

Audit of a pharmacy on-call service in a regional hospital

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Background

On-call pharmacy services provide wide-ranging medicines advice and supply to clinicians outside of usual business hours and are an integral component of the operations of most hospitals. After-hours pharmacy services are essential to ensure clinicians, and ultimately patients, receive the same high-quality and timely medicines information and supply regardless of time of day. The on-call service at Ipswich hospital operates from 5pm to 8:30am on Weekdays, and 2pm to 9am on Weekends. The cost of providing on-call services is significant, so ensuring appropriate cost efficient use of these services should be encouraged. Resources such as online access to medication lists, and clinical references are available. There is currently no standardised process for screening of calls prior to contacting the on-call pharmacist.

Aim

To review West Moreton Health Hospital and Health Service on-call pharmacy services and identify opportunities for efficiencies and utilisation of resources.

Methods

The database of recorded calls made to the service between 1/1/2016 and 1/5/2019 was analysed to establish the staffing profile of callers and type of calls made. The analysis of data was performed by a junior and a senior pharmacist

Results

A total of 449 calls were reviewed, 293 (65%) were for medication supply and 156 (35%) for clinical enquiries or non-clinical administrative information. The audit found that 90 (30%) calls in relation to medication supply and 38 (24%) other calls could have been avoided by accessing onsite resources – such as online references (e.g. MIMS, eTG, AMH, and ward medication lists). The audit found that calls to the service were made by nursing staff 63% of the time, with 32% from medical staff and the remaining 5% coming from admin staff and other sources.

Conclusions

This review highlights the need to ensure staff working after pharmacy hours are aware of and have access to appropriate resources. The audit suggests the need for a robust process for triage of calls which involves the consultation of appropriate resources such as ward medication lists, clinical resources and senior members of on-site staff before a call is made. Benefits of a standardised process may improve patient care and improve overall utilisation of valuable health care resources. Consultation with key stakeholders will be essential to ensure appropriate strategies are implemented and end-users are aware of the process.

Figure 1: medication supply queries

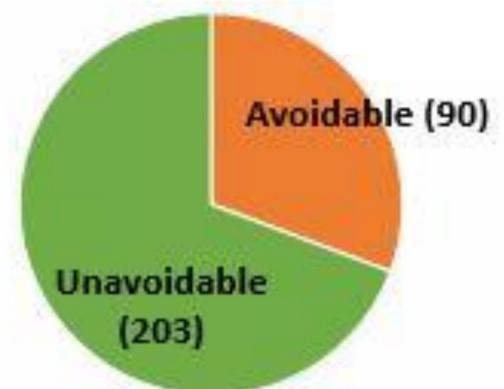


Figure 2: non-clinical administrative information or clinical enquiries

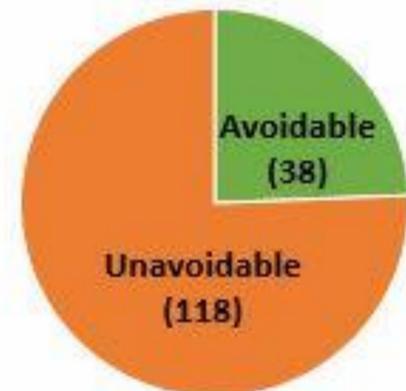


Figure 3: proportion of avoidable supply issues

