

Spell it Out: Standardised terminology,
abbreviations and symbols to be used
when communicating about medicines
Policy Directive

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Contents

1.	Policy Statement.....	3
2.	Roles and Responsibilities	3
3.	Policy Requirements.....	4
4.	Implementation & Monitoring.....	4
5.	National Safety and Quality Health Service Standards.....	5
6.	Definitions	6
7.	Associated Policy Directives / Policy Guidelines and Resources	6
8.	Document Ownership & History	6

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Spell it Out: Standardised terminology, abbreviations and symbols to be used when communicating about medicines Policy Directive

1. Policy Statement

- 1.1 SA Health is committed to the Quality Use of Medicines (QUM).
- 1.2 SA Health is committed to raising awareness to the importance of clear communication when prescribing, dispensing and administering medications, and when documenting medicines information.
- 1.3 The purpose of this policy is to promote patient safety through the use of clear and unambiguous communication of medicines information based on the Australian Commission on Safety and Quality in Health Care's (the Commission's) '*Recommendations for terminology, abbreviations and symbols used in medicines documentation*' (the *Recommendations*) by establishing:
 - > principles for safe, clear and consistent terminology for medicines
 - > a set of recommended terms, acceptable abbreviations and dose designations for medicines.

2. Roles and Responsibilities

2.1 Chief Executive, SA Health will:

- > ensure SA public hospitals and health services are aware of and comply with this policy.

2.2 Director, Medicines and Technology Programs, SA Health will:

- > establish, maintain and periodically review the effectiveness of the Spell it Out: Standardised terminology, abbreviations and symbols to be used when communicating about medicines Policy Directive
- > monitor and evaluate implementation of the directive at a Local Health Network (LHN) level through LHN reporting to the South Australian Medication Safety Advisory Group (SAMSAG)
- > provide advice to health services in response to specific queries regarding standardised terminology, abbreviations and symbols used in medicines documentation.

2.3 Local Health Network and Statewide Services Chief Executive Officers will:

- > implement the policy directive and promote implementation of the principles and recommended terminology, abbreviations and dose designations into protocols, practices and educational programs within their area of control
- > delegate the day to day responsibility for complying with this policy to the relevant senior managers
- > ensure governance arrangements for medication management and medication safety include specific responsibility for the use of clear and unambiguous terminology, abbreviations and symbols when communicating about medicines.

2.4 Executive Directors, Directors, Heads of Service/Departments and other Senior Managers will:

- > ensure risks associated with the use of unsafe terminology, abbreviations and symbols when communicating about medicines are identified and assessed, and that actions to reduce identified risks are implemented and evaluated
- > promote staff awareness of the Commission's 'Recommendations for terminology, abbreviations and symbols used in medicines documentation'
- > ensure local policies and procedures are implemented for appropriate terminology, abbreviations and symbols used in medicines documentation
- > ensure incidents involving error-prone abbreviations, terminology and symbols are reported to the Safety Learning System (SLS) and via other appropriate pathways and managed in accordance with the Patient Incident Management and Open Disclosure Policy Directive.

2.5 SA Health employees will:

- > ensure they are familiar with the Commission's *Recommendations*, including the:
 - > principles for safe, clear and consistent terminology for medicines
 - > list of safe terms, abbreviations and dose designations for medicines
- > ensure they comply with the principles and recommended terms, acceptable abbreviations and dose designations when prescribing, dispensing and administering medications and in medicines documentation
- > ensure incidents involving error-prone abbreviations, terminology and symbols are reported to the Safety Learning System (SLS) and via other appropriate pathways and managed in accordance with the Patient Incident Management and Open Disclosure Policy Directive.

3. Policy Requirements

3.1 Principles

SA Health is committed to the Quality Use of Medicines (QUM) and to raising awareness to the importance of clear communication when prescribing, dispensing and administering medications, and when documenting medicines information.

This policy promotes patient safety through the use of clear and unambiguous communication of medicines information based on the Commission's '*Recommendations for terminology, abbreviations and symbols used in medicines documentation*' by establishing:

- > principles for safe, clear and consistent terminology for medicines
- > a set of recommended terms, acceptable abbreviations and dose designations for medicines.

3.2 Detail

3.2.1 The principles for safe, clear and consistent terminology for medicines, acceptable terms, abbreviations and dose designations, including dose forms, units of measure and concentration, and routes of administration as outlined in the Commission's *Recommendations* must be adhered to for:

- > all medication orders or prescriptions that are hand written, pre-printed, computer generated (printed hard copy) or electronic
- > all communications and records concerning medication documentation, including local policies, protocols and procedures

- > all labels for medicine storage.
- 3.2.2 Before deciding to include additional terminology not listed in the Commission's *Recommendations* in local policies, the principles outlined in the *Recommendations* must be applied and a risk assessment undertaken.
- 3.2.3 It is acknowledged that there may be potential limitations in utilising all the recommendations in the electronic environment. Where there is variation from the *Recommendations*, a risk assessment is recommended and where required, risk management strategies implemented.
- > In most cases, the *Recommendations* align with recommendations described in the [National guidelines for the on-screen display of clinical medicines information](#) and Australian Medicines Terminology.

4. Implementation & Monitoring

It is the responsibility of LHNs to implement the principles of this policy and to monitor the outcomes. This may be achieved by assessing ongoing progress and performance by utilising the following indicators:

- > [National Quality Use of Medicines Indicators for Australian Hospitals. Indicator 3.3: Percentage of medication orders that include error-prone abbreviations](#)
- > [National Inpatient Medication Chart Audit](#)

5. National Safety and Quality Health Service Standards

National Standard 1 Governance for Safety and Quality in Health Care	National Standard 2 Partnering with Consumers	National Standard 3 Preventing & Controlling Healthcare associated infections	National Standard 4 Medication Safety	National Standard 5 Patient Identification & Procedure Matching	National Standard 6 Clinical Handover	National Standard 7 Blood and Blood Products	National Standard 8 Preventing & Managing Pressure Injuries	National Standard 9 Recognising & Responding to Clinical Deterioration	National Standard 10 Preventing Falls & Harm from Falls
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please note these National Standards above apply until 31 December 2018.

The National Standards below will be implemented from 1 January 2019.

National Standard 1 Clinical Governance	National Standard 2 Partnering with Consumers	National Standard 3 Preventing & Controlling Healthcare-Associated Infection	National Standard 4 Medication Safety	National Standard 5 Comprehensive Care	National Standard 6 Communicating for Safety	National Standard 7 Blood Management	National Standard 8 Recognising & Responding to Acute Deterioration
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The Medication Safety Standard aims to ensure clinicians are competent to safely prescribe, dispense and administer appropriate medicines and monitor medicines use, and patients and/or carers are informed regarding treatment options, benefits and associated risks.

The Communicating for Safety Standard aims to ensure timely, purpose-driven and effective communication and documentation that supports continuous, coordinated and safe care for patients.

6. Definitions

In the context of this document:

- **Local policies** means policies adopted in individual hospitals or health services.

7. Associated Policy Directives / Policy Guidelines and Resources

- 7.1 [Patient Incident Management and Open Disclosure Policy Directive](#)
- 7.2 [Australian Commission on Safety and Quality in Health Care \(2016\). Recommendations for terminology, abbreviations and symbols used in medicines documentation. ACSQHC, Sydney.](#)
- 7.3 [Spell it out Standards. SA Health. Standardised terminology, abbreviations and symbols to be used when communicating about medicines.](#)

8. Document Ownership & History

Document developed by: Medicines and Technology Programs

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Next review due: 01/06/2023

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 Does this policy amend or update an existing policy version? **Y**
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 Does this policy replace another policy with a different title? **N**
 If so, which policy (title)? **N/A**

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Approval Date	Version	Who approved New / Revised Version	Reason for Change
06/08/2018	v 3.0		Formally reviewed in line with 5 year scheduled timeline for review. <ul style="list-style-type: none"> • Policy detail unchanged • Commission reference document updated from original version • Transferred to new SA Health template.
28/05/2013	v 2.0	OCE	Minor amendment to reflect impact on EPAS and Branch name change
28/02/2011	v 1.1	OCE	Minor amendment - titles of regional CEOs to Local Health Network CEOs
17/12/2009	v 1.0	Portfolio Executive	Original PE approved version.