

STANDARD 9 GOVERNANCE AND FINANCIAL MANAGEMENT

Safe systems of work are established and pharmacy services have sound financial management.

9.1 SYSTEMS GOVERNANCE (see also safe and effective use of medicines domain)

Systems of work are established that are safe, productive, support continuous quality improvement, are regularly audited and comply with relevant regulations.

Examples of evidence (see also standards 4-7 for overlapping evidence)
• Policies and SOPs. In place across the board to support systems governance.
• Monitoring and audit. Programme of regular audit and monitoring as part of continuous improvement.
• Information Governance. Mandatory training. Policies and procedures in place.
• Health and safety audits. Environmental monitoring. Inspections by regional Quality Assurance and Quality Control services.

Example of Practice (See Appendix 2 for more examples)

All patients admitted for planned surgery are screened (level 2 medicines reconciliation) on admission by a pharmacy technician or a pharmacist, to see if they are taking high-risk drugs, as defined by the NPSA. Patients currently taking high-risk drugs are highlighted by putting a sticker on the drug chart; this prompts ward staff to contact pharmacy to check the appropriateness of the discharge medicines and letter and ensure accurate communication about their medicines. This process has helped to ensure that over 80% of patients on high risk medicines admitted to Colchester University Hospital are monitored and reviewed before discharge. Pharmacists will also check prescriptions and discharge communications retrospectively to check for any problems, following up with the patient's GP or primary carer, if required. The service is consistently audited, looking at a number of parameters to ensure appropriate coverage of patients and target appropriate pharmacy resources. The outcomes are used for continuous improvement of the service and minimise risks for patient on high-risk medicines during and after discharge.

Colchester Hospital University NHS Foundation Trust

9.2 FINANCIAL GOVERNANCE

Robust business planning, financial planning and reporting are undertaken.

Examples of evidence
• Annual priorities and ongoing work identified ahead of business planning. Linked to the organisations strategic plan.
• Annual plan implemented and monitored on a regular basis.
• Directorate expenditure reports produced regularly for discussion with clinical directors and general managers.
• Engagement with local commissioner groups (England).

Examples of how some sites are achieving delivery of standard 9.0 governance and financial management:

- Implementation of actions emerging from the programme of audit and continuous quality improvement.
- Controlled drugs. Local Intelligence Network (LIN) reports. Care Quality Commission self assessment. KPIs for CD audits.
- External audit. For example NHS Litigation authority, regional Quality Control and Quality Assurance.
- Information Governance reports and incident monitoring,
- Legal requirements for the ongoing registration and licensing of premises and facilities.
- Monitoring of expenditure against KPIs, use of dashboards to highlight variance.

Examples of areas for development identified for standard 9.0 governance and financial management:

- We need to embed reporting our care contributions more to CSUs
- The majority of our CD audits are still six monthly rather than three monthly
- We need to do more work on patients' own CDs that they bring into hospital with them.
- No clear policy for how we work collaboratively with the pharmaceutical industry.
- We are weak on having a programme that can inform continuous improvement and development of systems.