TITLE
MANAGEMENT OF HIGH-ALERT MEDICATIONS

DOCUMENT #
PS-46

APPROVAL LEVEL
Alberta Health Services Executive

SPONSOR
Provincial Accreditation Managing Medications Committee
Provincial Medication Management Committee

CATEGORY
Patient Safety

If you have any questions or comments regarding the information in this policy, please contact the Policy & Forms Department at policy@albertahealthservices.ca. The Policy & Forms website is the official source of current approved policies, procedures and directives.

PURPOSE

• To prevent harm to patients from adverse medication events involving high-alert medications.

POLICY STATEMENT

• Alberta Health Services is committed to patient safety and to minimizing the risk of medication errors involving high-alert medications.

• Alberta Health Services shall align with the requirements of Accreditation Canada Required Organizational Practices and other safety-oriented standards, with regard to high-alert medications.

APPLICABILITY

Compliance with this policy is required by all Alberta Health Services employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary). This policy does not limit any legal rights to which you may otherwise be entitled.

POLICY ELEMENTS

1. Administrative Management of High-alert Medications

   1.1 The Provincial Medication Management Committee (PMMC) is responsible to oversee the implementation and monitoring of this policy and its associated governance documents at the provincial level.
1.2 The Provincial Medication Management Committee is responsible to establish and to verify adoption of minimum provincial requirements as outlined in the policy, procedure, and guidelines for high-alert medication storing, labelling, prescribing, preparing, dispensing, administering, and documenting at the provincial level.

1.3 The Zone Medication Management Committees (ZMMC) are responsible to implement and to monitor the use and effect of Zone governance documents pertaining to high-alert medications, at the Zone and site level.

   a) Zones may create more detailed governance documents which align with the Alberta Health Services Management of High-alert Medications Policy and Procedure, and related guidelines, and that also allow for local variations in storing, labelling, prescribing, preparing, dispensing, and administering options.

1.4 Storing, labelling, prescribing, preparing, dispensing, administering, and documenting of high-alert medications shall align with:

   a) legislated requirements;
   b) patient and staff safety best-practices;
   c) inventory control and other accessibility limitations;
   d) labelling standards;
   e) professional College guidelines; and
   f) pertinent Alberta Health Services (provincial or Zone) policy and procedure.

1.5 Emergency Medical Services shall continue to follow Emergency Medical Services Provincial Medical Control Protocols: Adult and Pediatric and any other Emergency Medical Services governance documents with regard to high-alert medications.

2. Identification and Listing of High-alert Medications

2.1 The Alberta Health Services list of high-alert medications is provided in the Provincial High-alert Medication List, which is based on the ISMP’s List of High-alert Medications developed by the Institute for Safe Medication Practices.

2.2 The Pharmacy Services Medication Quality and Safety Team is responsible for broadly communicating changes to the Provincial High-alert Medication List.

   a) Requests for additions or changes to the Provincial High-alert Medication List must include supporting data and shall be directed to the Pharmacy Services Medication Quality and Safety Team.

     (AHS.PharmacyMedicationQualityandSafetyTeam@albertahealthservices.ca)
2.3 High-alert medications shall be identified as such in the Provincial Parenteral Monographs.

3. **Standardized Concentrations and Volume Options**

3.1 Standardized concentrations and volume options of high-alert medications for intravenous administration in adult, pediatric, and neonatal populations shall follow the Alberta Health Services *Standardized Medication Concentrations for Parenteral Administration* Policy and shall be identified in the Provincial Parenteral Monographs.

4. **Wardstock Limitations**

4.1 High-alert medications available as wardstock in patient care areas shall be limited in type and quantity to only those essential to provide timely care. This does not override the restrictions placed on the following products by Accreditation Canada Required Organizational Practices:

a) specified concentrated electrolytes (see Alberta Health Services *High-alert Medications: Electrolytes* Guideline);

b) specified heparin/low molecular weight heparin products (see Alberta Health Services *High-alert Medications: Heparins* Guideline); and

c) specified high potency narcotics (opioids) (see Alberta Health Services *High-alert Medications: Narcotics* Guideline).

5. **Education**

5.1 It is the professional responsibility of staff who handle high-alert medications to ensure competency. Resources that will support staff’s competency include, but are not limited to:

a) familiarization with the high-alert medication resource page on Insite;

b) completion of the *High-alert Medications* education module located on the high-alert medication resource page;

c) accessing resources which identify high-alert medications, such as the Provincial Parenteral Monographs and Lexi-Comp;

d) reading for understanding medication safety notices issued locally, by Zone or provincially.

6. **Documentation**

6.1 Documentation shall align with legislated or other required best-practices, and pertinent Alberta Health Services (provincial or Zone) policy and procedure, for handwritten or electronic records.
6.2 Dangerous abbreviations, symbols, and dose designations shall not be used in the prescribing or documentation of high-alert medications per the Alberta Health Services Dangerous Abbreviations, Symbols, and Dose Designations Policy.

7. Auditing

7.1 High-alert medications stocked in patient care areas (i.e., wardstock) shall be audited at least annually. The audit is a shared responsibility between clinical departments or programs (e.g., nursing or care settings) and Pharmacy Services.

7.2 The setting in which the medications are stored or distributed shall create an audit process that is appropriate for that area (refer to section 7.1 of Alberta Health Services Management of High-alert Medications Procedure).

DEFINITIONS

High-alert medication(s) means medications that bear a heightened risk of causing significant patient harm when used in error. (Institute for Safe Medication Practices [ISMP], 2012)

REFERENCES

- Alberta Health Services Dangerous Abbreviations, Symbols, and Dose Designations Policy
- Alberta Health Services Emergency Medical Services Provincial Medical Control Protocols: Adult and Pediatric
- Alberta Health Services High-alert Medications: Electrolytes Guideline
- Alberta Health Services High-alert Medications: Heparins Guideline
- Alberta Health Services High-alert Medications: Narcotics Guideline
- Alberta Health Services Management of High-alert Medications Procedure
- Alberta Health Services Provincial High-alert Medication List
- Alberta Health Services Standardized Medication Concentrations for Parenteral Administration Policy
- Accreditation Canada QMentum Program, Medication Management Standards (For Surveys Starting After: January 1, 2014)

REVISIONS

N/A