



**Title:** Medication Safety Committee Terms of Reference

**Document #:** 6674

**Issuing Authority:** BP Clinical Programs/Chief Nurse Executive, Administration

**Last Revised Date:** 8/12/2019

**Version Number:** 1.0 (Current)

**Committee Name:** Medication Safety Committee

**Purpose:** To provide leadership, coordinate, monitor and evaluate the effectiveness and safety of medication management processes at the Brant Community Healthcare System.

**Membership:** Manager, Pharmacy, Co-Chair  
Manager, Paediatrics, Co-Chair  
Medication Safety Pharmacist  
Supervisor, Pharmacy  
Manager of Professional and Corporate Practice  
Clinical Managers or delegate from: MIP, Surgery, ED, Critical Care, B2/C2/C4/, C7/TWH, MH, FBC, CRT, Ambulatory Care  
Clinicians x 2  
Clinical Director  
ICT Consultant  
Quality & Risk Management Coordinator

Ad Hoc members would be invited to either provide expertise on a particular subject matter or to participate in the decision making needed to manage a particular medication issue. Electronic copies of the related agendas, minutes, Risk Pro reports and ISMP bulletins will be posted to the Common (S) drive prior to each monthly meeting for review.

The Medication Safety Committee may from time to time solicit membership from identified key stakeholders of various clinical services.

Membership of the committee will be reviewed every 2 years at the December meeting on even years.

**Authority:** This committee shall report to the Medical Utilization Committee (MUC), who will approve all medication related policies and procedures before final approval by the Medical Advisory Committee (MAC).

**Quorum:** A quorum is 50% of the membership (9 members) and must include either the chair or co-chair.

**Decision Making:** Decisions and/or recommendations shall be made by consensus and if consensus cannot be reached, then majority rules.

**Minutes:** Minutes shall be available one week prior to the next meeting. Minutes are available on the common drive for viewing by all.

**Frequency:** Monthly meetings to be held on the First Wednesday of each month.

**DISCLAIMER:** This is a CONTROLLED document. The most current version is in electronic format on the BCHS intranet site. Any documents appearing in paper form are NOT controlled.



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**Responsibilities:**

1. Ensure safe medication management practices, including the security of controlled substances throughout the organization
2. Identify and review policies and procedures related to medication management and collaborate with relevant clinical programs to address those issues.
3. Align BCHS medication management process with that of Provincial and National patient safety groups such as ISMP Canada, Accreditation Canada and Canadian Patient Safety Institute.
4. Update BCHS medication management process based on any changes to applicable laws, regulations and standards of practice (i.e. updated from Health Canada, Canadian Society of Hospital Pharmacists, National Association of Pharmacy Regulatory Authorities, Ontario College of Pharmacists, College of Nurses of Ontario, Registered Nurses Association of Ontario, etc).
5. Review trends related to medications and associated medication systems on a monthly basis and where appropriate, make recommendations based on service-specific quality improvement/risk reduction strategies.
6. Review IV Pump Reports.