MEDICATION ERRORS IN NURSING HOMES

FACT SHEET

Medication errors can have serious – and, even, deadly – impacts on residents. Nevertheless, they are a common problem in too many nursing homes. Too often, medication is given to residents in a manner that conflicts with manufacturer’s instructions or professional standards of care.

This fact sheet contains information on standards to protect residents from medication errors. Please visit the Learning Center of our website, nursinghome411.org/learn/, for standards relating to drug regimen review, freedom from unnecessary drugs, and the use of psychotropic drugs.

**Note:** Information below is directly quoted or paraphrased from the Code of Federal Regulations (CFR), federal guidance, or other resources (see footnotes). Federal standards are applicable to all residents in licensed U.S. nursing homes, including short-term, long-term, private pay, Medicaid, Medicare, or privately insured.

**Medication Errors**

42 C.F.R. § 483.45(f); F-759 & F-760

Facilities must ensure that—

1) Medication error rates are not 5 percent or greater; and
2) Residents are free of any significant medication errors.

**Note:** Though nursing homes are permitted up to five percent medication errors, this does not absolve the requirements to ensure resident safety and effectively monitor every resident’s clinical conditions.

**Definitions**

“**Medication error**” means the observed or identified preparation or administration of medications or biologicals which is not in accordance with: 1) the prescriber’s order;

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1 A list of F-tags is available at [https://nursinghome411.org/f-tags/](https://nursinghome411.org/f-tags/).


2) the manufacturer’s specifications; or 3) accepted professional standards and principles.

“Significant medication error” means one which causes the resident discomfort or jeopardizes their health and safety. Significance may be subjective or relative depending on the individual situation and duration.

“Medication error rate” is determined by calculating the percentage of medication errors observed during a medication administration observation. The error rate must be 5% or greater to cite F759. The equation for calculation is as follows:

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\text{Medication Error Rate} = \frac{\text{Number of Errors Observed}}{\text{Opportunities for Errors (doses given plus doses ordered but not given)}} \times 100.
\]

Residents have the right to choose health care schedules consistent with their interests and preferences, and the nursing home should gather this information in order to be proactive in assisting residents to fulfill their choices. The adjustment of medication administration times, to meet the individual needs and preferences of residents, must be considered by the nursing home. However, medication administration scheduling must still consider physician prescription, manufacturer’s guidelines, and the types of medication, including time-critical medications. Some medications require administration within a narrow window of time to ensure resident safety or achieve a therapeutic effect while other medications are not affected by a more flexible schedule.

**ADDITIONAL RESOURCES ON WWW.NURSINGHOME411.ORG:**

- See page 572 of [Appendix PP of the State Operations Manual](#) for more information and examples of different medication errors.
- [LTCCC Fact Sheet on Dementia Care & Psychotropic Drugging](#)
- [LTCCC Fact Sheet on Informed Consent](#)
- [LTCCC Dementia Care & Antipsychotic Drugging Advocacy Toolkit](#)