



ROYAL  
PHARMACEUTICAL  
SOCIETY

## SECTION 4: TOP TOPICS FOR THE COMING YEAR

### **Professional Standards For Hospital Pharmacy Services**

One year on – sharing experience  
from the development sites

September 2013



## SECTION 4 Top topics for the coming year

This section of the report contains RPS recommendations for action, the 'top topics' that we are encouraging hospitals to give focus to in the next year. These areas are where we will be looking to work collaboratively with other pharmacy organisations, NHS organisations, professional bodies and Royal Colleges to provide support to providers of pharmacy services to drive up quality.

The top topics came from the data submitted by the development sites programme and reflect areas where it was felt that additional concerted and collaborative focus would be useful. They have also been influenced in part by the Francis report, and issues and priorities in the health service more generally.

1. *Patient experience.* Following the Francis report the RPS is committed to developing with the patient groups, the profession and other Royal Colleges a **Medicines Charter** for patients. This charter will clearly describe what patients should expect when they are admitted to hospital and on transfer to another care setting. This work will link closely with the patient experience domain of the hospital standards. Alongside this we will be asking all hospitals to share how they obtain feedback from patients about their experiences of pharmacy services and medicines use in their organisations.
2. *Delayed or missed doses of medicines.* Delayed or missed doses of medicines remain a significant issue for patients. As the tragedy at mid-Stafford NHS Trust highlighted, at worst missed doses of medicines can be fatal. The RPS will work with other professions through their Royal Colleges and bodies along with other pharmacy organisations and NHS organisations to support healthcare teams to reduce the incidence of inappropriately **delayed or omitted doses**.
3. *Effective transfer of information about medicines when patients move care settings.* Good practice guidance for healthcare professionals published in 2011 highlighted the importance of effective transfer of information about patients' medicines when they move care settings.\* All hospitals should be reconciling patients' medicines on admission. To encourage continued focus on **medicines reconciliation** rates we are encouraging any hospital not already doing so to contribute their medicines reconciliation rates to a national or regional centre. Many organisations have made significant progress on improving information about medicines provided on discharge or transfer to another care setting. However more could be done and RPS is recommending that there is a **renewed focus on improving the quality of information transfer about medicines** in line with the 2011 good practice guidance.

\* [Keeping patients safe when they transfer between care settings. Getting the medicines right](#), Royal Pharmaceutical Society, July 2011. The NHS Litigation Authority (England) has a draft standard linked to the guidance to support safe discharge.

4. *24/7 working.* With the move toward **seven day working** and the increasing pressure on out-of-hours services the profession needs to develop a vision for how pharmacy services might be delivered effectively. RPS will be asking partner groups and hospitals to work with us to develop the professions response to this significant challenge.
  5. *Demonstrating value through outcomes.* The intense focus on service quality following the Francis report combined with current austerity measures and the demand for seven day services means that it is crucial that pharmacy services demonstrate where they can have **maximum impact on patient outcomes**. We are recommending that pharmacy teams work to ensure that care contributions are recorded effectively to demonstrate where most value is added. This is an area where collaborative audits would be of benefit to the profession as a whole and we ask that pharmacy teams contribute to collaborative regional or national audits.
- Alongside this, the Francis review has highlighted the importance of professionalism in the delivery of care. RPS consider it good practice that pharmacists record in a patient's notes their actions and

recommendations, and that the organisation has guidance in place for pharmacists on how best to do this.

6. *Standards review in light of Francis*. RPS will review the standards in light of the **Francis report** and the subsequent Berwick report to ensure that the Standards fully reflect their recommendations.

In addition to our hospital standards RPS has or will soon be publishing additional good practice guidance of relevance to acute, mental health, private and community service providers:

- [\*Medicines Optimisation: Helping patients to make the most of medicines. Good practice guidance for healthcare professionals in England.\*](#) Royal Pharmaceutical Society, May 2013.
- [\*Improving patient outcomes. The better use of multi-compartment compliance aids.\*](#) Royal Pharmaceutical Society, July 2013.
- *Professional Standards for Homecare Services.* Royal Pharmaceutical Society. In press.

We are asking Trusts to review/audit their current services against these standards and to develop action plans in line with the results.