



## EAHP Statements of Hospital Pharmacy - 2017

Welcome to the 2017 EAHP Survey on the Statements of Hospital Pharmacy

Dear colleague,

Welcome to the 2017 EAHP Survey!

This is the fourth survey in new line of EAHP surveys, which are associated to European Statements of Hospital Pharmacy.

Following successful completing and evaluation of the Baseline survey and the 2015 and 2016 Statements surveys, this year we start the second round of Surveys that will provide us with opportunity to measure the progress in the Statements' implementation. The 2017 Survey aims to Sections 2, 5 and 6 of European Statements of Hospital Pharmacy.

Data from the survey will help to target EAHP activities more precisely to the most important areas, where the level of Statements' implementation is not sufficient and also to identify most important barriers in implementation efforts. We believe that the results will also be very important and useful for your national associations as well as for the individual hospital pharmacies.

We encourage you to answer the questions openly and genuinely. Privacy is of utmost importance for EAHP. We will only publish summarised reports and/or anonymous examples, without disclosing of individual responses and hospitals/pharmacies.

We kindly ask you to complete the survey whether you participated in past EAHP surveys or not.

Dear colleagues, without your input and help, we cannot be successful in improving our profession and outcomes for the patients. Therefore we kindly ask you to fill in this survey, which should not take more than approximately 30 or 40 minutes.

Your help is highly appreciated.

On behalf of EAHP Board of Directors

Petr Horák

Survey Working Group Chairman

## EAHP Statements of Hospital Pharmacy - 2017

### General questions about hospital activity

The full list of EAHP statements and a glossary of terms can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.

All free-text responses are limited to 200 characters. If you wish to provide a more detailed response, please submit an email to your EAHP national coordinator.

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

- Yes  
 No

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

G2. Is your pharmacy within a general hospital?

- Yes  
 No

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

## EaHP Statements of Hospital Pharmacy - 2017

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#### G2.1 Your hospital is a

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

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G2.2 Is your hospital pharmacy providing a regular service to more than one hospital?

Yes

No

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G2.3 For how many hospitals does your pharmacy provide a service?

- 2-5
- 6-10
- More than 10

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G3. How many beds are served by your pharmacy?

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

G4. Approximately how many pharmacists are employed by your hospital?

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

G5. Approximately how many trainee pharmacists (pre-registration) are employed by your hospital?

- 0
- 1-5 full time equivalents
- 6-10 full time equivalents
- 11-20 full time equivalents
- More than 20 full time equivalents

G6. Approximately how many pharmacy technicians are employed by your hospital?

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

G7. To whom is the pharmacy director responsible?

- 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)

G8. Is your pharmacy involved with the procurement, supply or supervision of medical devices?

- Yes
- No

*Note: If your pharmacy is involved with medical devices then all of the following questions relate to medical devices and medicines unless specified otherwise.*

Section 2: Selection, Procurement and Distribution

**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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Section 2: Selection, Procurement and Distribution

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

**You answered 'No'.**

S2.1.1 What is preventing this?

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- State or regional procurement of medicines
- Absence of quality management system
- Other (please specify)

*\*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?*

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Section 2: Selection, Procurement and Distribution

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**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.**

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

- Yes
- No

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Section 2: Selection, Procurement and Distribution

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

**You answered 'No'.**

S2.1.3 What is preventing this?

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- State or regional procurement of medicines
- Done by non-hospital pharmacists
- Other (please specify)

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Section 2: Selection, Procurement and Distribution

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

**You answered 'Yes'.**

S2.1.4 Which processes were pharmacists involved in?

*Tick all that apply*

- Development of processes
- Criteria for choice of medicine
- Tendering for medicine supply
- Ordering processes
- Other (please specify)

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Section 2: Selection, Procurement and Distribution

**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.

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

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Section 2: Selection, Procurement and Distribution

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**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.**

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

**S2.2.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other professional groups have more influence in the hospital
- Other (please specify)

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Section 2: Selection, Procurement and Distribution

**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 pharmaco-economic evaluations where these are available.**

S2.3 Do you have a formulary in place in your hospital?

Yes

No

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Section 2: Selection, Procurement and Distribution

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**S2.3 Do you have a formulary in place in your hospital?**

**You answered 'No'.**

**S2.3.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- No legal obligation to have a formulary
- Other (please specify)

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

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S2.3.2 The pharmacists in our hospital coordinate the development, maintenance and use of our formulary.

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

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Section 2: Selection, Procurement and Distribution

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**S2.3.2 The pharmacists in our hospital coordinate the development, maintenance and use of our formulary.**

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

**S2.3.3 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- No legal obligation to have a formulary
- Other (please specify)

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

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**S2.3.4 How would you categorise the level of influence your pharmacists have over the formulary?**

- Extensive - my pharmacists influence/run all aspects of the formulary
- Large - my pharmacists influence/run most aspects of the formulary
- Partial - my pharmacists influence/run some aspects of the formulary
- Slightly - my pharmacists influence/run few aspects of the formulary
- None - my pharmacists do NOT influence/run the formulary

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**S2.3.5 What kinds of evidence do you use for development and maintenance of the formulary?**

*Tick all that apply*

- National guidance
- Syntheses of evidence (e.g. Cochrane)
- Summaries of evidence
- Local prescribing committee reviews
- Primary research and clinical trials
- Pharmacoeconomic studies
- Other (please specify)

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Section 2: Selection, Procurement and Distribution

**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 non-formulary medicines in our hospital is done to a robust process.

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

                                                                                      

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Section 2: Selection, Procurement and Distribution

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**S2.4 Procurement of non-formulary 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?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- No legal obligation to have a formulary
- Other (please specify)

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S2.4.2 Has a written complaint ever been made to your hospital about a patient missing a dose of a critical medicine?

Yes

No

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Section 2: Selection, Procurement and Distribution

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S2.4.3 How many of these complaints have you received in the past year?

1-5	6-10	11-20	More than 20
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Section 2: Selection, Procurement and Distribution

**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: Selection, Procurement and Distribution

**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.**

**You answered 'No'.**

**S2.5.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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Section 2: Selection, Procurement and Distribution

**EAHP Statement 2.5**

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

S2.5.2 Have you had reason to contact the medicines authority in your country because of medicines shortages?

Yes

No

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Section 2: Selection, Procurement and Distribution

**EAHP Statement 2.5**

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

**S2.5 Have you had reason to contact the medicines authority in your country because of medicines shortages?**

**You answered 'Yes'.**

**S2.5.3 Was this to:**

*Tick all that apply*

- To inform them of a drug shortage
- To ask them for details about the reasons
- To enquire on likely timeframe for shortage
- Other (please specify)

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Section 2: Selection, Procurement and Distribution

**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.

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

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Section 2: Selection, Procurement and Distribution

**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.**

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

**S2.6.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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Section 2: Selection, Procurement and Distribution

**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.**

**S2.6.2 For which of these do your pharmacies have responsibility? (applies to all medicines, including investigational medicines)**

*Tick all that apply*

- Order/purchase
- Receipt into hospital
- Storage
- Dispensing
- Distribution
- Disposal
- Compounding\*

*\*Pharmacy compounding is the process of preparing personalised medications for patients. This is distinct from 'extemporaneous preparation' where a product is dispensed immediately after preparation and not kept in stock.*

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Section 2: Selection, Procurement and Distribution

**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 Which of these statements are true in your hospital?**

*Tick all that apply*

- We have a policy that allows patients to self-medicate
- Self-medication is allowed on all wards in our hospital
- Medicines brought into the hospital by patients are allowed only with doctor/prescriber consent
- Self administration is documented
- We have no written policy but the patients are allowed to self-medicate
- Self-medication is only allowed for some medicines
- Self-medication is not allowed at all
- Medicines for self-medication are stored separately

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Section 2: Selection, Procurement and Distribution

**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.**

**You indicated that your hospital has a policy that allows patients to self-medicate.**

S2.7.2 Were pharmacists involved in producing this policy?

Yes

No

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Section 2: Selection, Procurement and Distribution

**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.**

**S2.7.2 Were pharmacists involved in producing this policy?**

**You answered 'No'.**

**S2.7.3 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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Section 5: Patient Safety and Quality Assurance

**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.

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

*The full list of EAHP statements can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.*

Section 5: Patient Safety and Quality Assurance

**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.**

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

**S5.2.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- No coordination of this in my hospital
- Fear of medicolegal challenge
- Cultural barriers
- Other (please specify)

*\*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?*

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Section 5: Patient Safety and Quality Assurance

**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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Section 5: Patient Safety and Quality Assurance

**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?**

**You answered 'No'.**

**S5.2.3 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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

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Section 5: Patient Safety and Quality Assurance

**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.**

S5.2.4 In the past three years have you undertaken an audit to identify priorities for improvement in medicines use processes?

- Yes
- No

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Section 5: Patient Safety and Quality Assurance

**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.**

**S5.2.4 In the past three years have you undertaken an audit to identify priorities for improvement in medicines use processes?**

**You answered 'Yes'.**

**S5.2.6 What have you done with the results?**

*Tick all that apply*

- Written a report for the hospital board
- Used to inform an education program for pharmacy staff
- Used to inform an education program for other hospital staff
- Used to revise a hospital policy
- Used to write a new hospital policy
- Used for feedback to my team
- Used for adverse event reporting
- Used for education on regional/national level
- Other (please specify)

The full list of EAHP statements can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.



Section 5: Patient Safety and Quality Assurance

**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.**

**S5.2.4 In the past three years have you undertaken an audit to identify priorities for improvement in medicines use processes?**

**You answered 'No'.**

**S5.2.5 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

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Section 5: Patient Safety and Quality Assurance

**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 Does your hospital have a quality assessment programme?

- Yes
- No

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Section 5: Patient Safety and Quality Assurance

**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 Does your hospital have a quality assessment programme?**

**You answered 'No'.**

**S5.3.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

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Section 5: Patient Safety and Quality Assurance

**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 Does your hospital have a quality assessment programme?**

**You answered 'Yes'.**

S5.3.2 Is this quality assessment programme:

- An internal programme
- An external programme

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Section 5: Patient Safety and Quality Assurance

**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 Does your hospital have a quality assessment programme?**

**You answered 'Yes'.**

S5.3.3 Our hospital acts on these reports to improve the quality and safety of our medicines use processes.

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

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Section 5: Patient Safety and Quality Assurance

**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.**

**S5.3.3 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'**

**S5.3.4 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

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Section 5: Patient Safety and Quality Assurance

**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 Does your hospital have a quality assessment programme?**

**You answered 'Yes'.**

**S5.3.5 For which parts of your service do you use the quality assessment programme?**

*Tick all that apply*

- Ordering procedures
- Dispensing
- Clinical services
- Sterile manufacture
- Non-sterile manufacture/compounding
- Medicines Information service
- Cytotoxic chemotherapy service
- Purchasing and procurement
- Other (please specify)

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Section 5: Patient Safety and Quality Assurance

**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.

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

                      

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Section 5: Patient Safety and Quality Assurance

**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.**

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

**S5.4.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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

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Section 5: Patient Safety and Quality Assurance

**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 Approximately how many adverse drug reactions (e.g. yellow card reports) were reported by each of your pharmacists (on average) last year?

0-5	6-10	11-50	More than 50
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Section 5: Patient Safety and Quality Assurance

**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.**

S5.4.3 Our hospital has a process for reporting adverse drug reactions and the staff report these regularly

This happens never

This happens rarely

This happens sometimes

This happens frequently

This happens always

*The full list of EAHP statements can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.*

Section 5: Patient Safety and Quality Assurance

**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.**

**S5.4.3 Our hospital has a process for reporting adverse drug reactions and the staff report these regularly**

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

**S5.4.4 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

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Section 5: Patient Safety and Quality Assurance

**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.**

S5.4.5 The pharmacists in our hospital report medication errors.

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

              

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Section 5: Patient Safety and Quality Assurance

**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.**

**S5.4.5 The pharmacists in our hospital report medication errors.**

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

**S5.4.6 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

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Section 5: Patient Safety and Quality Assurance

**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.**

S5.4.7 Approximately how many medication errors (e.g. were reported by each of your pharmacists (on average) last year?

0-5

6-10

11-50

More than 50

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Section 5: Patient Safety and Quality Assurance

**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.**

**S5.4.8 What have you done with the results of these medication error reports?**

*Tick all that apply*

- Written a report for the hospital board
- Used to inform an education program for pharmacy staff
- Used to inform an education program for other hospital staff
- Used to revise a hospital policy
- Used to write a new hospital policy
- Used for feedback to my team
- Used for education on regional/national level
- Other (please specify)

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Section 5: Patient Safety and Quality Assurance

**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.

Yes

No

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Section 5: Patient Safety and Quality Assurance

**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.**

**You answered 'No'**

**S5.5.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

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Section 5: Patient Safety and Quality Assurance

**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.

Yes

No

*\* Computer decision support systems are computer applications designed to aid clinicians in making diagnostic and therapeutic decisions in patient care. They can simplify access to data needed to make decisions, provide reminders and prompts at the time of a patient encounter, assist in establishing a diagnosis when prescribing and reviewing medication, and alert clinicians when new patterns in patient data are recognised.*

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Section 5: Patient Safety and Quality Assurance

**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.**

**You answered 'No'**

**S5.5.3 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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

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Section 5: Patient Safety and Quality Assurance

**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.**

**You answered 'Yes'**

**S5.5.4 Our hospital pharmacy uses computerised decision support in:**

*Tick all that apply*

- Clinical pharmacy services
- Compounding
- Cytotoxics
- Parenteral nutrition/aseptic compounding
- Other (please specify)

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Section 5: Patient Safety and Quality Assurance

**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 in the following areas:**

*Tick all that apply*

- Procurement of medicines
- Prescribing of medicines
- Preparing medicines
- Dispensing medicines
- Administration of medicines
- Monitoring of medicines
- Dispensing to outpatients
- None of these
- Other (please specify)

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Section 5: Patient Safety and Quality Assurance

**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 in the following areas:**

**You selected 'None of these'**

**S5.6.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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Section 5: Patient Safety and Quality Assurance

**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.

Yes

No

*\*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 full list of EAHP statements can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.*



Section 5: Patient Safety and Quality Assurance

**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.**

**You answered 'No'.**

**S5.7.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

*\* 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.*

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Section 5: Patient Safety and Quality Assurance

**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.

This happens never	This happens rarely	This happens sometimes	This happens frequently	This happens always	Don't know
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Section 5: Patient Safety and Quality Assurance

**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.**

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

**S5.8.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

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Section 5: Patient Safety and Quality Assurance

**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.**

**S5.8.2 Who audits the information held in patient records/medication charts?**

*Tick all that apply*

- Medication safety pharmacists
- Ward pharmacists
- Clinical pharmacists
- Nurses
- Clinical governance leads
- Doctors
- Other (please specify)

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Section 5: Patient Safety and Quality Assurance

**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.**

**S5.8.3 Have there have been incidents resulting in patient harm that may have been prevented if the pharmacist had been able to access the patient records/medication charts?**

Yes

No

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*All free-text responses are limited to 200 characters. If you wish to provide a more detailed response, please submit an email to your EAHP national coordinator.*

Section 5: Patient Safety and Quality Assurance

**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.**

**S5.8.3 Have there have been incidents resulting in patient harm that may have been prevented if the pharmacist had been able to access the patient records/medication charts?**

**You answered 'Yes'.**

S5.8.4 Please give details

If you require more writing space and would like to elaborate further, you can email a response to [medman@keele.ac.uk](mailto:medman@keele.ac.uk)  
Any personal details will be treated with full confidentiality.

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Section 5: Patient Safety and Quality Assurance

**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.

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

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Section 5: Patient Safety and Quality Assurance

**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.**

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

**S5.9.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Insufficient IT infrastructure
- Other (please specify)

*\*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?*

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Section 5: Patient Safety and Quality Assurance

**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.**

**S5.9.2 Who audits that the information is accessible at the point of care?**

*Tick all that apply*

- Medication safety pharmacists
- Ward pharmacist
- Clinical pharmacists
- Nurses
- Clinical governance leads
- Doctors
- No one, we don't do this
- Other (please specify)

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Section 5: Patient Safety and Quality Assurance

**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.**

**S5.9.3 Have there have been incidents resulting in patient harm that may have been prevented if the information provided at the point of care had been improved?**

Yes

No

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Section 5: Patient Safety and Quality Assurance

**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.**

**S5.9.3 Have there have been incidents resulting in patient harm that may have been prevented if the information provided at the point of care had been improved?**

**You answered 'Yes'.**

S5.9.4 Please give details

If you require more writing space and would like to elaborate further, you can email a response to [medman@keele.ac.uk](mailto:medman@keele.ac.uk)  
Any personal details will be treated with full confidentiality.

*The full list of EAHP statements and a glossary of terms can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.*

*All free-text responses are limited to 200 characters. If you wish to provide a more detailed response, please submit an email to your EAHP national coordinator.*

Section 5: Patient Safety and Quality Assurance

**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

*The full list of EAHP statements can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.*

Section 5: Patient Safety and Quality Assurance

**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.**

**You answered 'No'.**

**S5.10.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

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Section 5: Patient Safety and Quality Assurance

**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.**

S5.10.2 In our hospital, the drugs are dispensed from the pharmacy mainly:

- On patient basis
- For the ward stocks
- Both

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Section 5: Patient Safety and Quality Assurance

**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.**

S5.10.3 Hospital pharmacists are involved in processes of secure stocking and dispensing of drugs on wards, including a policy for LASA\* drugs and regular inspections.

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

                      

*\*Look Alike, Sound Alike drugs*

*The full list of EAHP statements can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.*

Section 5: Patient Safety and Quality Assurance

**EAHP Statement 5.11**

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

S5.11 Which best describes the traceability\* of medicines dispensed by our pharmacy?

- All are traceable at a patient level
- Some are traceable at a patient level
- All are traceable at a ward level
- Some are traceable at a ward level
- None are traceable at any level
- Other (please specify)

*\* Traceability is the ability to track forward the movement through specified stage(s) of the extended supply chain and trace backward the history, application or location of that which is under consideration.*

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Section 5: Patient Safety and Quality Assurance

**EAHP Statement 5.11**

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

**S5.11 Which best describes the traceability\* of medicines dispensed by our pharmacy?**

**You did not answer 'All are traceable at a patient level'**

**S5.11.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

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Section 5: Patient Safety and Quality Assurance

**EAHP Statement 5.11**

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

S5.11.2 For which medicines is traceability most possible?

- Cytotoxic medicines
- Biologic medicines
- Sterile manufactured medicines
- Compounded medicines
- All medicines

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Section 6: Education and Research

**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 European-wide 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.

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

*The full list of EAHP statements can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.*

Section 6: Education and Research

**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 European-wide 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.**

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

**S6.2.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

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Section 6: Education and Research

**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 European-wide competency frameworks to ensure standards of best practice are met.**

**S6.2.2 How do the pharmacists in your hospital demonstrate their competence?**

*Tick all that apply*

- Submission of CPD record as a registration requirement
- Examination or assessment as a registration requirement
- Formal appraisal by line manager
- Informal feedback or one to one from line manager
- Mentoring by colleagues
- None
- Other (please specify)

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Section 6: Education and Research

**EAHP Statement 6.3**

**A European-wide 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.

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

                      

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Section 6: Education and Research

**EAHP Statement 6.3**

**A European-wide 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.**

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

**S6.3.1 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- We are not financially supported to undertake additional training
- Other (please specify)

*\*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?*

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Section 6: Education and Research

**EAHP Statement 6.3**

**A European-wide 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.**

**S6.3.2 What educational opportunities are available to your pharmacists?**

*Tick all that apply*

- Study for post graduate qualification (academic/scientific)
- Specialization programme/s (an training/education programme leading to formal specialization degree in hospital pharmacy or other)
- In-house pharmacy-only educational events
- In-house multidisciplinary educational events (eg Grand Round)
- eLearning
- Journal clubs
- Pharmacy only external courses
- Multidisciplinary external courses
- Other (please specify)

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Section 6: Education and Research

**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.

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

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Section 6: Education and Research

**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.**

S6.4.1 How many external presentations/papers/posters were submitted last year by your pharmacy?

- None
- 1-2
- 3-4
- 5-10
- More than 10

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Section 6: Education and Research

**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.**

S6.4.2 How often are internal presentations given by your pharmacy?

- Never
- Less often than monthly
- Monthly
- Fortnightly
- Weekly

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Section 6: Education and Research

**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.**

**S6.4.3 What are the barriers to being able to publish more often?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*The full list of EAHP statements can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.*

Section 6: Education and Research

**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.**

S6.4.4 Have you or your pharmacists engaged in development of local/national guidelines?

Yes

No

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Section 6: Education and Research

**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 Have you or your pharmacists engaged in development of local/national guidelines?**

**You answered 'No'**

**S6.4.5 What is preventing this?**

*Tick all that apply*

- We are prevented by national policy and/or legislation
- Not considered to be a priority by my managers
- Not considered to be a priority by me
- We would like to do this but we have limited capacity\*
- We would like to do this but we have limited capability\*
- Other (please specify)

*\*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?*

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## EAHP Statements of Hospital Pharmacy - 2017

### General questions about how ready your hospital is to implement the Statements

11. The pharmacists within our hospital are aware of the 44 European Statements for Hospital Pharmacy

Strongly Disagree      Disagree      Neutral      Agree      Strongly Agree






12. The pharmacists within our hospital agree in principle with the Statements

Strongly Disagree      Disagree      Neutral      Agree      Strongly Agree






13. Our hospital has the capability\* to implement all of the Statements now

Strongly Disagree      Disagree      Neutral      Agree      Strongly Agree






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

14. Our hospital has the capacity\* to implement the Statements now

Strongly Disagree      Disagree      Neutral      Agree      Strongly Agree






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

15. My hospital is committed to help the pharmacy department implement the Statements

Strongly Disagree      Disagree      Neutral      Agree      Strongly Agree






16. Our hospital has the confidence to make changes and implement the Statements

Strongly Disagree      Disagree      Neutral      Agree      Strongly Agree






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17. Which three statements are the highest priority for you to implement first?

Tick 3 of the statements below

High priority

- 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.
- 2.2 Hospital pharmacists should take the lead in developing, monitoring, reviewing and improving medicine use processes and the use of medicine related technologies.
- 2.3 Hospital pharmacists should coordinate the development, maintenance and use of a medicines formulary system, which may be local, regional and/or national.
- 2.4 Procurement should be according to the medicine formulary and informed by the formulary selection process.
- 2.5 Each hospital pharmacy should have contingency plans for shortages of medicines that it procures.
- 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.
- 2.7 Hospital pharmacists should be involved in the development of policies regarding the use of medicines brought into the hospital by patients.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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.
- 5.8 Hospital pharmacists should ensure accurate recording of all allergy and other relevant medicine-related information in the patient's health record.
- 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.
- 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
- 5.11 Hospital pharmacists should support and implement systems that allow traceability of all medicines dispensed by the pharmacy.
- 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 EU-wide competency frameworks to ensure standards of best practice are met.
- 6.3 A European-wide 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.
- 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.

The full list of EAHP statements and a glossary of terms can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.

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18. Which three statements might be more challenging to implement?

Tick 3 of the statements below.

- |  | Most<br>challenging   |
|--|-----------------------|
| 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.                                   | <input type="radio"/> |
| 2.2 Hospital pharmacists should take the lead in developing, monitoring, reviewing and improving medicine use processes and the use of medicine related technologies.  | <input type="radio"/> |
| 2.3 Hospital pharmacists should coordinate the development, maintenance and use of a medicines formulary system, which may be local, regional and/or national.   | <input type="radio"/> |
| 2.4 Procurement should be according to the medicine formulary and informed by the formulary selection process.   | <input type="radio"/> |
| 2.5 Each hospital pharmacy should have contingency plans for shortages of medicines that it procures.  | <input type="radio"/> |
| 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.         | <input type="radio"/> |
| 2.7 Hospital pharmacists should be involved in the development of policies regarding the use of medicines brought into the hospital by patients.   | <input type="radio"/> |
| 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.   | <input type="radio"/> |
| 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.                  | <input type="radio"/> |
| 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.  | <input type="radio"/> |
| 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.  | <input type="radio"/> |
| 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.                             | <input type="radio"/> |
| 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.                                     | <input type="radio"/> |
| 5.8 Hospital pharmacists should ensure accurate recording of all allergy and other relevant medicine-related information in the patient's health record.   | <input type="radio"/> |
| 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.  | <input type="radio"/> |
| 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                         | <input type="radio"/> |
| 5.11 Hospital pharmacists should support and implement systems that allow traceability of all medicines dispensed by the pharmacy.   | <input type="radio"/> |
| 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 EU-wide competency frameworks to ensure standards of best practice are met. | <input type="radio"/> |
| 6.3 A European-wide 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.     | <input type="radio"/> |
| 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.                     | <input type="radio"/> |

19. What are the particular challenges in implementing these?

The full list of EAHP statements and a glossary of terms can be found [here](#). Clicking this link will open the statements in a new window, and will not cause you to lose your progress on the survey.

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EAHP Statements of Hospital Pharmacy - 2017

Finished!

Thank you for completing this survey.