

**European Statements of Hospital Pharmacy
Self-assessment Questions – Demonstration Version**

PART I – GENERAL QUESTIONS ABOUT HOSPITAL CHARACTERISTICS AND ACTIVITY

G1. Is your pharmacy within a teaching/university hospital?

- Yes
- No

Teaching/university hospital is a hospital that provides education of medical/pharmacy students

G2. Is your pharmacy within a general hospital?

- Yes
- No

General hospital is a hospital not specializing in the treatment of particular illnesses or of patients of a particular sex or age group, having at least following departments/specializations: Internal medicine, surgery, gynaecology.

G2a. Your hospital is a :

- Paediatric hospital
- Geriatric hospital
- Oncology hospital
- Psychiatric hospital
- Traumatology hospital
- Other (please specify)

G3. How many beds are served by your pharmacy?

- Fewer than 100 beds
- 101 - 500 beds
- 501-1000 beds
- More than 1000 beds

G4. To whom is the pharmacy director responsible ?

- To the hospital Chief Executive Officer (Hospital Director)
- To an outside pharmacy Director
- To a contract administrator
- To a clinical medical Director
- To a local Authority
- To nobody
- Other (please specify)

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G5. How many Full Time Equivalent personnel work in your pharmacy ?

(Round number to one decimal place)

- [] Pharmacists
- [] Trainee pharmacists (interns)
- [] Pharmacy students
- [] Prescriptionists (Bachelor of Science in Pharmacy) (if applicable)
- [] Technician
- [] Qualified pharmacy assistants (other than technicians)
- [] Non qualified pharmacy assistants
- [] Cleaning personnel (0 if cleaning centralised)
- [] Administrative Staff
- [] Nurses
- [] Others (please specify)

PART II – QUESTIONS ABOUT EUROPEAN STATEMENTS

Section 1: Introductory Statements and Governance

1.6 Hospital pharmacists should take the lead in coordinating the activities of multi-disciplinary, organisation-wide Drug & Therapeutics Committees or equivalent. They should have appropriate representation as full members of these Committees which should oversee and improve all medicines management policies.

Q1.6.1 Are the pharmacists in your hospital involved in the Drug and Therapeutics Committees?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

Q1.6.1.1 If NO, what is preventing this? (tick all that apply)

We are prevented by national policy and/or legislation

Not considered to be a priority by my managers

Not considered to be a priority by me

We would like to do this but we have limited capacity*

We would like to do this but we have limited capability**

State or regional procurement of medicines

Absence of quality management system

Other (please state)

**Capacity: Does the organisation have the sufficient number of people or time or technology to undertake the change?*

***Capability: Does the organisation have staff with the right skills and experience to support the change effort?*

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Q1.6.2 Do pharmacists take a leadership role in an antimicrobial stewardship program in your hospital?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

1.7 Hospital pharmacists must be involved in the design, specification of parameters and evaluation of ICT within the medicines processes. This will ensure that pharmacy services are integrated within the general Information and Communication Technology (ICT) framework of the hospital including electronic health (eHealth) and mobile health (mHealth) procedures.

Q1.7: Have you developed a strategic plan for evaluating and implementing automation and technology within the medicines process (procurement, prescribing, preparation, dispensing, administration, and monitoring)?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

SECTION 2: SELECTION, PROCUREMENT AND DISTRIBUTION

2.1 Hospital pharmacists should be involved in the complex process of procurement of medicines. They should ensure transparent procurement processes are in place in line with best practice and national legislation, and based on the principles of safety, quality and efficacy of medicines

Q. 2.1 Your hospital has clear processes in place around the procurement of medicines.

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

2.4 Procurement should be according to the medicine formulary and informed by the formulary selection process. A robust process should also be in place to appropriately procure medicines not included in the formulary where their use is indicated for the safe and effective care of individual patients.

Q2.3 Do the pharmacists in your hospital coordinate the development, maintenance and use of our formulary?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

SECTION 3: PRODUCTION AND COMPOUNDING

3.1 Before pharmacy manufacture or preparation of a medicine, the hospital pharmacist should ascertain whether there is a suitable commercially available pharmaceutical equivalent, and if necessary, discuss the rationale for this decision with the relevant stakeholders

Q3.1.1 Do the pharmacists in your hospital check if a suitable product is commercially available before we manufacture or prepare a medicine?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

3.2 Medicines that require manufacture or compounding must be produced by a hospital pharmacy, or outsourced under the responsibility of the hospital pharmacist

Q3.2.1 When medicines require manufacture or compounding, you either produce them in our hospital pharmacy or you outsource to an approved provider

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

Q3.2.2 What is the percentage of medicines outsourced?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

SECTION 4: CLINICAL PHARMACY SERVICES

4.2 All prescriptions should be reviewed and validated as soon as possible by a hospital pharmacist. Whenever the clinical situation allows, this review should take place prior to the supply and administration of medicines.

Q4.2.1 Are all prescriptions in your hospital reviewed and validated as soon as possible by a pharmacist?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

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Q4.2.2: Do pharmacists review medication orders before initial dose is administered?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

4.5 Hospital pharmacists should promote seamless care by contributing to transfer of information about medicines whenever patients move between and within healthcare settings

Q4.5.1 Do the pharmacists in our hospital contribute to the transfer of information about medicines when patients move between and within healthcare settings?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

SECTION 5: PATIENT SAFETY AND QUALITY ASSURANCE

5.4 Hospital pharmacists should ensure the reporting of adverse drug reactions and medication errors to regional or national pharmacovigilance programmes or patient safety programmes.

Q5.4. Are pharmacists involved in monitoring and reporting potential and actual adverse drug events at your hospital to regional or national pharmacovigilance programmes or patient safety programmes?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

5.5 Hospital pharmacists should help to decrease the risk of medication errors by disseminating evidence based approaches to error reduction including computerised decision support.

Q5.5 Do the pharmacists in your hospital use evidence-based approaches to reduce the risk of medication errors?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

SECTION 6: EDUCATION AND RESEARCH

6.4 Hospital pharmacists should actively engage in and publish research, particularly on hospital pharmacy practice. Research methods should be part of undergraduate and postgraduate training programmes for hospital pharmacists.

Q6.4 Do the pharmacists in our hospital routinely publish hospital pharmacy practice research?

This happens never (0-25%)

This happens rarely (26-50%)

This happens frequently (51-75%)

This happens always (76-100%)

PART III - GENERAL QUESTIONS ABOUT HOW READY YOUR HOSPITAL IS TO IMPLEMENT THE STATEMENTS

1. Are the pharmacists within your hospital are aware of the 44 European Statements for Hospital Pharmacy
Strongly disagree
Disagree
Neutral
Agree
Strongly agree
2. Do the pharmacists within your hospital agree in principle with the Statements
Strongly disagree
Disagree
Neutral
Agree
Strongly agree
3. Has your hospital the capability* to implement all of the Statements now?
Strongly disagree
Disagree
Neutral
Agree
Strongly agree

**Capability: Does the organisation have staff with the right skills and experience to support the change effort?*

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4. Has your hospital the capacity* to implement all of the Statements now?

Strongly disagree

Disagree

Neutral

Agree

Strongly agree

**Capacity: Does the organisation have the sufficient number of people or time or technology to undertake the change*

5. Does resistance to change among pharmacy staff impede the implementation of the statements in your hospital?

Yes

No