Assessing the Impact and Feasibility of Pharmacist Attendance on Post-Take Ward Rounds

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Background:

Benefits of pharmacist attendance on ward rounds include:
- Early input to prescribing decisions and medication plans¹,²
- Improved appropriateness of prescribing³,⁴
- Improved completeness of medication histories¹
- Reduced incidence of medication errors¹
- Positive impact on patient care⁵

Aim:

To assess the impact and feasibility of pharmacist attendance on Post-Take Ward Rounds (PTWRs) in Internal Medicine.

Methods:

Advanced level pharmacists attended PTWRs over a 7 week period. Data was collected on the number of ward rounds attended, average time spent on the round and per patient, and number and type of interventions/recommendations made by the pharmacist. Feedback was sought from pharmacists and medical staff on their perceptions of the service.

Results:

Results – Intervention breakdown:

<table>
<thead>
<tr>
<th>Number and type of Interventions/recommendations</th>
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<tbody>
<tr>
<td>Total No. Interventions/recommendations</td>
</tr>
<tr>
<td>Average interventions per PTWR</td>
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<tr>
<td>Average interventions per patient</td>
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</table>

Results – Medical staff feedback:

“‘I think having a pharmacist on the PTWR has many benefits including safety” – Consultant

Benefits of having pharmacist on PTWR from doctors’ perspective

- Identifies potential medication related side effects
- Provides medication advice eg doses, availability, therapeutic options
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- Valuable learning experience
- Improves patients’ safety

Results – Pharmacist feedback:

Survey responses from PTWR pharmacists (7/7 respondents=100%)

Survey responses from team pharmacists (8/8 respondents=100%)

Conclusion:

This study demonstrates the benefits of pharmacist attendance on PTWRs with many interventions/recommendations made at the point of prescribing. Medical staff and pharmacists perceived the service had a positive impact on patient care and team rapport and improved communication regarding medications. Pharmacist time commitment to attend PTWRs was identified as a key barrier to continuation of the service, however, the service has continued through use of pooled departmental resources.

6. McKee A, Lamph M, Putland T, Hemsley A, Cottrell N. A key barrier to continuation of the service, however, the service has continued through use of pooled departmental resources.