

# PHARMACIST COMPUTERIZED PROVIDER ORDER ENTRY (CPOE)/VERIFICATION OF MEDICATION ORDERS WITHIN 24 HOURS GUIDE

## Background

Adverse drug events account for 34.2% of all hospital acquired conditions (Partnership for Patients, 2010). Additionally, each hospital patient can expect to be subjected to, on average, more than one medication error per day (IOM, 2006). The goal of the Pharmacist Verification of Medication Orders within 24 hours is to increase the level of pharmacist oversight of the medication administration process, resulting in fewer errors, better medication management and improved patient outcomes. The measure was designed to be non-burdensome, providing a simple numerator/denominator percent value derived from a report generated by the hospital's order entry software.

## The Measure

The Pharmacist CPOE/Verification of Medication Orders within 24 Hours Measure consists of a numerator and denominator:

- Numerator: Number of electronically entered medication orders for an inpatient admitted to a hospital (acute or swing-bed), verified by a pharmacist or directly entered by a pharmacist within 24 hours
- Denominator: Total number of electronically entered medication orders for inpatients admitted to a hospital (acute or swing-bed) during the reporting period
- Inclusion Criteria: Inpatients admitted to acute care bed, swing bed; observation patients
- Exclusion Criteria: Outpatients; ED patients

## Methods of Capturing the Data

### **Preferred Method**

The numerator and denominator are pulled from the Verification Report generated by the hospital's medical order entry system.

### **Alternate Method**

The numerator is the number of electronically entered medication orders for an inpatient admitted to a hospital (acute or swing-bed), verified by a pharmacist or directly entered by a pharmacist within 24 hours – based on the pharmacist coverage hours. The denominator would still be reported as the total number of electronically entered medication orders for inpatients admitted to a hospital (acute or swingbed) during the reporting period.

### **Example**

A hospital has Monday through Friday pharmacist coverage but no weekend coverage, and there are 37 orders entered between end of shift Friday and 8am on Sunday morning (24 hours before start of shift on Monday). The total number of electronically entered medication orders for inpatients admitted to a hospital (acute or swing-bed) during the week equals 280.

- Numerator: 280 (total orders) - 37 (orders during period of no coverage) = 243 orders that were entered or reviewed by pharmacist within 24 hours
- Denominator: 280 total orders electronically entered
- Percent compliance:  $243/280 = 86\%$

## **Using the Data and Improving Outcomes**

Calculating a percent compliance allows your facility to track improvement overtime, whether that be weekly, monthly or quarterly. A couple of suggestions for ways small, rural hospitals can improve their outcomes in this measure are:

- Consider sharing pharmacy coverage with other CAHs or regional facilities
- Consider contracting for remote pharmacy services to address coverage gaps