

Chapter 30

Saskatchewan Health Authority (Sun Country) – Administering Medications in Hospitals

1.0 MAIN POINTS

As of December 2017, the Saskatchewan Health Authority had not yet fully addressed the one remaining recommendation made during our 2013 audit at the former Sun Country Regional Health Authority. The recommendation related to completing patient medication profiles at two district hospitals by documenting patients' weights.¹

Since our 2015 follow-up, the Authority had made some progress. Management of the district hospitals previously administered by Sun Country routinely assessed whether patient weights are documented in hospital patient medication profiles. They found patients' weights were not consistently documented. We tested patient files and found the same result. Hospital staff documenting patients' weights reduces the risk of prescribing improper medication doses to patients.

2.0 INTRODUCTION

This chapter describes the results of our second follow-up of the one outstanding recommendation from our 2013 audit relating to processes that the former Sun Country Regional Health Authority used to manage and administer medications in its two district hospitals.² By September 30, 2015, as reported in our *2015 Report – Volume 2*, Chapter 55, Sun Country had made significant improvements to its management and administration of medications in these hospitals; it had implemented four of the five recommendations.

On December 4, 2017, the Government of Saskatchewan consolidated the 12 regional health authorities, including Sun Country, into one provincial health authority called the Saskatchewan Health Authority. The Saskatchewan Health Authority became responsible for managing and administering medications in district hospitals at the former Sun Country Regional Health Authority.

To conduct this follow-up audit, we followed the standards for assurance engagements published in the *CPA Canada Handbook – Assurance* (including CSAE 3001). To evaluate Sun Country's progress towards meeting our recommendations, we used the relevant criteria from the original audit. Sun Country's management agreed with the criteria in the original audit.

To perform our follow-up audit, we discussed actions taken with management, reviewed current policies, and tested a sample of 30 patient files for evidence that staff recorded patients' weights.

¹ The two district hospitals are Weyburn General Hospital and St Joseph's Hospital (located in Estevan).

² *2013 Report – Volume 2*, Chapter 31.



3.0 STATUS OF RECOMMENDATION

This section sets out the recommendation including the date on which the Standing Committee on Public Accounts agreed to the recommendation, the status of the recommendation at December 31, 2017, and the Saskatchewan Health Authority's actions up to that date. We found the Saskatchewan Health Authority had partially implemented our remaining recommendation.

3.1 Complete Patient Medication Profiles Needed

We recommended that Sun Country Regional Health Authority consistently complete patient medication profiles by documenting patients' weight. (2013 Report – Volume 2; Public Accounts Committee agreement January 15, 2015)

Status – Partially Implemented

District hospital staff located in the former Sun Country did not always follow established processes to document the patient's weight when completing patient medication profiles.

Since March 2015, management conducts monthly medication reconciliation audits to determine whether patients' weights are documented in the patient medication profiles as its policy requires. Sun Country's *Medication Reconciliation at Admission Policy* requires district hospital nurses to document the height and weight of patients as well as indicate if the measurement is an estimate, or actual. Its audit results showed that nurses are not consistently documenting the patient's weight in the patient's medication profile. The audit results show improvement in the nurses' documentation over time.

Our audit results are consistent with those of Sun Country's. Of the 30 patient files we reviewed, 43% of the medication profiles did not include documentation of the patient's weight.

Hospital staff not following established processes to document the patient's weight, in conjunction with the completion of patient medication profiles, increases the risk that the hospital staff will prescribe and administer improper medication doses to a patient.