

**Investigation of the hospital pharmacy profession in Europe - Assess and advance hospital pharmacy!**

**Introduction & General Questions**

**Dear colleague,**

**without your input and help, we cannot be successful in improving our profession and outcomes for patients. Therefore we kindly ask you to let us know where the profession is now by filling in the “Investigation of the hospital pharmacy profession in Europe - Assess and advance hospital pharmacy!” which touches on the state-of-the-art of our profession and specifically on the European Statements of Hospital Pharmacy.**

**Please note that the “Investigation of the hospital pharmacy profession in Europe - Assess and advance hospital pharmacy!” should be completed by the chief pharmacist/director of the pharmacy/manager of the pharmacy in each hospital across Europe. Only one response per hospital pharmacy is needed.**

**Sharing your feedback to the investigation should take approximately 45 minutes. The full set of questions is available on EAHP’s website.**

**Among the hospital pharmacists that have completed the entire survey, the following 3 prizes will be raffled:**

- **1 free registration to the EAHP Congress (22 to 24 March 2023)**
- **1 seat at the faculty dinner at the EAHP Congress (23 March 2023)**
- **1 drink with an EAHP Board member at the EAHP Congress (22 to 24 March 2023)**

**Hospital pharmacists wishing to enter the prize draw, need to share their name and e-mail address after completing the survey.**

**In case you have any questions, you can reach out to [info@eahp.eu](mailto:info@eahp.eu)**

**Your help is highly appreciated.**

**On behalf of EAHP Board of Directors**

**EAHP President András Süle & Survey Working Group Chairwoman and EAHP Vice President Darija Kuruc Poje**

**What country are you from?**

- |                                              |                                       |                                       |
|----------------------------------------------|---------------------------------------|---------------------------------------|
| <input type="radio"/> Austria                | <input type="radio"/> Greece          | <input type="radio"/> Poland          |
| <input type="radio"/> Belgium                | <input type="radio"/> Hungary         | <input type="radio"/> Portugal        |
| <input type="radio"/> Bosnia and Herzegovina | <input type="radio"/> Iceland         | <input type="radio"/> Romania         |
| <input type="radio"/> Bulgaria               | <input type="radio"/> Ireland         | <input type="radio"/> Serbia          |
| <input type="radio"/> Croatia                | <input type="radio"/> Italy           | <input type="radio"/> Slovakia        |
| <input type="radio"/> Czech Republic         | <input type="radio"/> Latvia          | <input type="radio"/> Slovenia        |
| <input type="radio"/> Denmark                | <input type="radio"/> Lithuania       | <input type="radio"/> Spain           |
| <input type="radio"/> Estonia                | <input type="radio"/> Luxembourg      | <input type="radio"/> Sweden          |
| <input type="radio"/> Egypt                  | <input type="radio"/> Malta           | <input type="radio"/> Switzerland     |
| <input type="radio"/> Finland                | <input type="radio"/> Montenegro      | <input type="radio"/> The Netherlands |
| <input type="radio"/> France                 | <input type="radio"/> North Macedonia | <input type="radio"/> Turkey          |
| <input type="radio"/> Germany                | <input type="radio"/> Norway          | <input type="radio"/> United Kingdom  |
| <input type="radio"/> Other (please specify) |                                       |                                       |

**In which type of hospital is your pharmacy located?**

- In a general hospital
- In a speciality hospital

**Is your pharmacy within a teaching/university hospital?**

- Yes
- No

**What is the ownership structure of your hospital?**

- Private
- Public
- Public-private
- Other (please specify)

**How many beds are served by your pharmacy?**

- Fewer than 100 beds
- 101 - 300 beds
- 301 - 500 beds
- 501 - 1000 beds
- More than 1000 beds

**How many pharmacists are providing services in your hospital regardless of their employment status (including clinical pharmacy, laboratory pharmacy, etc.)?**

**Approximately how many pharmacy technicians, assistants or other staff within these roles are employed by your hospital?**

*Definition:*

*The terms 'pharmacy technicians, assistants or other staff within these roles' refer to any support staff in the pharmacy that carries out pharmacy-related activities such as compounding, dispensing, stocking supplies, etc.*

- 0 full time equivalents
- 1 - 10 full time equivalents
- 11 - 50 full time equivalents
- 51 - 100 full time equivalents
- 100 - 200 full time equivalents
- More than 200 full time equivalents

**Approximately how many support staff members are employed by your hospital in the pharmacy department?**

*Definition:*

*The term 'support staff' refers to staff members that carry out administrative roles such as for instance secretaries, procurement assistants or administrators.*

- 0 full time equivalents
- 1 - 10 full time equivalents
- 11 - 50 full time equivalents
- 51 - 100 full time equivalents
- More than 100 full time equivalents

**To whom is the head of the pharmacy/ the chief pharmacist/pharmacy director responsible?**

Please tick all options that apply.

*Definition:*

*The terms 'head of the pharmacy/ the chief pharmacist/pharmacy director' refer to the person that is leading the pharmacy or responsible for the pharmacy.*

- To the hospital chief executive officer (hospital director)
- To an outside pharmacy director
- To a clinical medical director
- To a local authority
- To nobody
- Other (please specify)

**Are there some tasks in your pharmacy that can only be carried out by a pharmacist with a hospital pharmacy specialisation or another type of additional training?**

- Yes
- No

**If you would like to share details, please share them below.**



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**General Questions**

**Is this regulated by law?**

- Yes
- No



Investigation of the hospital pharmacy profession in Europe – Assess and advance hospital pharmacy!

General Questions

**For which of the following categories, does your hospital have a set minimum number of staff that need to be employed (defined by law/at hospital level/at regional level/at national level)?** Please tick all options that apply.

- Pharmacists
- Technicians & support staff
- Nurses
- None of the above

**In the previous question, you indicated that your hospital has set a minimum number of professionals that need to be employed. Does your hospital pharmacy staffing meet at least those minimum numbers?** Please tick one option per line.

	Yes	No	Not applicable.
Pharmacists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy technicians, assistants or other staff within these roles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Support staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Investigation of the hospital pharmacy profession in Europe – Assess and advance hospital pharmacy!

General Questions

**Is there a workforce development plan in action?**

- Yes
- No

**Is your hospital pharmacy managing the following?** Please tick all options that apply.

*Definition 'medical devices' in accordance with Regulation (EU) 2017/745*

*'medical device' means any instrument, apparatus, appliance, software, implant, reagent, material or other article intended by the manufacturer to be used, alone or in combination, for human beings for one or more of the following specific medical purposes:*

- diagnosis, prevention, monitoring, prediction, prognosis, treatment or alleviation of disease,*
  - diagnosis, monitoring, treatment, alleviation of, or compensation for, an injury or disability,*
  - investigation, replacement or modification of the anatomy or of a physiological or pathological process or state,*
  - providing information by means of in vitro examination of specimens derived from the human body, including organ, blood and tissue donations,*
- and which does not achieve its principal intended action by pharmacological, immunological or metabolic means, in or on the human body, but which may be assisted in its function by such means.*

*The following products shall also be deemed to be medical devices:*

- devices for the control or support of conception;*
- products specifically intended for the cleaning, disinfection or sterilisation of devices as referred to in Article 1(4) and of those referred to in the first paragraph of this point.*

*Definition 'biocidal products' in accordance with Regulation (EU) No 528/2012*

*'biocidal product' means*

- any substance or mixture, in the form in which it is supplied to the user, consisting of, containing or generating one or more active substances, with the intention of destroying, deterring, rendering harmless, preventing the action of, or otherwise exerting a controlling effect on, any harmful organism by any means other than mere physical or mechanical action,*
- any substance or mixture, generated from substances or mixtures which do not themselves fall under the first indent, to be used with the intention of destroying, deterring, rendering harmless, preventing the action of, or otherwise exerting a controlling effect on, any harmful organism by any means other than mere physical or mechanical action.*

- Medical devices
- Medical gases
- Radiopharmaceuticals
- Cytotoxics
- Advanced therapy medicinal products (ATMPs)
- Biocidal products



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Section 1

*EAHP Statement 1.1*

*The overarching goal of the hospital pharmacy service is to optimise patient outcomes through working collaboratively within multidisciplinary teams in order to achieve the responsible use of medicines across all settings.*

**S1.1 The pharmacists in our hospital work routinely as part of the multidisciplinary team.**

- In no areas of patient care
- In only a small number of areas of patient care
- In some areas of patient care
- In most areas of patient care
- In all areas of patient care



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**Section 1**

*The pharmacists in our hospital work routinely as part of the multidisciplinary team. You indicated 'In no areas of patient care' /In only a small number of areas of patient care'.*

**S1.1.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- Reluctance from medical/nursing staff to allow this
- The pharmacists don't have the confidence to do this
- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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Section 1

**At least one pharmacist from our team is a member with decision-making powers of the antimicrobial stewardship team.**

- Yes  
 No

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Section 1

*At least one pharmacist from our team is a member with decision-making powers of the antimicrobial stewardship team. You answered 'No'. What is preventing this?*

**The antimicrobial stewardship team includes:**

(Please tick all options that apply.)

- Pharmacist that works in the team as a permanent member  
 Pharmacist from the hospital pharmacy which is available as needed  
 Physician  
 Nurse  
 Other (please specify)

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Section 1



*EAHP Statement 1.3*

*Health systems have limited resources and these should be used responsibly to optimise outcomes for patients. Hospital pharmacists should develop, in collaboration with other stakeholders, criteria and measurements to enable the prioritisation of hospital pharmacy activities.*

**S1.3 Our hospital is able to prioritise hospital pharmacy activities according to agreed criteria.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Section 1

*Our hospital is able to prioritise hospital pharmacy activities according to agreed criteria.  
You indicated 'This happens never/This happens rarely'*

**S1.3.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 1

*EAHP Statement 1.5*

*Hospital pharmacists should work with all relevant stakeholders to develop hospital pharmacy human resource plans covering the breadth of hospital pharmacy practice. These should be aligned to engage hospital pharmacists as supervisors in all steps of all medicine use processes to meet health needs and priorities across public and private sectors that optimise medicines use and patient outcomes.*

**S1.5 The pharmacists in our hospital are engaged in the supervision of all steps of all medicine use processes.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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The pharmacists in our hospital are engaged in the supervision of all steps of all medicine use processes. You indicated 'This happens never/This happens rarely'

**S1.5.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- It is not required by our legislation
- Not considered to be a priority by my managers/medical/nursing staff
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- Other (please specify)



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## Section 1

### *EAHP Statement 1.6*

*Hospital pharmacists should take the lead in coordinating the activities of multi-disciplinary, organisationwide 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.*

**S1.6 At least one pharmacist from our team is a full member of the Drug & Therapeutics Committee.**

- Yes
- No



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*At least one pharmacist from our team is a full member of the Drug & Therapeutics Committee. You answered 'No'.*

**S1.6.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- We do not have a Drug and Therapeutics Committee
- It is not required by our legislation
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Not considered to be a priority by my managers/medical/nursing staff
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- Other (please specify)



Section 1

**EAHP Statement 1.6**

*Hospital pharmacists should take the lead in coordinating the activities of multi-disciplinary, organisationwide 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.*

**S1.6.2 The pharmacists in our hospital take the lead in coordinating the activities of the Drug & Therapeutics Committees.**

- Yes
- No

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*The pharmacists in our hospital take the lead in coordinating the activities of the Drug & Therapeutics Committees. You answered 'No'.*

**S1.6.3 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- The pharmacists have a passive or minor role only
- It is not required by our legislation
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Not considered to be a priority by my managers/medical staff
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- Other (please specify)

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Section 1

*EAHP Statement 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.*

**S1.7 The pharmacists in our hospital are involved in the design, specification of parameters and evaluation of ICT used within medicines processes.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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*The pharmacists in our hospital are involved in the design, specification of parameters and evaluation of ICT used within medicines processes.*

*You indicated 'This happens never/This happens rarely'.*

**S1.7.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- It is not required by our legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 1



**Is there an IT system in place to manage the following? And if yes, how well is this system functioning? Please rate on a scale from 1 (very poor) to 5 (excellent) how well the system is working.** Please tick one option per line.

*Definition: Computerized physician order entry (CPOE) - Process of entering/sending treatment instructions via a computer application rather than via paper.*

	1 (very poor)	2 (poor)	3 (fair)	4 (good)	5 (excellent)	Not available
Computerized physician order entry (CPOE)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
IT-assisted therapeutic decision-making (incl. protocols)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Storage (pharmacy)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Storage (ward)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dispensing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Administration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Traceability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reporting and analytics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If you would like to provide details, please share them below.



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## Section 2

### *EAHP Statement 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.*

#### **S2.1 Our hospital has clear processes in place around the procurement of medicines.**

Yes

No

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*Our hospital has clear processes in place around the procurement of medicines. You answered 'No'.*

**S2.1.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- 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 specify)

**Is your hospital pharmacy procuring/tendering the following?** Please tick all options that apply.

*Definition medical device in accordance with Regulation (EU) 2017/745:*

*'medical device' means any instrument, apparatus, appliance, software, implant, reagent, material or other article intended by the manufacturer to be used, alone or in combination, for human beings for one or more of the following specific medical purposes:*

- diagnosis, prevention, monitoring, prediction, prognosis, treatment or alleviation of disease,*
  - diagnosis, monitoring, treatment, alleviation of, or compensation for, an injury or disability,*
  - investigation, replacement or modification of the anatomy or of a physiological or pathological process or state,*
  - providing information by means of in vitro examination of specimens derived from the human body, including organ, blood and tissue donations,*
- and which does not achieve its principal intended action by pharmacological, immunological or metabolic means, in or on the human body, but which may be assisted in its function by such means.*

*The following products shall also be deemed to be medical devices:*

- devices for the control or support of conception;*
- products specifically intended for the cleaning, disinfection or sterilisation of devices as referred to in Article 1(4) and of those referred to in the first paragraph of this point.*

*Definition biocidal product in accordance with Regulation (EU) No 528/2012:*

*'biocidal product' means*

- any substance or mixture, in the form in which it is supplied to the user, consisting of, containing or generating one or more active substances, with the intention of destroying, deterring, rendering harmless, preventing the action of, or otherwise exerting a controlling effect on, any harmful organism by any means other than mere physical or mechanical action*
- any substance or mixture, generated from substances or mixtures which do not themselves fall under the first indent, to be used with the intention of destroying, deterring, rendering harmless, preventing the action of, or otherwise exerting a controlling effect on, any harmful organism by any means other than mere physical or mechanical action.)*

- Medicines
- Medical devices
- Medical gases
- Radiopharmaceuticals
- Advanced therapy medicinal products (ATMPs)
- Biocidal products



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Section 2

**S2.1.2 Are hospital pharmacists involved in the development of procurement processes?**

Yes

No



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Section 2

*Hospital pharmacists are involved in the development of procurement processes. You answered 'No'.*

**S2.1.3 What prevents this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- 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 specify)



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Section 2

*EAHP Statement 2.2*

*Hospital pharmacists should take the lead in developing, monitoring, reviewing and improving medicine use processes and the use of medicine related technologies. Responsibility for using these processes may rest with other health care professionals and may vary according to the medicine, the medicine related technology, the health care setting and the multidisciplinary team delivering care.*

**S2.2 The pharmacists in our hospital take the lead in developing, monitoring, reviewing and improving medicine use processes and the use of medicine-related technologies.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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*The pharmacists in our hospital take the lead in developing, monitoring, reviewing and improving medicine use processes and the use of medicine related technologies. You indicated 'This happens never/This happens rarely'.*

**S2.2.1. What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other professional groups have more influence in the hospital
- Other (please specify)



Investigation of the hospital pharmacy profession in Europe – Assess and advance hospital pharmacy!

Section 2

### EAHP Statement 2.3

*Hospital pharmacists should coordinate the development, maintenance and use of a medicines formulary system, which may be local, regional and/or national. The medicine formulary system should be linked to guidelines, protocols and treatment pathways based on the best available evidence including patient outcomes and pharmacoeconomic evaluations where these are available.*

**S2.3 The pharmacists in our hospital coordinate the development, maintenance and use of our formulary. The formulary in this context is an evidence-based list of medicines that can be prescribed in your hospital and is not solely based on historical or economic data/factors.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Section 2

The pharmacists in our hospital coordinate the development, maintenance and use of our formulary. You indicated 'This happens never/This happens rarely'.

**S2.3.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- No legal obligation to have a formulary
- Other (please specify)



Investigation of the hospital pharmacy profession in Europe - Assess and advance hospital pharmacy!

Section 2



#### *EAHP Statement 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.*

### **S2.4 Procurement of nonformulary medicines in our hospital is done to a robust process.**

#### *Definitions:*

*The formulary in this context is an evidence-based list of medicines that can be prescribed in your hospital and is not solely based on historical or economic data/factors.*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Section 2

*Procurement of nonformulary medicines in our hospital is done to a robust process. You indicated 'This happens never/This happens rarely'.*

**S2.4.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- No legal obligation to have a formulary
- Other (please specify)



Investigation of the hospital pharmacy profession in Europe - Assess and advance hospital pharmacy!

**Section 2**

*EAHP Statement 2.5*

*Each hospital pharmacy should have contingency plans for shortages of medicines that it procures.*

**S2.5 The pharmacy in our hospital has contingency plans for medicines shortages.**

- Yes
- No



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## Section 2

The pharmacy in our hospital has contingency plans for medicines shortages. You answered 'No'.

**S2.5.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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## Section 2

**Are risk assessments part of the contingency plan?**

- Yes
- No



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## Section 2

Risk assessments are part of the contingency plan. You answered 'Yes'.

**How often do you carry out the risk assessment?**

- Once per week or more often
- Once or twice per month
- Every 3 months
- Every 6 months
- Once per year
- Every 2 years



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Section 2

*EAHP Statement 2.6*

*Hospital pharmacies should have responsibility for all medicines logistics in hospitals. This includes proper storage, preparation, dispensing, distribution and disposal conditions for all medicines, including investigational medicines.*

**S2.6 The pharmacy in our hospital takes responsibility for all medicines logistics, including for investigational medicines.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



Investigation of the hospital pharmacy profession in Europe – Assess and advance hospital pharmacy!

Section 2

The pharmacy in our hospital takes responsibility for all medicines logistics, including for investigational medicines You indicated 'This happens never/This happens rarely'.

**S2.6.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



Investigation of the hospital pharmacy profession in Europe – Assess and advance hospital pharmacy!

Section 2

*EAHP Statement 2.7*

*Hospital pharmacists should be involved in the development of policies regarding the use of medicines brought into the hospital by patients.*

**S2.7 Our hospital has a policy for the use of medicines brought into the hospital by patients.**

- Yes
- No



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Section 2

Our hospital has a policy for the use of medicines brought into the hospital by patients. You answered 'No'.

**S2.7.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 2

**S2.7.2 Were pharmacists involved in producing the policy for the use of medicines brought into the hospital by patients?**

- Yes
- No



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Section 2

Pharmacists were involved in producing the policy for the use of medicines brought into the hospital by patients. You answered 'No'.

**S2.7.3 What prevented this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 3

*EAHP Statement 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 this decision with the relevant stakeholders.*

**S3.1 The pharmacists in our hospital check if a suitable product is commercially available before we manufacture or prepare a medicine.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



Investigation of the hospital pharmacy profession in Europe - Assess and advance hospital pharmacy!

**Section 3**

*The pharmacists in our hospital check if a suitable product is commercially available before we manufacture or prepare a medicine. You indicated 'This happens never/This happens rarely'.*

**S3.1.1 What is preventing this?**



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**Section 3**



*EAHP Statement 3.2*

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

**S3.2 When medicines require manufacture or compounding, we either produce them in our hospital pharmacy or we outsource to an approved provider.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Section 3

When medicines require manufacture or compounding, we either produce them in our hospital pharmacy or we outsource to an approved provider. You indicated 'This happens never/This happens rarely'.

**S3.2.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 3

*EAHP Statement 3.3*

*Before making a pharmacy preparation, the hospital pharmacist must undertake a risk assessment to determine the best practice quality requirements. These must consider premises, equipment, pharmaceutical knowledge and labelling.*

**S3.3 The pharmacists in our hospital undertake a risk assessment to determine the best practice quality requirements before making a pharmacy preparation.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Section 3

The pharmacists in our hospital undertake a risk assessment to determine the best practice quality requirements before making a pharmacy preparation. You indicated 'This happens never/This happens rarely'.

**S3.3.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



Investigation of the hospital pharmacy profession in Europe - Assess and advance hospital pharmacy!

**Section 3**

*EAHP Statement 3.4*

*Hospital pharmacists must ensure that an appropriate system for quality control, quality assurance and traceability is in place for pharmacy prepared and compounded medicines.*

**S3.4 The pharmacy in our hospital has an appropriate system in place for the quality assurance of pharmacy prepared and compounded medicines.**

- Yes
- No



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## Section 3

*The pharmacy in our hospital has an appropriate system in place for the quality assurance of pharmacy prepared and compounded medicines. You answered 'No'.*

**S3.4.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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## Section 3

*EAHP Statement 3.4*

*Hospital pharmacists must ensure that an appropriate system for quality control, quality assurance and traceability is in place for pharmacy prepared and compounded medicines.*

**S3.4.2 The pharmacy in our hospital has an appropriate system in place for the traceability of pharmacy prepared and compounded medicines.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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**Section 3**

*The pharmacy in our hospital has an appropriate system in place for the traceability of pharmacy prepared and compounded medicines. You indicated 'This happens never/This happens rarely'.*

**S3.4.3 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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Section 3

*EAHP Statement 3.5*

*Hazardous medicines should be prepared under appropriate conditions to minimise the risk of contaminating the product and exposing hospital personnel, patients and the environment to harm.*

**S3.5 Our hospital has appropriate systems in place for the preparation and supply of hazardous medicinal products.**

*Definition: hazardous medicinal products*

*A medicinal product is defined as hazardous when the intrinsic characteristics of the substance potentially jeopardise the well-being of healthcare workers and exposure presents a significant risk to users after consideration of measures that may eliminate or substantively reduce such risks during product preparation and administration by healthcare workers and subsequent patient care (e.g., cytotoxic drugs).*

Yes

No

Our hospital has appropriate systems in place for the preparation and supply of hazardous medicinal products. You answered 'No'.

**S3.5.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 3



*EAHP Statement 3.6*

*When the reconstitution or mixing of medicines takes place in a patient care area, a hospital pharmacist should approve written procedures that ensure staff involved in these procedures are appropriately trained.*

**S3.6 Our hospital has written procedures that ensure staff are appropriately trained to reconstitute or mix medicines in a patient care area.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Our hospital has written procedures that ensure staff are appropriately trained to reconstitute or mix medicines in a patient care area. You indicated 'This happens never/This happens rarely'.

**S3.6.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 3

**3.6.2 Were pharmacists involved in approving the written procedures that ensure staff are appropriately trained to reconstitute or mix medicines in a patient care area?**

- Yes
- No



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Pharmacists were involved in approving the written procedures that ensure staff are appropriately trained to reconstitute or mix medicines in a patient care area. You answered 'No'.

### 3.6.3 What prevented this? Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 4

*EAHP Statement 4.1*

*Hospital pharmacists should be involved in all patient care settings to prospectively influence collaborative, multidisciplinary therapeutic decisionmaking; they should play a full part in decision making including advising, implementing and monitoring medication changes in full partnership with patients, carers and other health care professionals.*

**S4.1 The pharmacists in our hospital play a full part in shared decision-making on medicines, including advising, implementing and monitoring medication changes.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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*The pharmacists in our hospital play a full part in shared decision-making on medicines, including advising, implementing and monitoring medication changes. You indicated 'This happens sometimes/This happens frequently/This happens always'.*

**Please share examples from your everyday practice.**



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The pharmacists in our hospital play a full part in shared decisionmaking on medicines, including advising, implementing and monitoring medication changes. You indicated 'This happens never/This happens rarely'.

**S4.1.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- Reluctance from medical/nursing staff to allow this
- Reluctance from patients to agree to this
- The pharmacists don't have the confidence to do this
- This is prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 4

*EAHP Statement 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.*

**S4.2 All prescriptions in our hospital are reviewed and validated as soon as possible by a pharmacist.**

*Definitions:*

*The term prescription should be interpreted as physician orders intended for individual patients.*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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All prescriptions in our hospital are reviewed and validated as soon as possible by a pharmacist. You indicated 'This happens never/This happens rarely'.

**S4.2.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- Reluctance from medical/nursing staff to allow this
- Reluctance from patients to agree to this
- The pharmacists don't have the confidence to do this
- This is prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 4

*EAHP Statement 4.3*

*Hospital pharmacists should have access to the patients' health record. Their clinical interventions should be documented in the patients' health record and analysed to inform quality improvement interventions.*

**S4.3 The pharmacists in our hospital have access to the patients' health record.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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**Section 4**

*The pharmacists in our hospital have access to the patients' health record. You indicated 'This happens never/This happens rarely'.*

**S4.3.1 What is preventing this?** Please tick all options that apply.

- Reluctance from medical/nursing staff to allow this
- This is prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- Other (please specify)



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Section 4

*EAHP Statement 4.3*

*Hospital pharmacists should have access to the patients' health record. Their clinical interventions should be documented in the patients' health record and analysed to inform quality improvement interventions.*

**For the patients that they provide care to do pharmacists in your hospital have digital access to the patients' full medical history?**

*Definitions:*

*Medical history: A record of information about a person's health. A personal medical history may include information about allergies, illnesses, surgeries, immunizations, and results of physical exams and tests.*

*Medication history: A record of information about a person's medication.*

*Access: In this context, access means at least being able to read the information contained in the medical/medication history of a patient.*

- I have access\* to the entire medical\* history of a patient (no matter from which healthcare provider)
- I have access\* to the entire medication\* history of a patient (no matter from which healthcare provider)
- I have access\* to the medication\* history from all or some wards generated within my hospital
- I have access\* to the full medical\* history from all or some wards generated within my hospital
- I have no access\*
- Not applicable since the patients' full medical history is not yet digitally available

If you would like to provide details, please share them below.



*EAHP Statement 4.3*

*Hospital pharmacists should have access to the patients' health record. Their clinical interventions should be documented in the patients' health record and analysed to inform quality improvement interventions.*

**S4.3.2 The pharmacists in our hospital document their clinical interventions into the patients' health record.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Section 4

The pharmacists in our hospital document their clinical interventions into the patients' health record. You indicated 'This happens never/This happens rarely'.

**S4.3.3 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- Reluctance from medical/nursing staff to allow this
- Reluctance from patients to agree to this
- The pharmacists don't have the confidence to do this
- This is prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 4

*EAHP Statement 4.3*

*Hospital pharmacists should have access to the patients' health record. Their clinical interventions should be documented in the patients' health record and analysed to inform quality improvement interventions.*

**S4.3.4 We analyse these clinical pharmacy interventions to inform quality improvement plans.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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We analyse these clinical pharmacy interventions to inform quality improvement plans. You indicated 'This happens never/This happens rarely'.

**S4.3.5 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- The pharmacists don't have the confidence to do this
- Reluctance from medical/nursing staff to allow this
- This is prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 4

*EAHP Statement 4.4*

*All the medicines used by patients should be entered on the patient's medical record and reconciled by the hospital pharmacist on admission. Hospital pharmacists should assess the appropriateness of all patients' medicines, including herbal and dietary supplements.*

**S4.4 The pharmacists in our hospital enter all medicines used into the patient's medical record on admission.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always

If you would like to provide details, please share them below.



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Section 4

The pharmacists in our hospital enter all medicines used onto the patient's medical record on admission. You indicated 'This happens never/This happens rarely'.

**S4.4.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- Other healthcare professionals do this
- Reluctance from medical/nursing staff to allow this
- The pharmacists don't have the confidence to do this
- This is prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 4

*EAHP Statement 4.4*

*All the medicines used by patients should be entered on the patient's medical record and reconciled by the hospital pharmacist on admission. Hospital pharmacists should assess the appropriateness of all patients' medicines, including herbal and dietary supplements.*

**S4.4.2 The pharmacists in our hospital reconcile medicines on admission.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Section 4



The pharmacists in our hospital reconcile medicines on admission. You indicated 'This happens never/This happens rarely'.

**S4.4.3 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- Other healthcare professionals do this
- Reluctance from medical/nursing staff to allow this
- The pharmacists don't have the confidence to do this
- This is prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 4

*EAHP Statement 4.4*

*All the medicines used by patients should be entered on the patient's medical record and reconciled by the hospital pharmacist on admission. Hospital pharmacists should assess the appropriateness of all patients' medicines, including herbal and dietary supplements.*

**S4.4.4 The pharmacists in our hospital assess the appropriateness of all patients' medicines, including herbal and dietary supplements.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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*The pharmacists in our hospital assess the appropriateness of all patients' medicines, including herbal and dietary supplements. You indicated 'This happens never/This happens rarely'.*

**S4.4.5 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- Other healthcare professionals do this
- Reluctance from medical/nursing staff to allow this
- The pharmacists don't have the confidence to do this
- This is prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



Investigation of the hospital pharmacy profession in Europe - Assess and advance hospital pharmacy!

Section 4

*EAHP Statement 4.5*

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

**S4.5 The pharmacists in our hospital contribute to the transfer of information about medicines when patients move between and within healthcare settings.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Section 4

The pharmacists in our hospital contribute to the transfer of information about medicines when patients move between and within healthcare settings. You indicated 'This happens never/This happens rarely'.

**S4.5.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- Other healthcare professionals do this
- Reluctance from medical/nursing staff to allow pharmacists to do this
- The pharmacists don't have the confidence to do this
- This is prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 4

*EAHP Statement 4.6*

*Hospital pharmacists, as an integral part of all patient care teams, should ensure that patients and carers are offered information about their clinical management options, and especially about the use of their medicines, in terms they can understand.*

**S4.6 The pharmacists in our hospital ensure patients and carers are offered information about their medicines in terms they can understand.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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The pharmacists in our hospital ensure patients and carers are offered information about their medicines in terms they can understand. You indicated 'This happens never/This happens rarely'.

**S4.6.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- Other healthcare professionals do this
- Reluctance from medical/nursing staff to allow pharmacists to do this
- The pharmacists don't have the confidence to do this
- This is prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 5

*EAHP Statement 5.2*

*Hospital pharmacists should ensure the development of appropriate quality assurance strategies for medicines use processes to detect errors and identify priorities for improvement.*

**S5.2 Our hospital has appropriate strategies to detect errors and identify priorities for improvement in medicines use processes.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Section 5



*Our hospital has appropriate strategies to detect errors and identify priorities for improvement in medicines use processes. You indicated 'This happens never/This happens rarely'.*

**S5.2.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- No coordination of this in my hospital
- Fear of medicolegal challenge
- Cultural barriers
- Other (please specify)



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**Section 5**

*EAHP Statement 5.2*

*Hospital pharmacists should ensure the development of appropriate quality assurance strategies for medicines use processes to detect errors and identify priorities for improvement.*

**The strategies to detect errors are targeting the following:**

(Please tick all options that apply.)

- Medication-related errors during prescription
- Medication-related errors during compounding/preparation
- Medication-related errors during picking/dispensing
- Medication-related errors during administration
- Storage/transport errors that can impact the quality of the medication (e.g. cold chain not respected)

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*EAHP Statement 5.2*

*Hospital pharmacists should ensure the development of appropriate quality assurance strategies for medicines use processes to detect errors and identify priorities for improvement.*

**S5.2.2 Were pharmacists involved in approving these procedures?**

- Yes  
 No

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*Pharmacists were involved in approving these procedures. You answered 'No'.*

**5.2.3 What prevented this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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Section 5

*EAHP Statement 5.3*

*Hospital pharmacists should ensure their hospitals seek review of their medicines use processes by an external quality assessment accreditation programme, and act on reports to improve the quality and safety of these processes.*

**S5.3 Our hospital uses an external quality assessment accreditation programme to assure our medicines use processes.**

Yes

No

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Our hospital uses an external quality assessment accreditation programme to assure our medicines use processes. You answered 'No'.

**S5.3.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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**Section 5**

*EAHP Statement 5.3*

*Hospital pharmacists should ensure their hospitals seek review of their medicines use processes by an external quality assessment accreditation programme, and act on reports to improve the quality and safety of these processes.*

**S5.3.2 Our hospital acts on these reports to improve the quality and safety of our medicines use processes.**

Definitions:

Rarely: on very few occasions; almost never

Sometimes: on some occasions but not always or often

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always

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*Our hospital acts on these reports to improve the quality and safety of our medicines use processes. You indicated. 'This happens never/This happens rarely'.*

**S5.3.3 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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Section 5

*EAHP Statement 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.*

**S5.4 The pharmacists in our hospital report adverse drug reactions.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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*The pharmacists in our hospital report adverse drug reactions. You indicated 'This happens never/This happens rarely'.*

**S5.4.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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*EAHP Statement 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.*

**S5.4.2 The pharmacists in our hospital report medication errors.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always

The pharmacists in our hospital report medication errors. You indicated 'This happens never/This happens rarely'.

**S5.4.3 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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*EAHP Statement 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.*

**S5.5 The pharmacists in our hospital use evidence-based approaches to reduce the risk of medication errors.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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The pharmacists in our hospital use evidence-based approaches to reduce the risk of medication errors. You indicated 'This happens never/This happens rarely'.

**S5.5.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 5

*EAHP Statement 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.*

**S5.5.2 Our hospital pharmacy uses computerised decision support to reduce the risk of medication errors.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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*Our hospital pharmacy uses computerised decision support to reduce the risk of medication errors. You indicated 'This happens never/This happens rarely'.*

**S5.5.3 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 5

*EAHP Statement 5.6*

*Hospital pharmacists should identify high-risk medicines and ensure appropriate procedures are implemented in procurement, prescribing, preparing, dispensing, administration and monitoring processes to minimise risk.*

**S5.6 Our hospital has appropriate procedures in place to identify high-risk medicines and minimise the risks from their use.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Our hospital has appropriate procedures in place to identify high-risk medicines and minimise the risks from their use. You indicated 'This happens never/This happens rarely'.

**S5.6.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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*EAHP Statement 5.6*

*Hospital pharmacists should identify high-risk medicines and ensure appropriate procedures are implemented in procurement, prescribing, preparing, dispensing, administration and monitoring processes to minimise risk.*

**S5.6.2 Are pharmacists involved in implementing these procedures?**

- Yes
- No



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Pharmacists are involved in implementing these procedures. You answered 'No'.

**S5.6.3 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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*EAHP Statement 5.7*

*Hospital pharmacists should ensure that the medicines administration process is designed such that transcription steps between the original prescription and the medicines administration record are eliminated.*

**S5.7 The medicines administration process in our hospital ensures that transcription\* steps between the original prescription and the medicines administration record are eliminated.**

*Definition - Transcription (related to prescriptions): The act of making an exact copy usually in writing. This means that there must always be an original from which the transcribed copy is made. For medicines, the act of transcribing is usually performed so that prescription details and other communications are available to the professionals caring for a patient.*

*The term prescription should be interpreted as physician orders intended for individual patients.*

- Yes
- No

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*The medicines administration process in our hospital ensures that transcription steps between the original prescription and the medicines administration record are eliminated. You answered 'No'.*

**S5.7.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



*EAHP Statement 5.8*

*Hospital pharmacists should ensure accurate recording of all allergy and other relevant medicine-related information in the patient's health record. This information should be accessible and evaluated prior to prescription and administration of medicines.*

**S5.8 Our patient's health records accurately record all allergy and other relevant medicine related information.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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Our patient's health records accurately record all allergy and other relevant medicine-related information. You indicated 'This happens never/This happens rarely'.

**S5.8.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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*EAHP Statement 5.8*

*Hospital pharmacists should ensure accurate recording of all allergy and other relevant medicine-related information in the patient's health record. This information should be accessible and evaluated prior to prescription and administration of medicines.*

**Hospital pharmacists ensure accurate recording of all allergy and other relevant medicine related information in the patient's health record.**

- Yes
- No



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## Section 5

### *EAHP Statement 5.9*

*Hospital pharmacists should ensure that the information needed for safe medicines use, including both preparation and administration, is accessible at the point of care.*

### **S5.9 The pharmacists in our hospital ensure that the information needed for safe medicines use is accessible at the point of care.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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The pharmacists in our hospital ensure that the information needed for safe medicines use is accessible at the point of care. You indicated 'This happens never/This happens rarely'.

**S5.9.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 5

*EAHP Statement 5.10*

*Hospital pharmacists should ensure that medicines stored throughout the hospital are packaged and labelled so to assure identification, maintain integrity until immediately prior to use and permit correct administration.*

**S5.10 Medicines in our hospital are packaged and labelled to assure they are safely optimised for administration.**

- Yes
- No



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*Medicines in our hospital are packaged and labelled to assure they are safely optimised for administration. You answered 'No'.*

**S5.10.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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## Section 5

*EAHP Statement 5.11*

*Hospital pharmacists should support and implement systems that allow traceability of all medicines dispensed by the pharmacy.*

**S5.11 Medicines dispensed by our pharmacy are traceable.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always

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*Medicines dispensed by our pharmacy are traceable. You indicated 'This happens never/This happens rarely'.*

**S5.11.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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*EAHP Statement 6.2*

*All those involved in medicines use processes must be able to demonstrate their competency in their roles. Hospital pharmacists should participate in the development of Europeanwide competency frameworks to ensure standards of best practice are met.*

**S6.2 The pharmacists in our hospital are able to demonstrate their competency in performing their roles.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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*The pharmacists in our hospital are able to demonstrate their competency in performing their roles. You indicated 'This happens never/This happens rarely'.*

**S6.2.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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Section 6



*EAHP Statement 6.3*

*A Europewide framework for initial post graduate education and training in hospital pharmacy with an assessment of individual competence is essential. In addition, hospital pharmacists should engage in relevant educational opportunities at all stages of their career.*

**S6.3 The pharmacists in our hospital engage in relevant educational opportunities.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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*The pharmacists in our hospital engage in relevant educational opportunities. You indicated 'This happens never/This happens rarely'.*

**S6.3.1 What is preventing this?** Please tick all options that apply.

*Definitions:*

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- We are not financially supported to undertake additional training
- Other (please specify)



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Section 6

#### EAHP Statement 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.*

#### **S6.4 The pharmacists in our hospital routinely publish hospital pharmacy practice research.**

*Definitions:*

*Rarely: on very few occasions; almost never*

*Sometimes: on some occasions but not always or often*

- This happens never
- This happens rarely
- This happens sometimes
- This happens frequently
- This happens always



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The pharmacists in our hospital routinely publish hospital pharmacy practice research. You indicated 'This happens never/This happens rarely'.

**S6.4.1 What is preventing this?** Please tick all options that apply.

Definitions:

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

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

- 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 (the hospital pharmacy manager/director | chief pharmacist)
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)



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EAHP Self-Assessment Tool

**Has your hospital done the EAHP Self-Assessment to measure the implementation of the European Statements of Hospital Pharmacy in your hospital?**

- Yes
- No



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EAHP Self-Assessment Tool

**Have you created an action plan with the help of the EAHP Self-Assessment Tool?**

Yes

No

**Please briefly describe the outcome of the discussion that you have had in your hospital (not only pharmacy colleagues) regarding the action plan.**



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Practice-specific questions

**As a learning from the COVID-19 pandemic, have you established pandemic preparedness protocols covering increased demand of medicines/other supplies?**

Yes

No

**Were you involved in the**

(Please tick all options that apply)

- Management of SARS-CoV-2 vaccines (storage/dispensing)
- Preparation of SARS-CoV-2 vaccines
- Administration of SARS-CoV-2 vaccines
- Provision of document or clinical guidance for SARS-CoV-2 vaccines
- None of the above

**Since the implementation of the Falsified Medicines Directive (FMD) on the 9th of February 2019, were any falsified medicines detected in your hospital?**

No

Not applicable

Yes - (please specify approximately how many were detected)

**Did the implementation of the FMD have an impact on the medication handling processes in your hospital (e.g., more time is needed for delivering medicine to the ward/patient due to verification and decommissioning activities)?**

- Yes
- No
- Not applicable

**Please share any problems that are being encountered when verifying/decommissioning.**

**Do you have access to Immunization Information Systems (IIS) in order to perform a careful screening of patients' immunization history and provide appropriate counselling?**

*Definition: Immunization Information Systems (IIS)*

*Immunization information systems (IIS) are confidential, population-based, computerized databases that record all immunization doses administered by participating providers to persons residing within a given geopolitical area.*

- Yes
- No

**Are you involved in formulary management, including procurement, transportation, and proper storage of vaccines?**

- Yes, fully
- Yes, partially
- No

**Are you offering guidance and instructions on the appropriate use of vaccines among healthcare professionals, including developing protocols (e.g., protocols to provide hepatitis B pre-exposure prophylaxis)?**

- Yes
- No

**Are you involved in education and recommendation of appropriate vaccine practices upon hospital admission, during a patient's length of stay, or upon discharge (this includes oral or written recommendations provided via electronic health records)?**

- Yes
- No

**Do you think that there are aspects of pharmacy practice that are wasteful and that specific actions are needed to improve sustainability?** Please tick all options that apply.

- Yes, plastic use could be improved to ensure sustainability
- Yes, electricity use could be improved to ensure sustainability
- Yes, electrical waste recycling or reuse could be improved to ensure sustainability
- Yes, recycling of medicines packaging could be improved to ensure sustainability
- Yes, energy saving activities (e.g. switching off computers/copiers overnight) could be improved to ensure sustainability
- Yes, the appropriate use of personal protective equipment (PPE) could be improved to ensure sustainability
- Yes, ecologically aware pharmacy contracts (e.g. purchasing environmentally friendly medicines) could be improved to ensure sustainability
- No, there are no improvements needed since there are no aspects of pharmacy practice that are wasteful
- I don't know
- Other (please specify)

**Do you feel empowered to make or try any changes that would potentially improve sustainability?**

- Yes
- No
- I don't know.

**If you have ticked yes or no, please clarify why you do feel/do not feel empowered.**

**Do you think there should be a greater focus on sustainability from an organisational or management perspective?**

- Yes
- No
- I don't know

**If you have ticked yes or no, please provide details on why there should/should not be a greater focus on sustainability from an organisational or management perspective.**

**Please provide feedback on the following situations.**

(Please tick one option per line)

	Yes	No	Not applicable	I don't know
The hospital that I work in has processes to record medicines that are disposed of.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The hospital that I work in has processes to monitor and limit disposal of pre-expiry medicines.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The pharmacy that I work in has an appropriate system to re-dispense returned medicines from the ward if their quality is assured.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share your name and e-mail address, if you would like to enter the prize draw to win one of the following items:

- 1 free registration to the EAHP Congress (22 to 24 March 2023)
- 1 seat at the faculty dinner at the EAHP Congress (23 March 2023)
- 1 drink with an EAHP Board member at the EAHP Congress (22 to 24 March 2023)

Name

Email address