MA Coalition for the Prevention of Medical Errors

Reconciling Medications Collaborative
Reporting Timeline

April 11   **First Collaborative Meeting**

May 9   **First monthly status report due**
(1) **Team members**: use the "*Reconciling Medications Team* worksheet provided in this document (p.3)
(2) **First cycles of change**: use "*Worksheet For Testing Change*" worksheets provided in this document (p. 4-5)
(3) **Results from chart review**: use baseline assessment chart abstraction protocol (p. 85-91 in binder; electronic versions also provided via eMail 4/17, Excel file *Reconciling Meds chart abs tool*)
(4) **Leadership engagement**: have you had a meeting yet with your CEO/top leadership, presented baseline data, and secured their support?

June 6   **Monthly status report due**

July 3   **Monthly status report due**

August 1   **Monthly status report due**

September 5   **Monthly status report due**

September 15   **Next Collaborative Meeting**
   Plan to bring your team!

Contact information:

Reconciling Medications Collaborative
MA Coalition for the Prevention of Medical Errors
Gina Rogers
Phone: 781-431-7827
Fax: 781-272-0605
eMail: gina-rogers@attbi.com

Monthly Progress Reports to Collaborative

The monthly progress reports should highlight key steps taken, covering the seven topics below. We want to minimize the time spent on this reporting effort, so feel free to submit copies of the "Tests of Change" Reports and other materials you may have developed, using the eMail message or any other format to address any of the seven topics not covered in other materials. There is no need to repeat any information already submitted.

Note that collecting and monitoring data are considered a fundamental component of analyzing whether the changes you are implementing are leading to improvement, so including results from your measurement is a key component of the progress report. This data will be held in strictest confidentiality, although we do hope to share blinded results with the collaborative to help everyone gauge their performance.

1. AIM(S)

2. MEASURE
> Chart with data for "Reconciling Errors on Reviewed Charts per 100 Admissions"
> 1st month: expect 1 data point, your baseline results
> 2nd month: add 1 or 2 more data points

3. CHANGES TESTED

4. RESULTS/LESSONS LEARNED
> Note that it's OK to report on "failures" that led you to take a different direction!

5. NEXT STEPS
> Next tests of change to be implemented, including timeframes

6. LEADERSHIP ENGAGEMENT
> Quick review of meetings held with leadership, presentations at committee meetings, medical rounds, etc.

7. HELP/RESOURCE REQUEST
> Let us know about any barriers/challenges you've encountered and what you might need for help