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To identify drivers of success for sites involved in the Scottish Patient Safety Programme—Pharmacy in Primary Care Collaborative.

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Background

NSAIDs have been identified as high-risk medicines associated with preventable adverse drug events, especially in elderly patients. Different quality improvement approaches and interventions have been used to minimise their impact.

Objectives

To understand the pharmacy team's journey in two NHS boards (NHS Highland and NHS Greater Glasgow and Clyde) with respect to the Scottish Patient Safety Programme (SPSP) in primary care, and to examine the contributing factors to success as well as challenges related to implementing the NSAIDs care bundle.

Methods

A mixed-method approach was employed so as to gain an insight into how the NSAIDs care bundle was implemented and to illustrate the intervention with a process map. The baseline questionnaire of high-risk medicine interventions for 17 community pharmacies attending an initial local learning event in each board was evaluated, and a semi-structured one-to-one interview with one community pharmacy from each board was conducted and analysed using a thematic content analysis.

Results

The questionnaire analysis revealed that both NHS GG&C and NHS Highland participants share the same belief in terms of their general attitude towards HRM, time availability, working with patients, and HRM intervention in the pharmacy, whereas teamwork (Q24: median=5, IQR 2.75-5) and participants' knowledge (Q26: median=6, IQR 4-6) of HRM in Highland pharmacies were reported as better than those of Glasgow pharmacies' participants. The intervention was associated with successful outcomes such as raising patient safety awareness and improved communications, whereas workloads, applicability of the intervention, and responses of patients and healthcare professionals were challenges that confronted community pharmacies. Furthermore, staff experience, leadership, teamwork and collaboration, as well as good communication were all factors that contributed to overcoming the challenges.

Conclusion

This study has identified key factors from the NHS Highland and NHS GG&C experience which should be considered in developing and disseminating patient safety and quality improvement programme nationally and internationally.

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