☐ Did not place all meds in the cup when pouring.
☐ Did not give all of the meds in the cup or bubble pack.
☐ Did not give meds to the correct resident.
☐ Was interrupted while giving meds; made an error when resumed.
☐ Dropped or lost a pill when giving it, or resident dropped or lost a pill when taking it.
☐ Resident was not able to follow the medication routine as planned.

Step 3: Record/Check Meds Afterward
☐ Staff who gave meds did not log meds that a resident took.
☐ Staff who gave meds did not log time when a resident took meds.
☐ Staff who gave meds did not check meds, packs, and log after.
☐ No one else checked meds, packs after.
☐ No one else checked the med log after.

Almost done! Please turn page over.
Besides Training, what will you do to stop this from happening again?
(Please check all that apply.)

Step 1: Set-up/Prepare Meds
☐ Have a way to alert staff and residents when it is time for meds.
☐ Use a med log with simple, clear design that is easy to read.
☐ Assign someone to order meds and check that pharmacy filled order.
☐ Assign someone to check med log and physician orders, and update the log.
☐ Assign someone to check med log and labels on bottles and packaging, and update the log.
☐ Assign back-up staff to order, prepare, and give meds if regular staff are absent.
☐ Organize storage in a simple, clear way.
☐ Store meds in a space that is well lit, where meds are easy to see.
☐ Ask pharmacy for their most current med log.
☐ Assign someone to check that residents have meds when away.

Step 2: Give/Take Meds
☐ If pouring meds, have staff check meds against med log as they place them in cup.
☐ Have staff indicate each med that they give in the med log, and when they gave it.
☐ Have staff perform a gloved finger swipe of bubble packs after giving meds to a resident.
☐ If someone is giving meds, do not allow him/her to be interrupted.
☐ Designate a place for preparing and giving meds.
☐ Give meds to one individual at a time, away from other residents and activities.
☐ Give pills across a table, to decrease risk of dropped meds.
☐ Plan routines with residents: Ask them how they want the routine to go.
☐ Change routines that are not working (e.g. ask if doctor can change prescribed times).

Step 3: Record/Check Meds Afterward
☐ Use a med log with simple, clear design and that is easy to read, update.
☐ Assign someone to check med log and physician orders, and update the log.
☐ Assign someone to check the med log against labels on bottles, packaging, and update the log.
☐ Use bubble packs.
☐ Check bubble packs after giving meds by a gloved finger swipes.
☐ Have a second person check bubble packs by a second gloved finger swipe.
☐ Have a second person check med log.
☐ Have a plan for using a med log and updating it regularly.

Date when you plan to have your changes in place: _____ / _____ /_____

Person completing this document:_____

Vendor Name:_____

Comments:

You are done! Thank you ☺