



CONNECTICUT PHARMACISTS ASSOCIATION

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**Testimony before the General Law Committee
Friday
February 13, 2009**

Re: HB: 5406 AAC Public Access to Information Regarding Pharmacy and Pharmacist Prescription Errors

Good Afternoon Senator Colapietro and Representative Shapiro. My name is Margherita Giuliano. I am a pharmacist and Executive Vice President of the Connecticut Pharmacists Association. The Connecticut Pharmacists Association is a professional organization representing approximately 1000 pharmacists in the state. I am here today to speak to you in opposition to HB 5406: AAC Public Access to Information Regarding Pharmacy and Pharmacist Prescription Errors.

As pharmacists we take an oath to provide the best care for our patients. We strive for perfection. One error is one too many. We have worked tirelessly as a profession and as an industry to implement technologies and processes that minimize the probability of an error. And we are good. We are perfect 99.9% of the time. But some times our systems fail.

We've dealt with increased prescription volume, shortages in staffing, mandates from insurers and government to handle issues that are not relevant to patient care. All of these distractions as well as the continued decrease in reimbursements from state and private payers have contributed to difficult environments to practice in. I am not trying to make excuses – I am just trying to share with you the frustrations that our pharmacists deal with on a day to day basis. Adequate reimbursement is critical in being able to protect the public. We need to be able to staff our pharmacies properly and to provide them with the tools and technologies available to dispense medications safely.

When an error occurs it is devastating to the patient. It is also devastating to the pharmacist. We recognize the responsibility we have to our patients when we fill their prescriptions. As health care providers we know that it is important for us to be checking dosage, looking for drug interactions and evaluating medication related problems in our patient's profile. We catch errors every day from other members of the healthcare team. That is our responsibility. E-prescribing is a great tool in helping to remove the issue of poor handwriting for prescriptions – but with that new technology has come new types of errors from prescribers that pharmacists need to be vigilant about. These sorts of interventions where errors are prevented go virtually unrecognized.

In 2005 the federal government passed the Patient Safety and Quality Improvement Act which was enacted in response to the growing concern about patient safety in the United States. Administered by the Agency for Healthcare Research and Quality (AHRQ), this Act provides for



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the creation of Patient Safety Organizations (PSOs). PSOs allow healthcare providers the ability to report errors and provide information on patient safety and quality improvement without the risk of losing the protection of data confidentiality or fearing discovery in the case of potential litigation. By providing access to de-identified error data we can identify areas in the systems that need to be improved. We need to continue to foster an environment of voluntary reporting – not only of errors but of “near misses”. A near miss is when a potential error is caught before it gets to a patient. Currently we don’t track near misses for fear of discovery. This new federal law allows pharmacies and pharmacists to share what they learn from near misses and errors. This information is then evaluated and “best practices” are developed and shared with the pharmacists to implement new processes in their pharmacies. It is critical that we encourage this free flow of information. That is how we will improve quality and provide a safer environment to practice in. It will not occur by publicly humiliating the pharmacist.

The Department of Consumer Protection and the Commission of Pharmacy have been cutting edge in dealing with prescription errors. They have pharmacists complete a course on quality assurance to provide them with tools to use in their daily practice to minimize errors. The Department also tracks the pharmacists and the pharmacies that errors occur in to see if a pattern can be identified. If a person wants to know if a pharmacist has had action against their license, they can obtain that information through a freedom of information request. The process is already in place.

My final plea is to encourage our patients to become our partners in safe prescription practices. Here are some suggestions:

- Know the name of the medication you are taking and why you are taking it.
- Be patient when you come into the pharmacy. We want to be able to give every prescription the due diligence it needs. Even when there isn’t a line of people in front of you there is a line of prescriptions in the back ahead of you. We always do our best to safely accommodate those waiting.
- Check your prescription before you leave the pharmacy. Ask questions if you do not fully understand instructions or if you have any concerns about your medications. If something looks different – tell us. Communication is important. **Your pharmacist is never too busy to answer your questions.**
- **Get to know your pharmacist.** They are your ally in helping you get the most from your medications.

Thank –you for the opportunity to speak to you today.