

# Effectively Managing Medications

Medication management plays a crucial role in treating various conditions but carries a high risk of error that can lead to potential patient harm. Following evidence-informed protocols can reduce these errors and improve safety.

## Background

Poor medication management can lead to significant patient harm, as well as complications that require costly interventions. Common errors include administering the wrong drug, dose, or route or providing medication to the wrong patient. In 2010, Joint Commission added new standards for medication safety and elevated the topic to a National Patient Safety Goal; in 2017 Joint Commission updated the standards to address anticoagulant medication risk and foster antibiotic stewardship. Anticoagulant medications pose an increased risk of harm due to complex dosing, insufficient monitoring, and inconsistent patient compliance.



## Standards

**This *National Performance Goal™* increases medication safety and reduces risk through the following requirements:**

- When an onsite pharmacy is not open 24/7, a qualified healthcare professional reviews the medication order in a pharmacist's absence. In addition, a pharmacist conducts a retrospective review of all medication orders when the pharmacy opens.
- When automatic dispensing cabinets (ADCs) are used, the hospital implements a policy that describes the types of medications dispensed and reviews overrides for appropriateness at a frequency specified by the organization.
- The hospital selects and procures medications and
  - Standardizes and limits the number of drug concentrations available
  - Follows a process to communicate medication shortages and outages to staff
  - Follows written medication substitution protocols for medication shortages

- The hospital labels all medication, medication containers (including syringes, medicine cups, and basins), and other solutions on and off the sterile field in perioperative and other procedural settings.
  - The hospital labels all medications and solutions that are not immediately administered.
  - Labeling occurs when any medication or solution is transferred from original packaging to another container.
  - Medication labels include name, strength, amount of medication or solution, diluent name and volume, and expiration date and time.
  - The hospital labels each medication or solution as soon as it is prepared.
- The hospital reduces the likelihood of patient harm associated with the use of anticoagulant therapy.
- The hospital maintains and communicates accurate patient medication information.
- The hospital has an active antibiotic stewardship program.

## Rationale

The reported incidence of medication errors in acute hospitals is approximately 6.5 per 100 admissions.<sup>i</sup> Joint Commission standards, in alignment with regulatory standards such as Centers for Medicare & Medicaid Services (CMS) Conditions of Participation and United States Pharmacopeia (USP), focus on safety risks inherent in medication storage, labeling, and dispensation of medications. Requirements are consistent with consensus-based guidelines, such as those set forth by ISMP Guidelines for safe medication use in perioperative and procedural settings.<sup>ii</sup> Antibiotic stewardship is a high priority given an estimated 2.8 million antibiotic-resistant infections and more than 35,000 related deaths each year.

Medication management continues to be a subject of intense scrutiny and complexity. The standards are consistently identified as opportunities for improvement on Joint Commission surveys and are referenced in over 50 Frequently Asked Questions (FAQ) publications. Given the intricacy and numerous risk points involved, many Joint Commission medication safety standards are included as *2025 National Performance Goals*.



## Related Activities

Joint Commission medication management standards have evolved since first published:

- Joint Commission revised its antibiotic stewardship standards in 2023 to align with Centers for Disease Control (CDC) Core Elements<sup>iii</sup> of antibiotic safety to ensure safe prescribing practices and reduction of antibiotic resistance.
- As of 2023, 96% of acute care hospitals have implemented all 7 essential elements of antimicrobial stewardship programs, a significant increase from 41% in 2014, demonstrating the impact of these Joint Commission, CMS, and CDC combined efforts.

i Dai HJ, Su CH, Wu CS. Adverse drug event and medication extraction in electronic health records via a cascading architecture with different sequence labeling models and word embeddings. *J Am Med Inform Assoc*. 2020 Jan 01;27(1):47–55. ii Institute for Safe Medication Practices. ISMP Guidelines for Safe Medication Use in Perioperative and Procedural Settings. Plymouth Meeting, PA: Institute for Safe Medication Practices; August, 2022. iii CDC Antibiotic Prescribing and Use. Core Elements of Hospital Antibiotic Stewardship Programs. <https://www.cdc.gov/antibiotic-use/hcp/core-elements/hospital.html>. December 5, 2024.



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