

**GUIDELINES FOR THE
CALIFORNIA HOSPITAL ASSOCIATION
MEDICATION SAFETY COMMITTEE**

I. NAME

The name of this committee shall be the Medication Safety Committee.

II. MISSION

The mission of the Medication Safety Committee is to provide leadership within the health care community to promote the highest standards related to the safe and effective use of medications.

III. PURPOSE

The purpose of the Medication Safety Committee is to provide a forum for diverse multi-disciplinary health care organizations, which includes health care delivery organizations, patient safety organizations, discipline specific professional associations/organizations and regulatory agencies, to promote safe medication practices in the state of California. The Committee will focus on acting as a source of medication safety expertise, providing a venue for the coordination of medication safety activities and making recommendations related to medication safety legislation and regulations.

IV. COMMITTEE

The Committee (the "Committee") shall consist of a minimum of 16 representatives and not more than 35 representatives from hospital members and the following related organizations:

California Department of Public Health California
Society of Health System Pharmacists California
Board of Pharmacy
Centers for Medi-Care and Medi-Caid Services
Collaborative Alliance for Nursing Outcomes
Association of California Nurse Leaders California
Medical Association
California HQI and CHPSO
Risk Management Association
Representatives from the following CHA committees/centers:
Center for Behavioral Health
 Rural Health Center
 Quality Committee
 Joint Committee on Accreditation and Licensing Center
 for Hospital Medical Executives EMS/Trauma
 Committee
 Hospital Based Clinics Committee
 Center for Post Acute Care
 Governance

A. MEMBERSHIP

1. Membership on the Committee shall be based upon membership in CHA, or organizations that have a direct relationship to the purpose and mission of the Committee. CHA members will be hospital members. Non-hospital members are ex-officio members and can only be appointed to the Committee at the discretion of the CHA staff liaison.
2. The CHA Committee members shall consist of various representatives from large hospital systems, public institutions, private facilities, free-standing facilities, small and rural facilities, university/teaching facilities and specialty facilities. A member may fulfill more than one required membership position.
3. Hospital members are appointed by CHA Staff per recommendation of hospital Committee members and per hospital and non-hospital membership requirements listed above.
4. Guidelines for membership – these guidelines should be used when selecting potential new members for the Committee:
 - a) Demonstrated experience in medication safety and understanding of regulatory environment based on current or recent job responsibilities
 - b) Contributions to medication safety at the organizational and/or professional level
 - c) Practice experience related to medication safety and regulatory compliance: at least 3 years (preferred).
5. Term:
 - a) Terms of office shall be based on member participation and desire to remain active on the Committee. The CHA staff liaison will perform an annual review of member attendance, participation and desire to remain active on the committee.
 - b) Chairs and Co-Chair positions will be filled by hospital members only and selected by the CHA staff liaison per recommendation of the present chair, co-chairs and by other members of the Committee. They will be selected based on their leadership and desire to fill the position.

B. MEMBER RESPONSIBILITIES

1. Provide hospital-industry leadership to the Committee and CHA Board of Trustees.
2. Identify issues and develop possible solutions and best practices to improve the safety of the medication use process.
3. Work cooperatively with key stakeholders to develop creative solutions.
4. Provide communication to member hospitals regarding medication safety issues.
5. Maintain/increased awareness of the legislative and regulatory environment with regard to medication safety issues.

C. COMMITTEE MEETINGS

1. Meetings of the Committee shall be held quarterly in person.
2. To maintain continuity, substitution of members should be discussed with the staff liaison and co-chairs on an individual basis.
3. Three consecutive unexcused absences by a Committee member will initiate a review by the co-chairs and CHA staff liaison for determination of the Committee member's continued service on the Committee.
4. Special meetings may be scheduled by the co-chair, majority vote, or CHA staff liaison.

D. VOTING

1. Voting rights shall be limited to members of the Committee, and each member present shall have one vote. Voting by proxy is not acceptable.
2. All matters requiring a vote of the Committee must be passed by a majority of a quorum of the Committee members present at a duly called meeting or telephone conference call.

E. QUORUM

Except as set forth herein, a quorum shall consist of a majority of members present or not less than eight.

F. MINUTES

Minutes of the Committee shall be recorded at each meeting, disseminated to the membership, and approved as disseminated or as corrected at the next meeting of the Committee.

V. OFFICERS

The officers of the Committee shall be the Committee chair, co-chair and CHA staff liaison.

A. SUB-COMMITTEES

1. Task forces of the Committee may be formed at the discretion of the Committee chairs and members and CHA staff liaison for the purpose of conducting activities specific to a special topic or goal.

VI. GENERAL PROVISIONS

Goals, and objectives, shall be developed annually by the Committee with approval by the CHA staff liaison. Quarterly updates and progress reports shall be completed by the Committee and CHA staff.

Staff leadership at the state level shall be provided by CHA with local staff leadership provided by Hospital Council, the Hospital Association of Southern California, and the Hospital Association of San Diego and Imperial Counties. The primary office and public policy development and advocacy staff of the Committee shall be located within the CHA office.

The Committee staff liaison shall be an employee of CHA.

VII. AMENDMENTS

These Guidelines may be amended by a majority vote of the members of the Committee at any regular meeting of the Committee and with approval by CHA.

VIII. LEGAL LIMITATIONS

Any portion of these Guidelines which may be in conflict with any state or federal statute or regulations shall be declared null and void as of the date of such determination.

Information provided in meetings is not to be sold or misused.

IX. CONFIDENTIALITY FOR MEMBERS

Many items discussed are confidential in nature, and confidentiality must be maintained. All Committee communications are considered privileged and confidential, except as noted.

X. CONFLICT OF INTEREST

Any member of the Committee who shall address the Committee in other than a volunteer relationship excluding CHA staff and who shall engage with the Committee in a business activity of any nature, as a result of which such party shall profit either directly or indirectly, shall fully disclose any such financial benefit expected to CHA staff for approval prior to contracting with the Committee and shall further refrain, if a member of the Committee, from any vote in which such issue is involved.