

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 plans^{1,2}
- Improved appropriateness of prescribing^{3,4}
- 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:

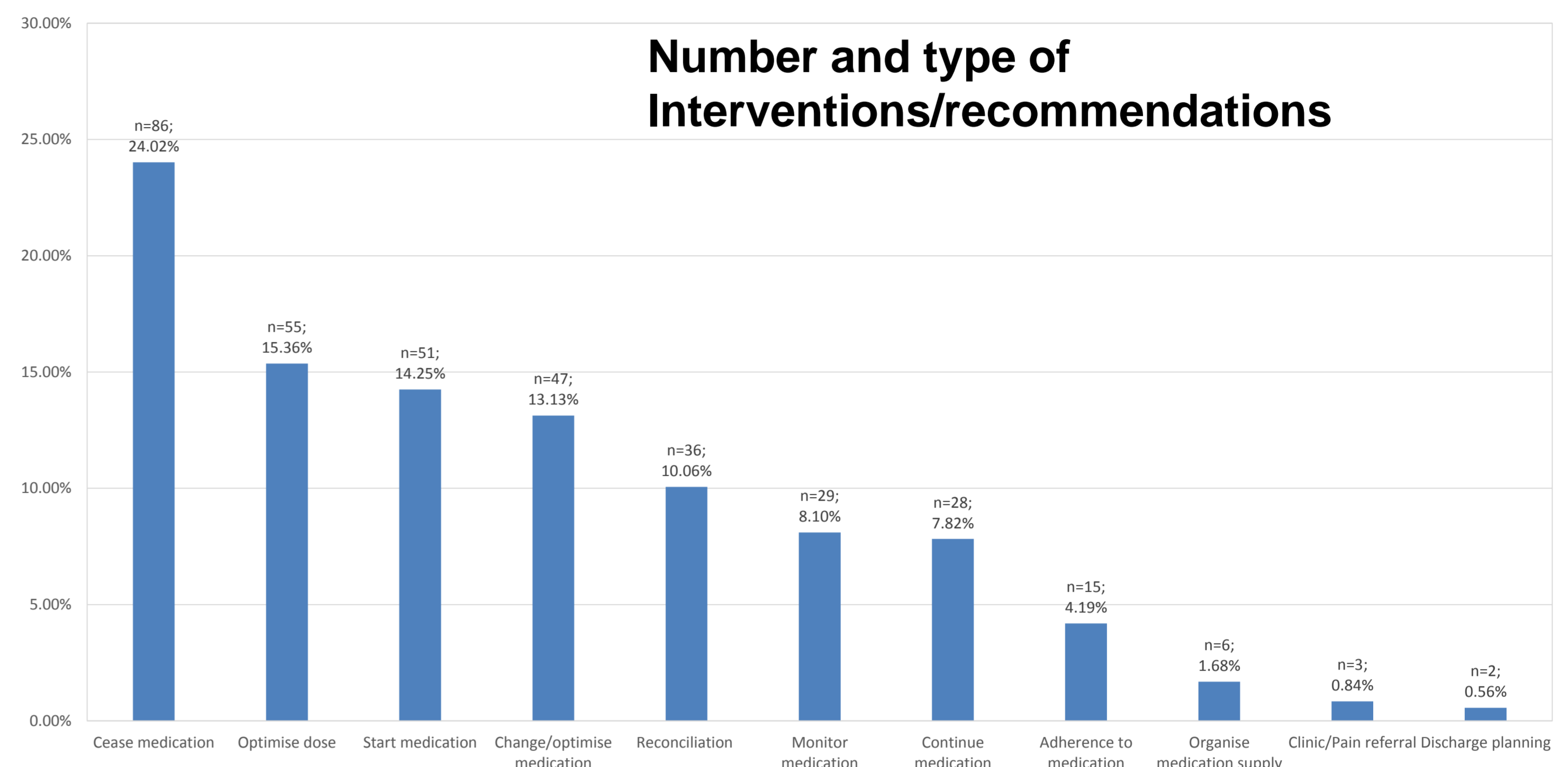
Advanced level pharmacists attended PTWRs over a 7 week period. Data was collected on the number of ward rounds attended, average time spent on the round and per patient, and number and type of interventions/recommendations made by the pharmacist. Feedback was sought from pharmacists and medical staff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

Results:

Total no. PTWRs attended in 7 week period	26
Total no. patients reviewed on PTWR in 7 week period	161
Average no. patients reviewed per PTWR	6
Average time spent per patient	23 minutes
Average time spent on each PTWR	2.8 hours/PTWR 14 hours/week
No. of patients with pre-completed Medication Action Plan	39%
Average time to handover to team pharmacist	15 minutes

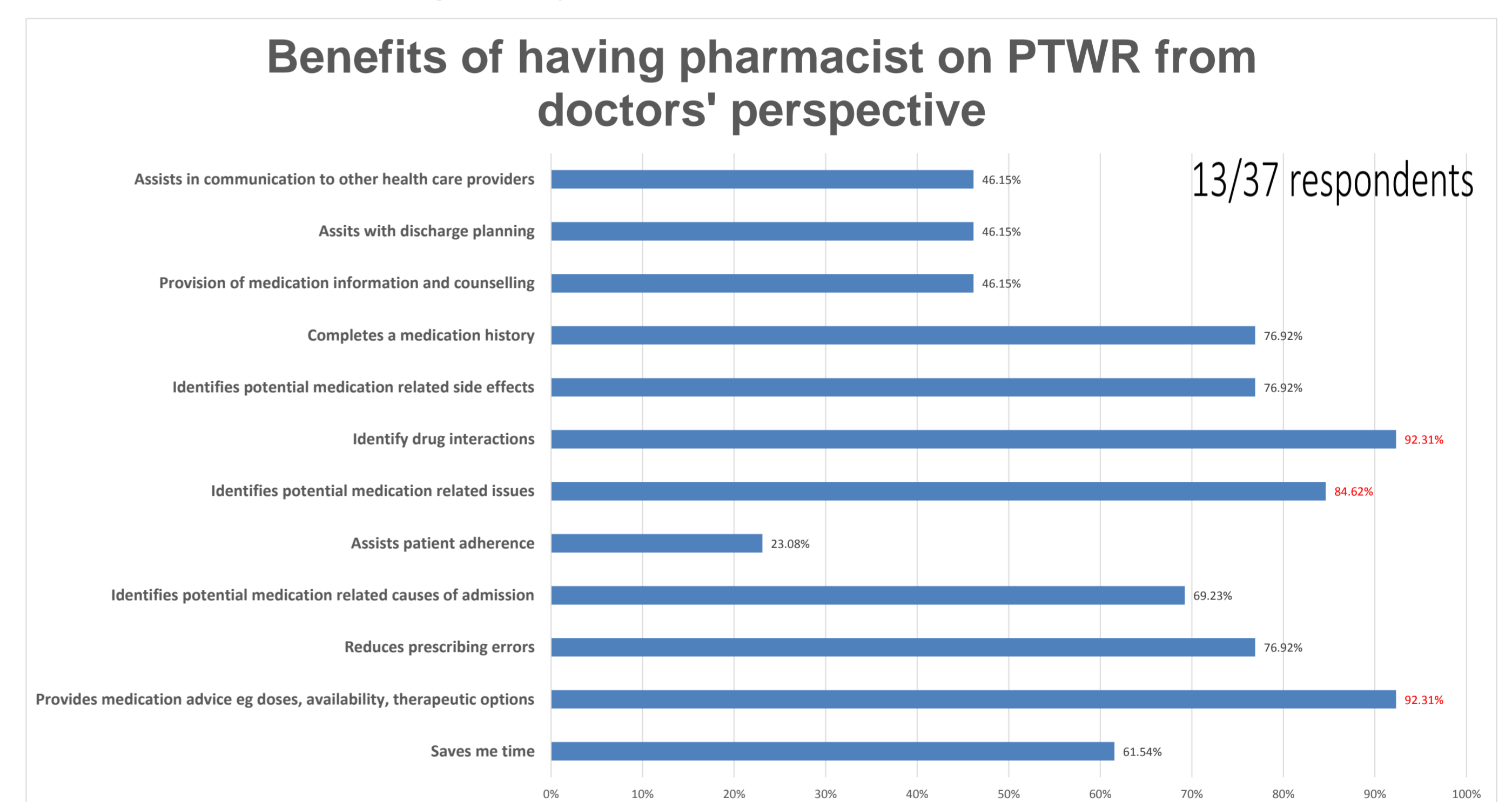
Total No. interventions/recommendations	358
Average interventions per PTWR	14
Average interventions per patient	2

Results – Intervention breakdown:



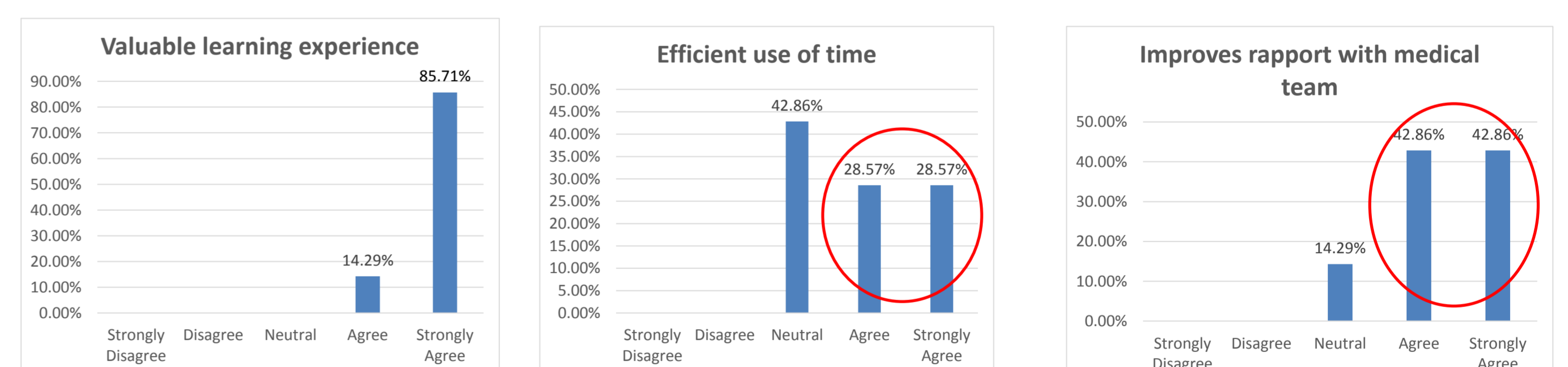
Results – Medical staff feedback:

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

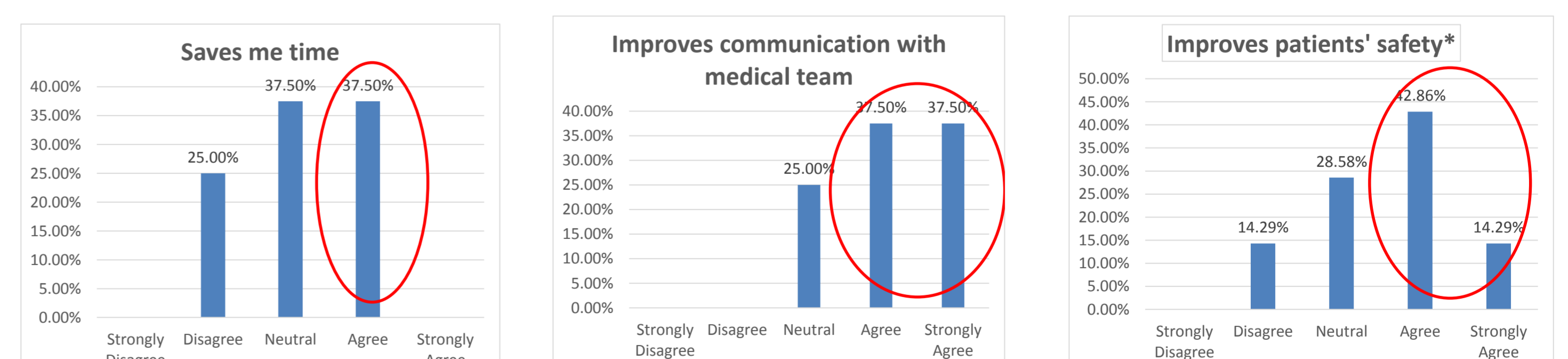


Results – Pharmacist feedback:

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.

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