

SCALING UP FOR SAFETY: How Virtual Clinical Pharmacy Services helped rural hospitals meet national standards

By Cristen Fleming

Contributing Authors: Lauren Herd, Anna Packer, Brett Chambers & Ged Hawthorn

BACKGROUND

All Australian hospitals are accredited in accordance with the National Safety and Quality Health Service (NSQHS) standards to ensure patient safety and improve health service quality. Rural and remote facilities face challenges in meeting these standards due to workforce and geographical barriers. In 2017, 35 rural and remote facilities in Western NSW Local Health District (WNSWLHD) were audited against NSQHS Standard 4: Medication Safety, with 24 having one or more 'Not Met' core or developmental actions. In 2020, the health district demonstrated virtual clinical pharmacy services (VCPS) at eight facilities were a feasible option to assist sites to achieve medication safety. However, in late 2021 there were still 22 facilities in the region without clinical pharmacy services, with accreditation due June 2022.



VCPS Model of Care

OBJECTIVE

Scale up VCPS to the remaining 22 hospitals and determine if virtual service provision at facilities without an on-site pharmacist impacts compliance with NSQHS standards. Time period: November 2021 – March 2022.

Intervention:

Who: 6 FTE Clinical Pharmacists

What: 29 Facilities, 230 inpatient beds, Inpatients, Emergency, Hospital in the Home

When: Mon- Fri 0800 - 1630

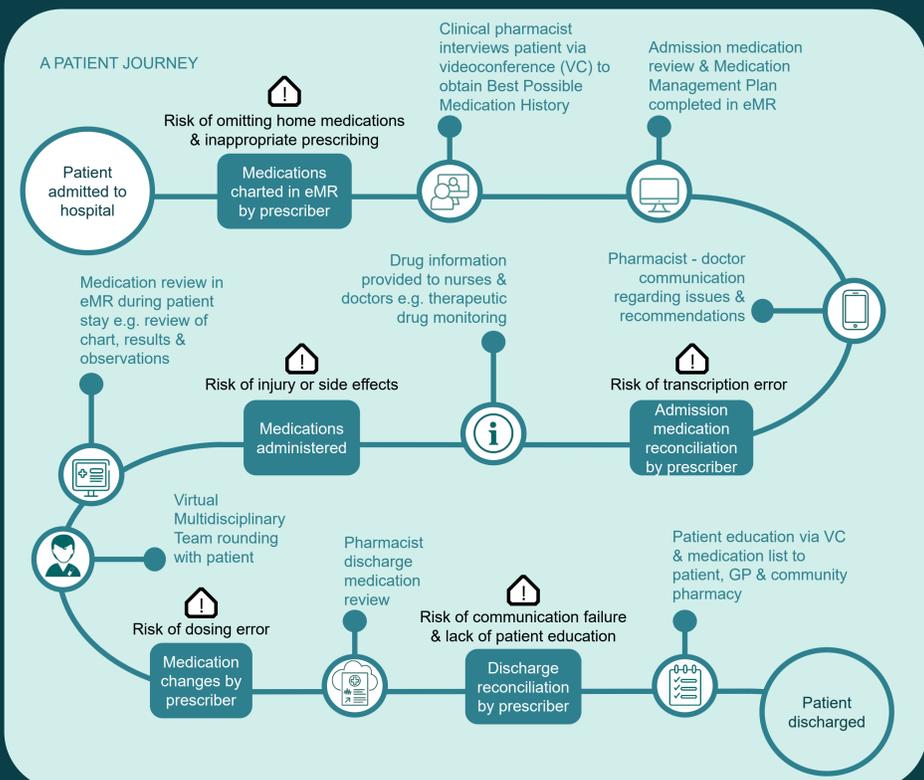
How: Video conference, Electronic medical record (eMR)

Why: Pharmacist involvement in medication management in a hospital setting is a key strategy shown to increase safety. The VCPS model overcomes small patient volume and geographical challenges that preclude onsite services.



METHODS AND DISCUSSION

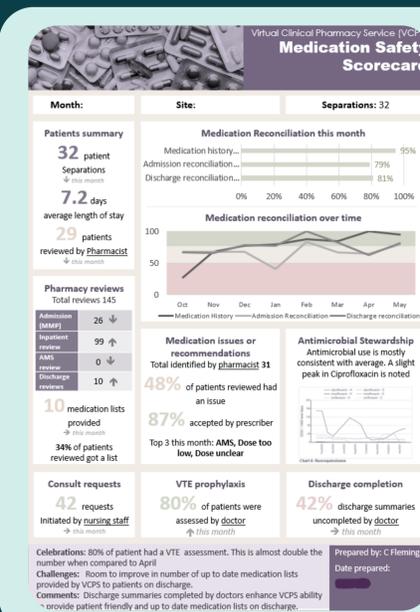
VCPS pharmacists used digital health to provide comprehensive medication management input from admission to discharge as well as contributing to medication safety data to improve local governance.



Pharmacist activities were aligned to NSQHS Medication Safety Standards and improvements fed back to each facility through rounding.

Local site engagement was a critical **success factor** via physical site visits pre-implementation, participation in Multi-Disciplinary Team (MDT) rounds, identification of local champions and collaboration with other virtual teams such as the Virtual Rural Generalist Service.

Example of VCPS Scorecard aligned to NSQHS Medication Safety Standards.



Scorecards were provided to facilities regularly during a rounding (feedback) conversation. Facilities were informed how each of the activities below assisted them to meet safety standards.

- *Provision of scorecard meets Standard 4 action 4.2:* Review, measure and assess the effectiveness and performance of medication management strategies and practices.
 - *Medication history and reconciliation activities meet Standard 4 actions 4.5, 4.6 and 4.7:* Clinicians take a best possible medication history and review a patient's current medication orders.
 - *Inpatient reviews meet Standard 4 action 4.10:* Conduct evidence-based medication reviews on existing and newly prescribed medicines to optimise therapy for patients. Document any recommendations and action taken as a result of a medication review.
 - *Provision of patient friendly medication lists meet Standard 4 actions 4.11 and 4.12:* Providing medicine-related information and a medicines list.
 - *Review of antimicrobial usage meets Standard 3 actions 3.16.*
 - *Discharge review and discharge summary completion meets Standard 4 actions 4.10, 4.11 and 4.12.*
 - *Completion of a VTE assessment meets ACSQHC Venous Thromboembolism Prevention Clinical Care Standard.*
- VCPS pharmacists also conducted regular audits such as Antimicrobial Stewardship, psychotropics and hypoglycaemia.

Opportunities

- Establish new MDT rounds to increase engagement at some facilities.
- Exploring new models to improve discharge review and patient lists.
- Flexible work arrangements to overcome staffing issues.
- Convert scorecard into an online medication safety dashboard available across the whole LHD.
- Address Wi-Fi blackspots in hospitals.



CONCLUSIONS

As of April 2022, no matter which hospital a patient presents to in WNSWLHD, they will have access to high quality clinical pharmacy services. The VCPS has now implemented systems and activities at 29 health facilities to reduce the occurrence of medication incidents, and improve the safety and quality of medicines use. As a result, all actions within Standard 4: Medication Safety were met in the 2022 Accreditation assessment against NSQHS Standards.

Assessors commended the innovative approach to providing comprehensive clinical pharmacy services across the vast area covered by WNSWLHD. Benefits described include improved multidisciplinary care; high patient acceptability; high staff acceptability; greatly increased medication reconciliation completion; increased quality use of medicines; increased staff education; increased pharmacy reviews; and increased AMS discussions.



Western NSW
Local Health District

Contact Details

Name: Cristen Fleming (Virtual Clinical Pharmacist)
Phone: 0457114576
Email: Cristen.Fleming@health.nsw.gov.au