



AN RIALTÓIR CÓGAISÍOCHTA  
THE PHARMACY REGULATOR

# PSI Report on the Pilot of the Pharmacy Assessment System and the accompanying Guide

June 2017

## 1. Introduction

As part of its function as the pharmacy regulator, The Pharmaceutical Society of Ireland (PSI) is empowered under the Pharmacy Act 2007 to conduct inspections of registered pharmacies (community/retail and hospital) for the purposes of assessing compliance with the Pharmacy Act 2007 and with other pharmacy and medicines legislation and guidelines. In May 2015 the Council of the PSI agreed to update the policy approach for routine pharmacy inspections, to include a Self-Audit for pharmacies (now referred to as the Pharmacy Assessment System).

The Pharmacy Assessment System together with a Guide to completing the Pharmacy Assessment System have been developed by the PSI, following engagement with pharmacists, pharmacy owners and other key stakeholders. The Assessment is intended to be a practical tool to allow the supervising pharmacist to reflect on their pharmacy's practice and to identify areas where improvement may be needed in the pharmacy.

### 1.1 About the Pilot

Having developed the draft Pharmacy Assessment System and a guide to accompany it, we decided to conduct a pilot among pharmacies to trial its use and to gather feedback, before its wider roll-out among all registered pharmacies.

Invitation to participate in the pilot was made by way of email to all supervising pharmacists on 20 January 2016. 269 (14.3% of RPBs)<sup>1</sup> volunteered to participate in the pilot which ran for two months from 19 February 2016 to 22 April 2016.

Pilot participants were provided with both a hard copy and an electronic (editable) version of the draft Assessment and the accompanying Guide.

Pilot participants were asked to:

- Review the Guide to Completing the PSI Pharmacy Assessment System
- Complete the PSI Pharmacy Assessment System (participants were not requested to return the completed assessment to the PSI)
- Provide feedback on both the Pharmacy Assessment System and the Guide through an online survey.

Two reminder emails were sent during the pilot period, on 8 April and 19 April 2016, to encourage participation.

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<sup>1</sup> Total Retail Pharmacy Businesses (RPBs) (as on 1/2/2016) was 1880

## 1.2 Response to the Pilot

A total of 178 responses were submitted to the pilot through the online survey. It was noted that 162 of 178 responses were fully completed. In 2 of 178 cases the responses provided were partially completed. In these cases, the answers which were provided were included in the overall results analysis. The remaining 14 of 178 responses were either duplicated responses, or blank responses (which included respondent details only). These blank and duplicate responses were not included in the results analysis. The total number of responses to the survey was therefore 164 of 269 or 61% of pilot participants.

In addition to the online survey, a number of email submissions and collated responses were received from respondents.

## 1.3 About this Report

This report presents the responses received from each of the online survey questions in chart/graph format throughout. Where additional comments were requested for certain questions (Q8 to Q18 and Q22, Q23 and Q25), the responses are summarised under each of the corresponding questions.

The email submissions and collated responses are incorporated within the summarised comments in Question 25.

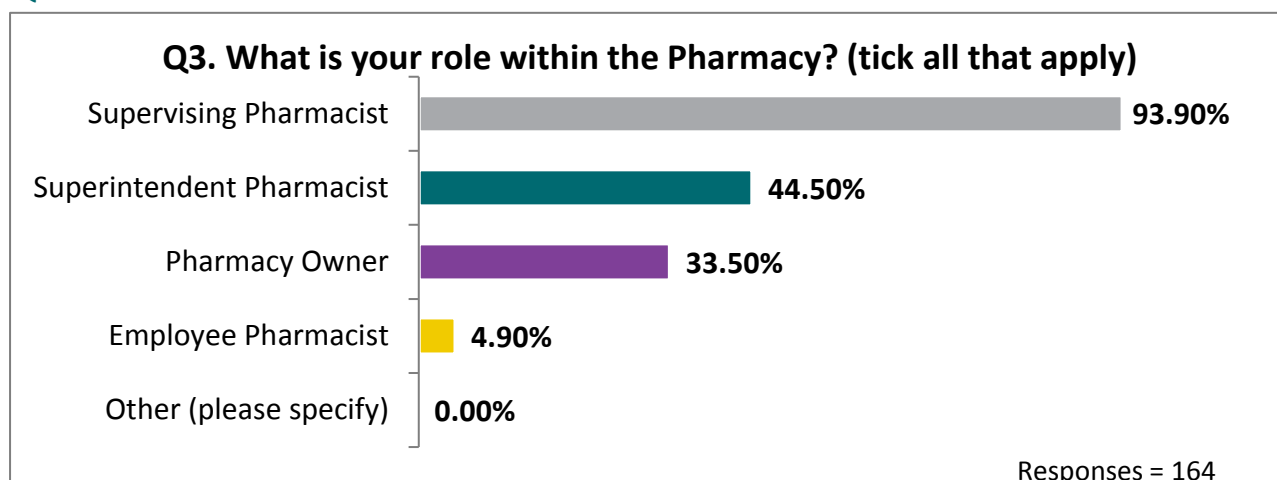
## 2. Summary of Submissions

### Pilot Participants' Profile

#### Question 1 and 2:

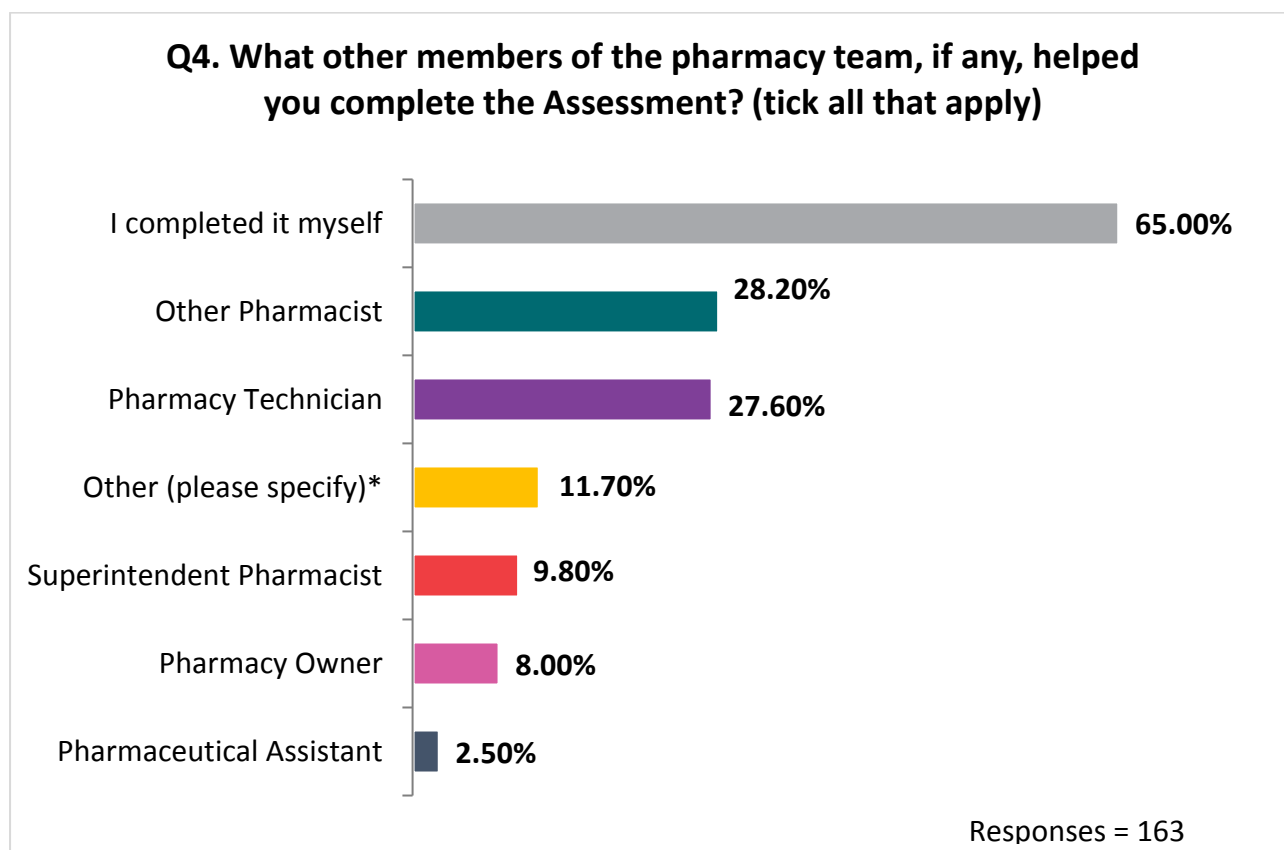
Pilot participants (164 in total) were asked to provide their details. These included the name and registration number of the pharmacy and the name and registration number of the pharmacist providing the response.

#### Question 3:



Respondents were given the option to select multiple boxes according to dual or multiple roles held by them.

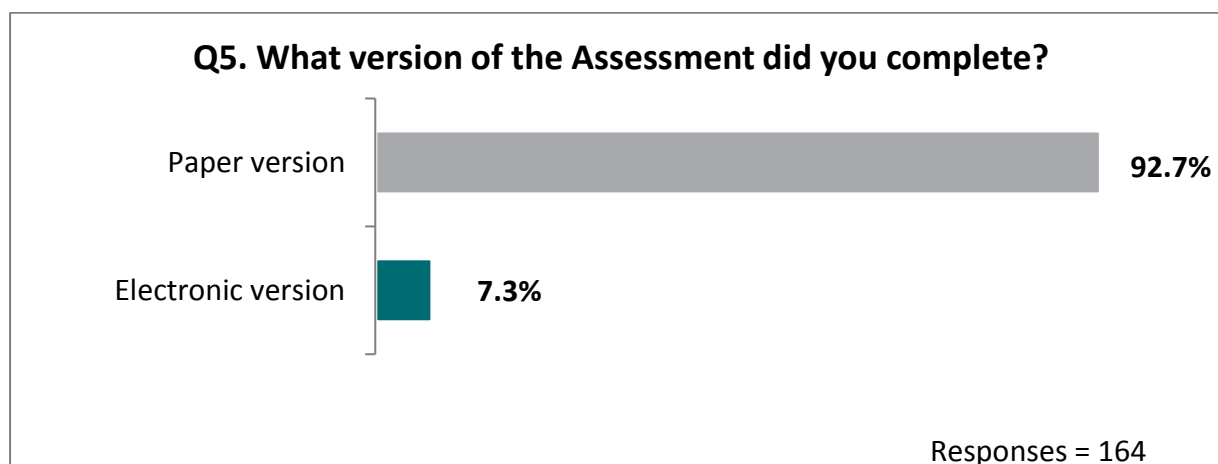
## Question 4:



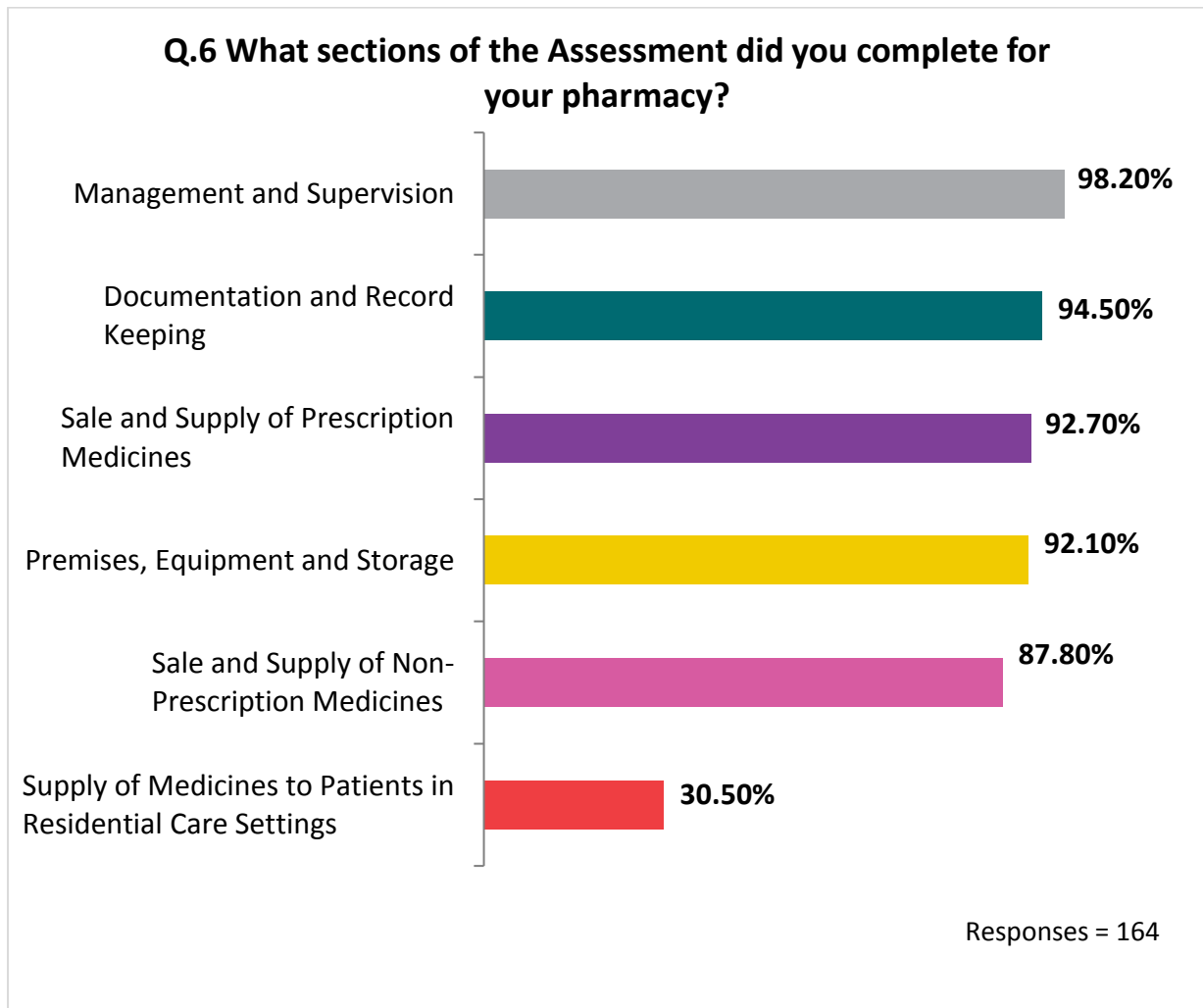
\*'Other' members of the pharmacy team listed were 1) OTC counter assistant / Front of Counter Staff, 2) Pharmacy Intern, 3) All members of the Pharmacy Team, 4) Pharmacy Student, 5) Transition Year Student (check lists off), 8) Dispenser, 9) Clinical Governance Pharmacist, 10) Pharmacy Dispensary Manager, 11) Manager.

### Completion of the Assessment

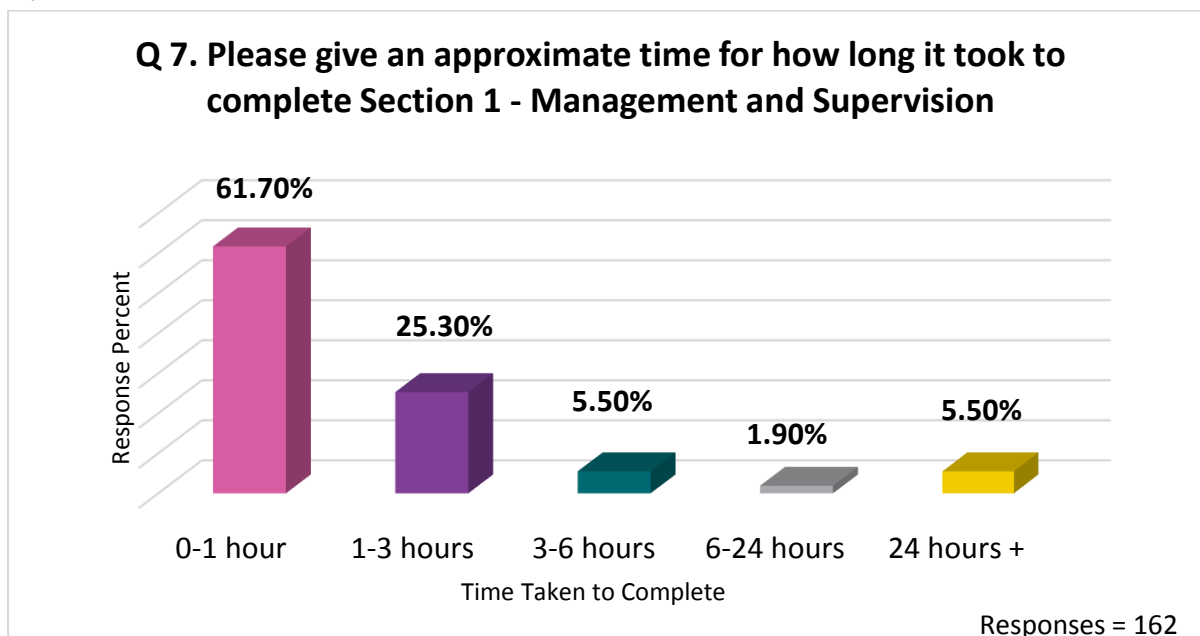
## Question 5:

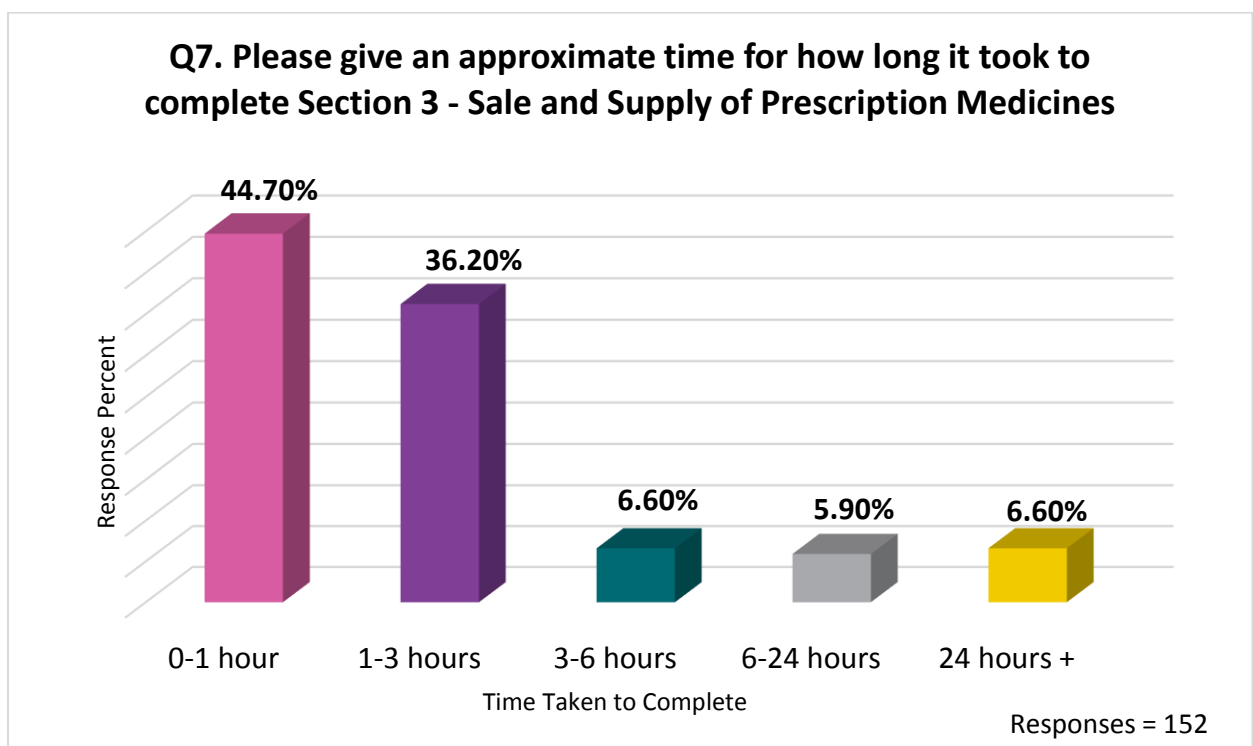
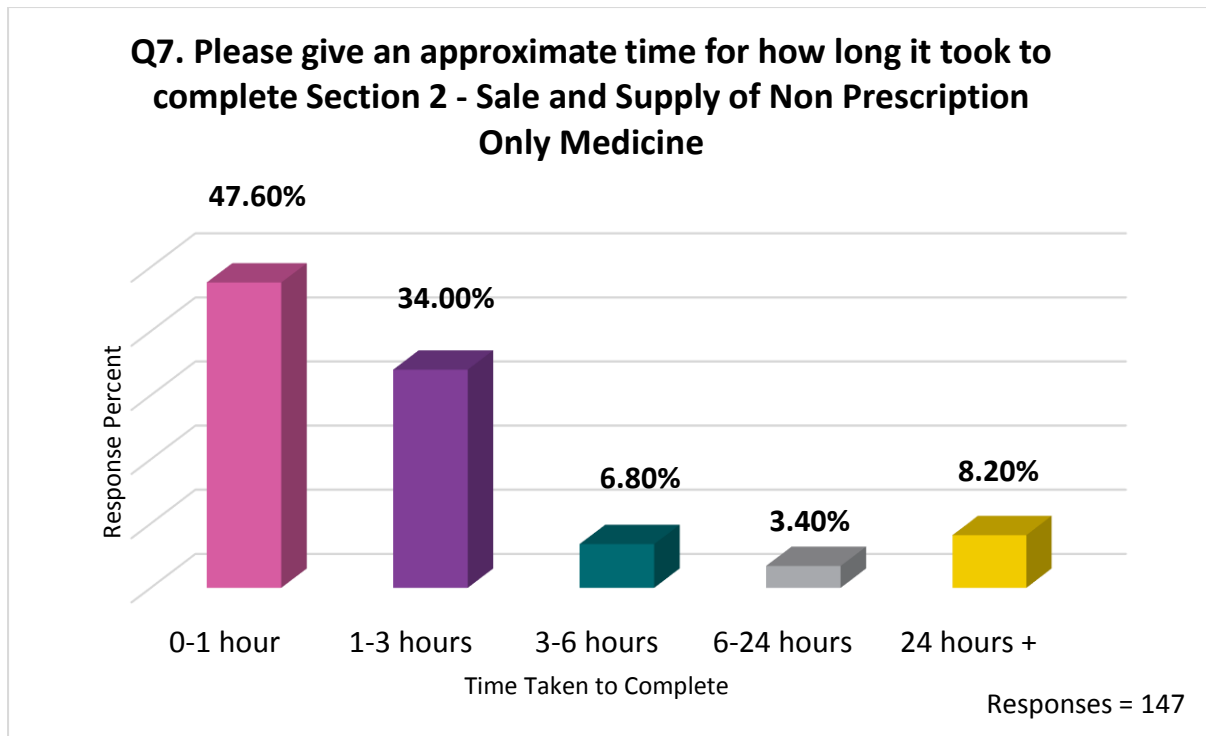


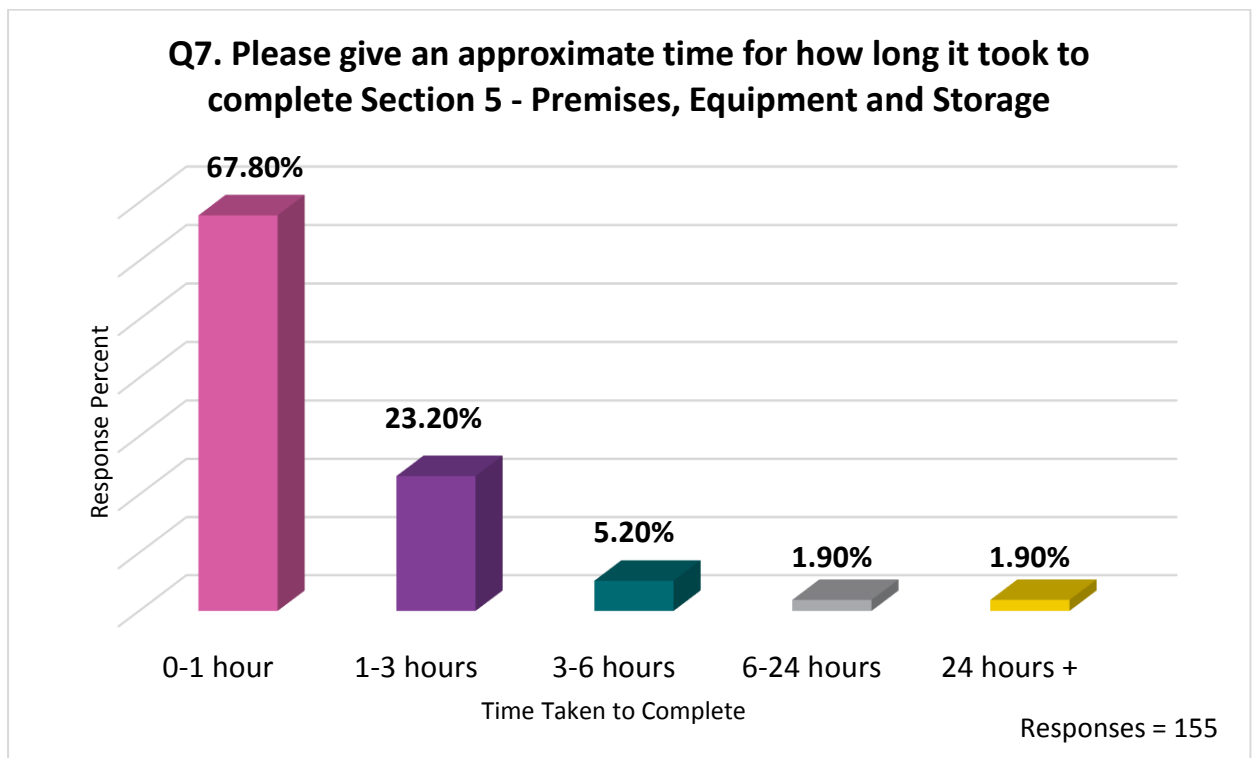
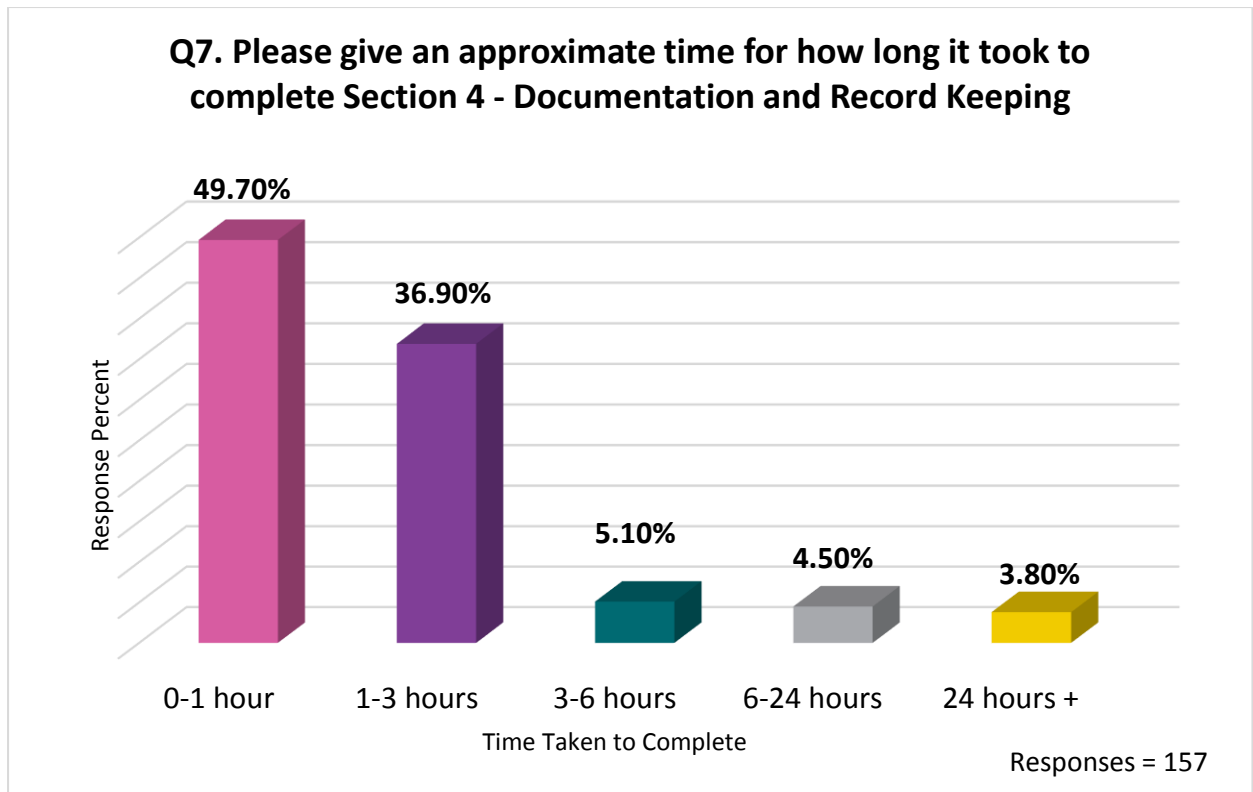
Question 6:

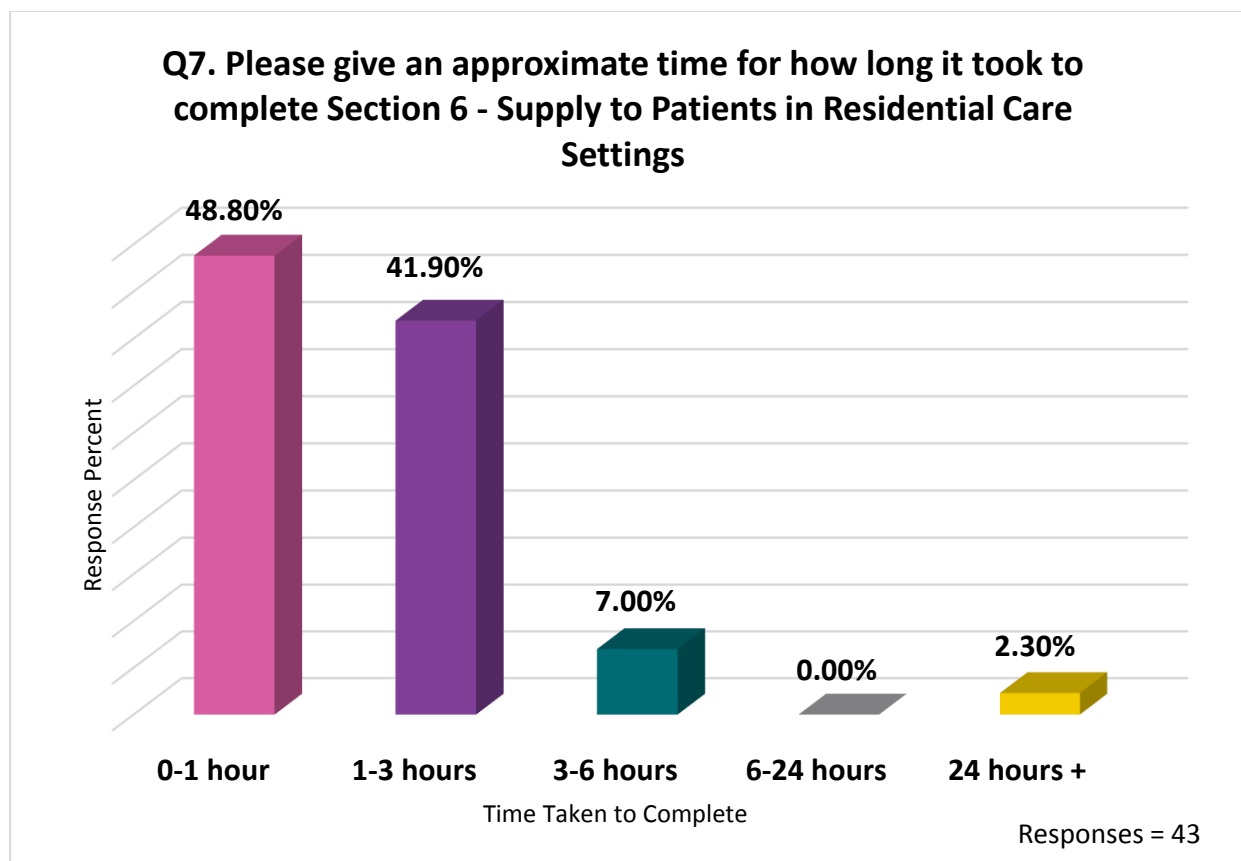


Question 7:

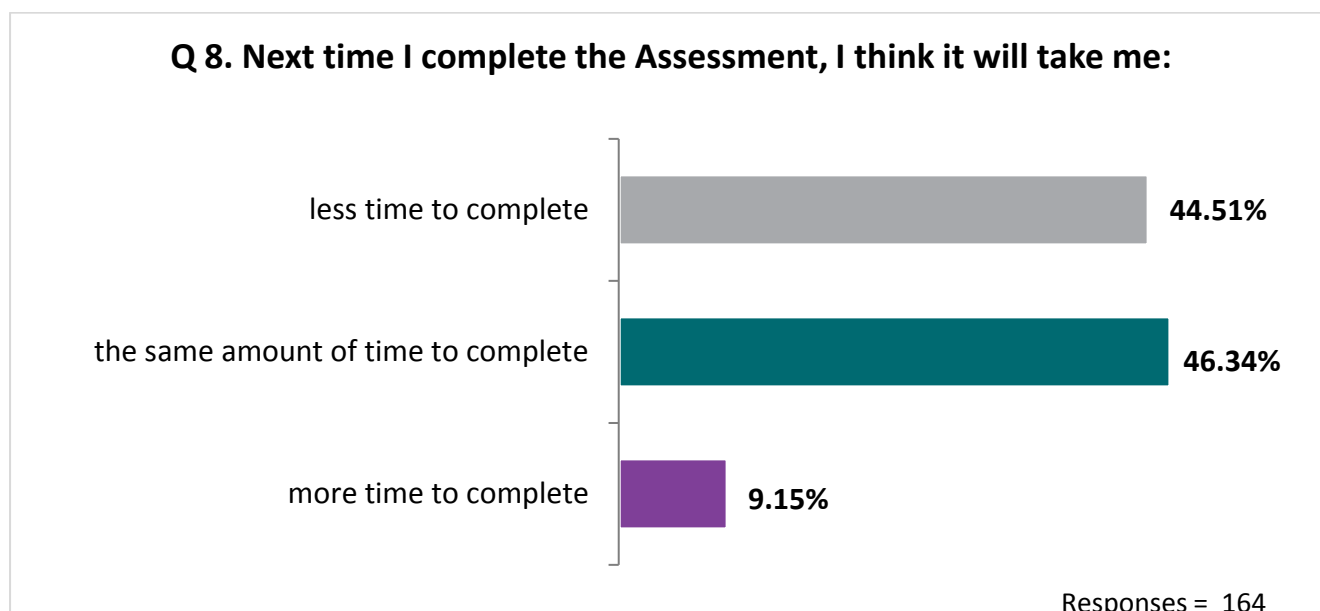








**Question 8:**



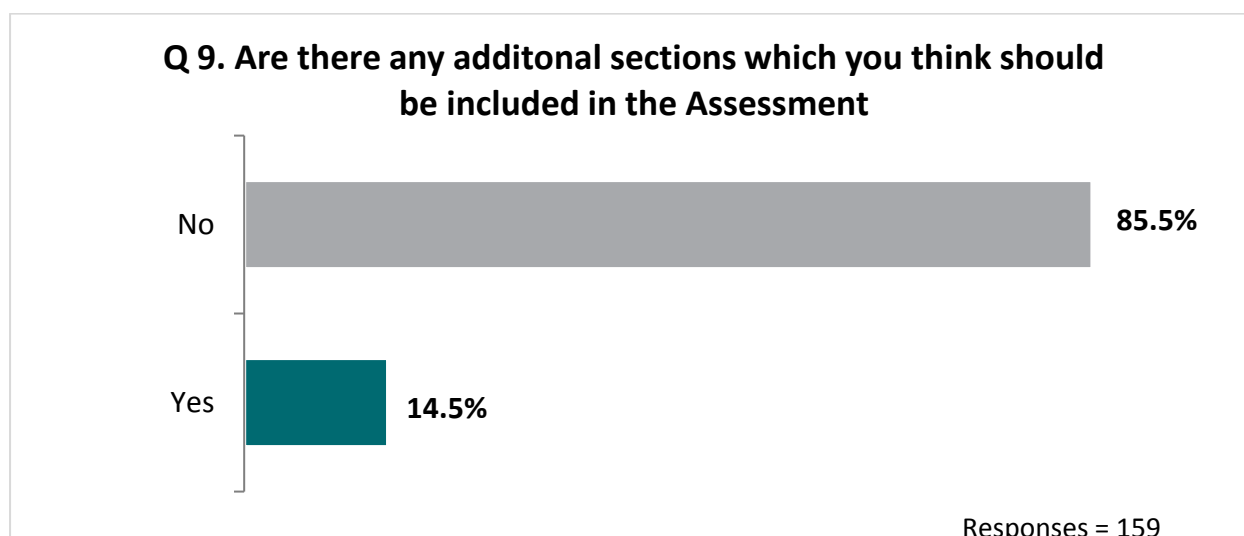


### Additional Comments Received:

Pilot participants were invited to provide additional comments about the time they expected it would take them to complete the Assessment a second time. Sixty eight (68) comments were received and are summarised below:

- In general, it was felt that it will take less time as the process will be more familiar (layout and content), the information will be more readily available and more sections could be delegated to other staff members. It was also indicated that it will take less time as compliance should have increased since the previous Assessment.
- It was indicated that it would take less time if the Assessment was completed more frequently, three or four times a year but would take longer if not.
- In some cases it was suggested that it will take the same amount of time to complete due to the time involved in reviewing the sale and supply of the non-prescription and prescription medicines. In addition, it was suggested that the previous Assessment will also be reviewed alongside the second Assessment.
- Times may vary, depending on who completed it. It was felt that it will take less time if the same person is completing it, but the same time if a new person is completing it.

### Question 9:



### Additional Comments Received:

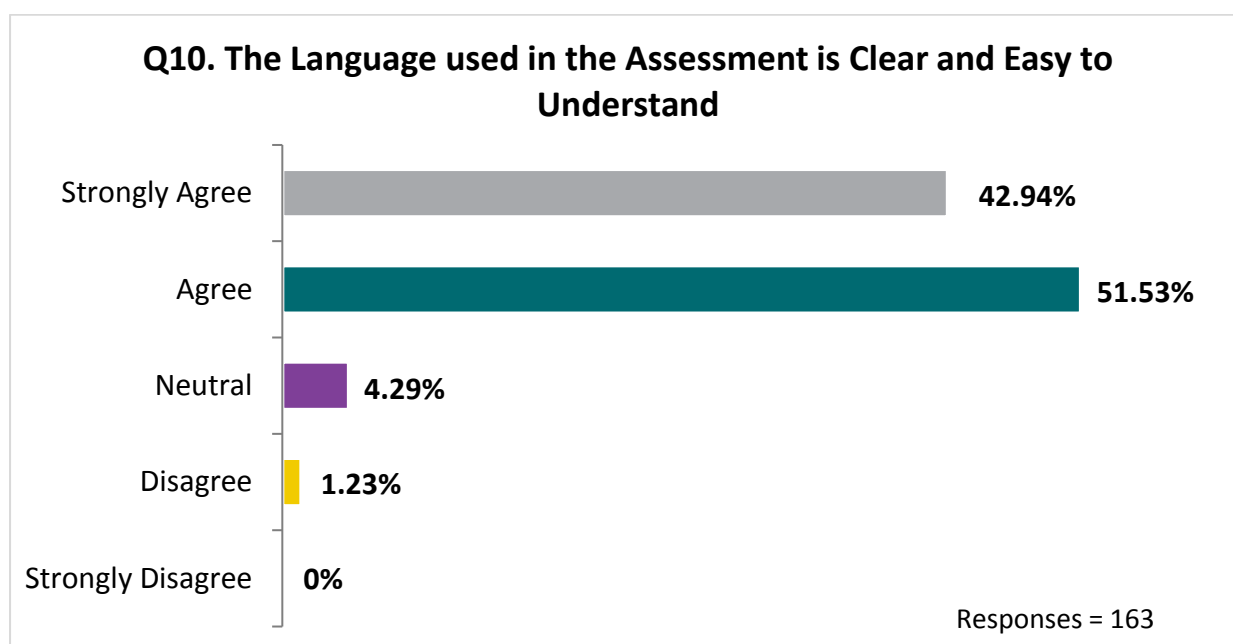
Pilot participants were invited to list additional sections which they felt should be included in the Assessment. Thirty-three (33) suggestions were received.

Some respondents felt that the Assessment, in its current presentation, was comprehensive enough. The most significant number of comments suggested that an additional services section, for example flu vaccination, emergency hormonal contraception, veterinary and

supply of methadone, should be included. Other additional sections that were suggested are outlined below:

- Use of the patient consultation area.
- A section for the directors/owners to review the procedures and processes in place
- Clinical evaluation.
- A section to be completed by each staff member.
- Other areas that are assessed by the PSI inspectors if not included already.
- Patient counselling, clinical review, sourcing of medicines.
- Review of historical prescription i.e. older than 2- 4 weeks.
- Include something related to continued professional development.
- Final section with a checklist of the main findings (top 20 failings would be useful) that the inspectorate has found during inspections.
- Hospital pharmacy services.
- Log of activity levels, dispensing and clinical.
- Dispensing.

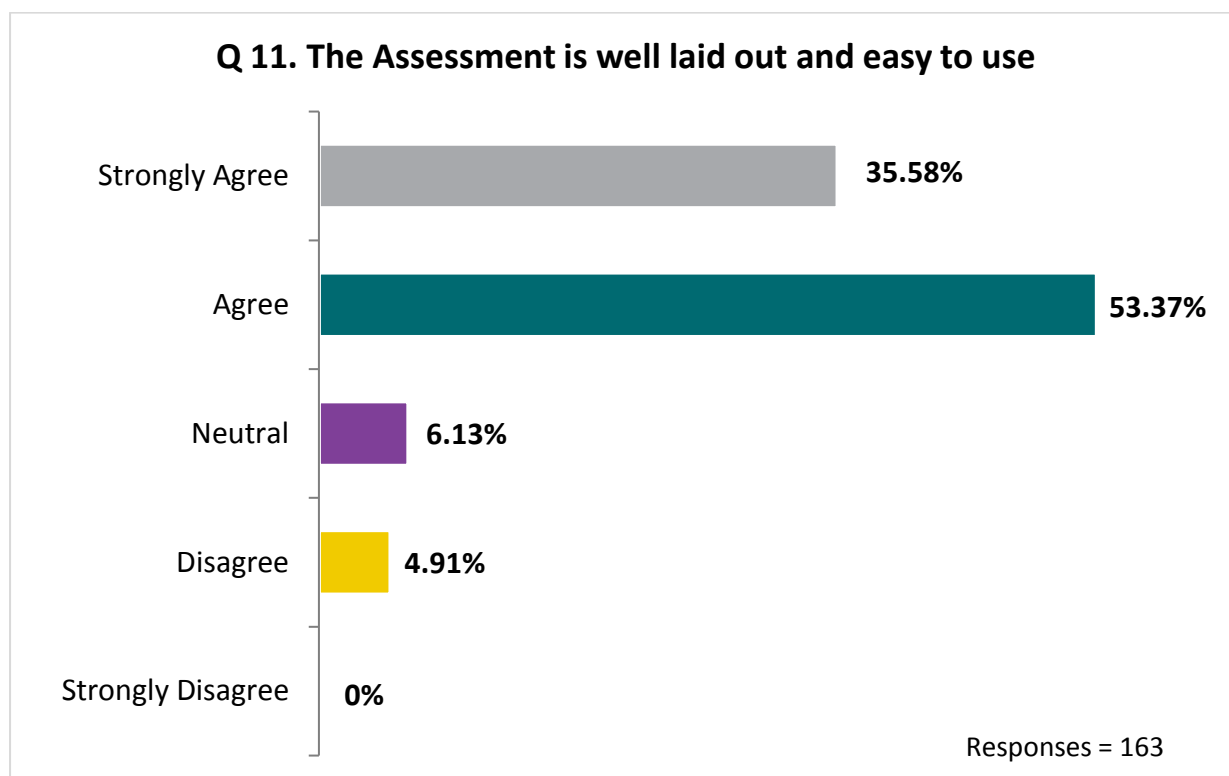
#### Question 10:



#### Additional Comments Received:

Pilot participants were invited to provide additional comments on the language used in the Assessment. Eleven (11) comments were received.

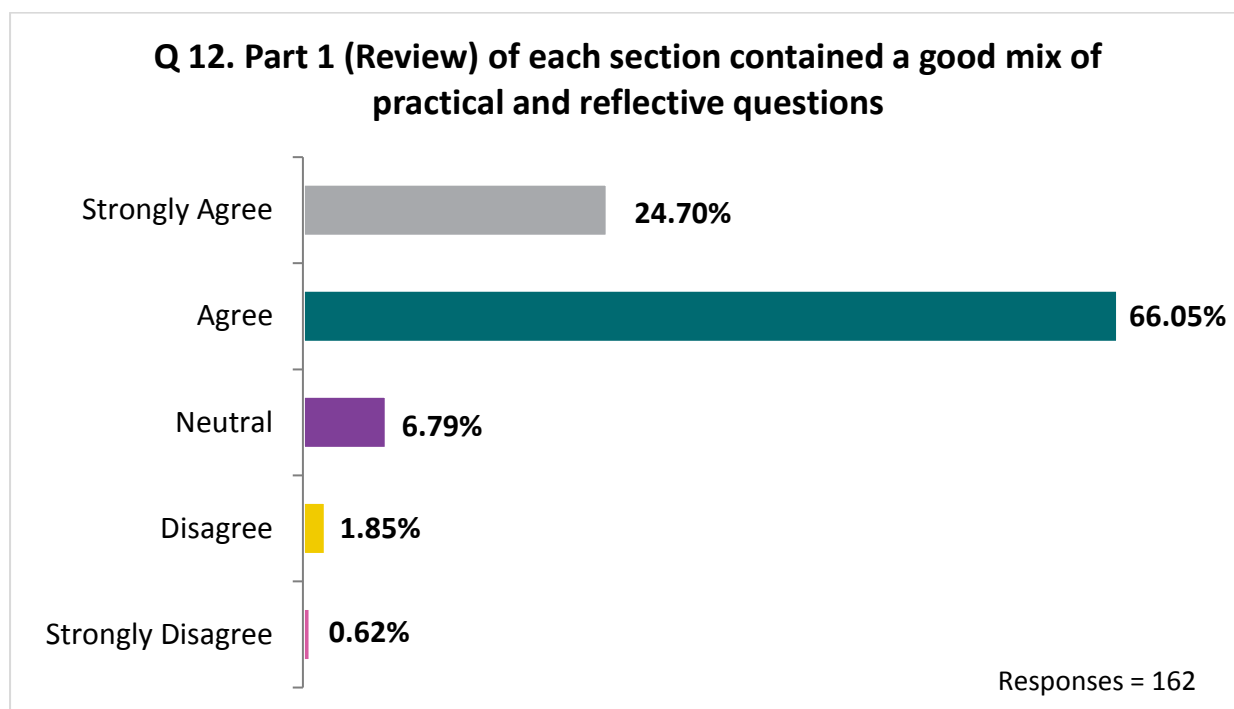
It was suggested by some respondents that overall the questions were clear, concise and easy to understand. However, others suggested that the language was unclear, for example that the subjective questions could be difficult to interpret. Further clarification was also requested on certain questions.

**Question 11:****Additional Comments Received:**

Pilot participants were invited to provide additional comments on the layout and ease of use of the Assessment. Twenty four (24) comments were received and are summarised below:

- In general it was suggested that the Assessment is user friendly, easy to follow and divided into clearly defined sections.
- It was commented that some sections could be formatted better, and that there was repetition in places.
- It was also suggested that more colour could be used.
- Some respondents would have preferred a checklist style Assessment.
- It was felt that the booklet layout provided limited space to record details.
- Some respondents indicated that they would prefer a single orientation layout.
- It was suggested that additional space should be available at the end of each section to record additional comments.
- It was indicated that the layout was designed for larger pharmacies, and that there was no recognition that the supervising and superintendent are often the same person.
- Having regard to the electronic (editable PDF) version, it was indicated that the input fields for some answers were too small.

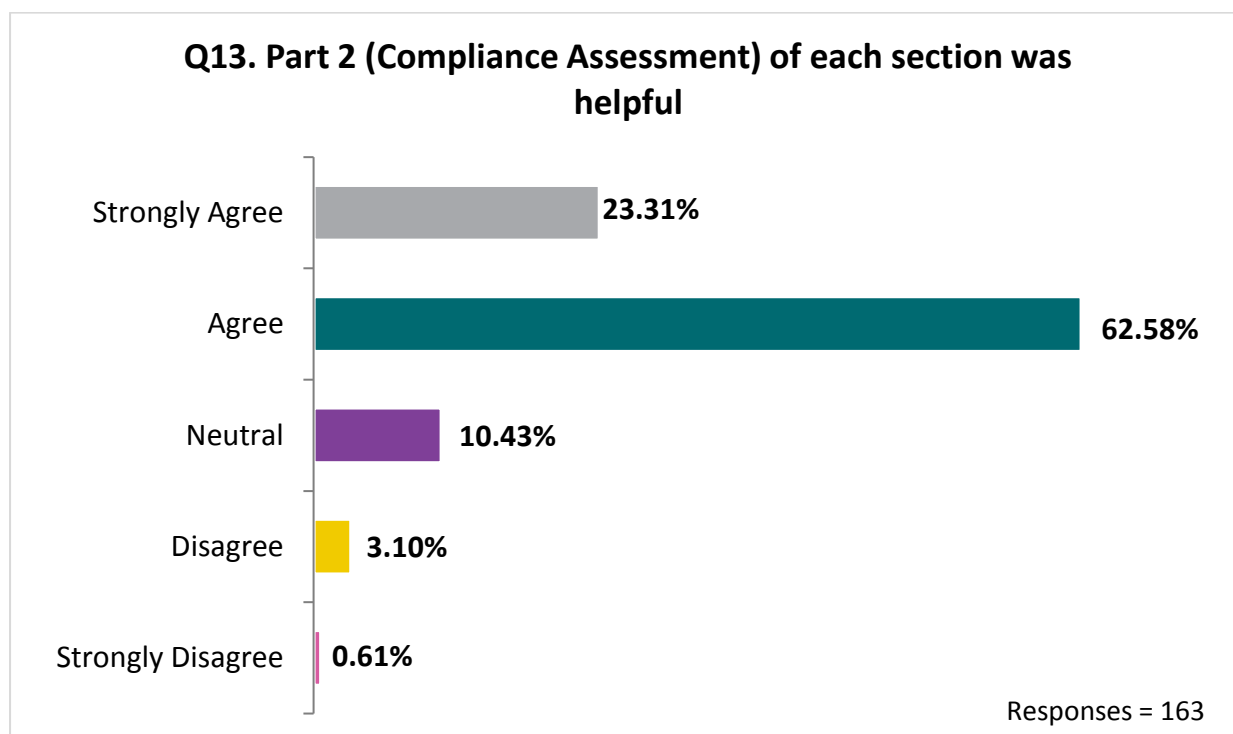
### Question 12:



### Additional Comments Received:

Pilot participants were invited to provide additional comments on Part 1 (Review) of each section. Fourteen (14) comments were received and are summarised below:

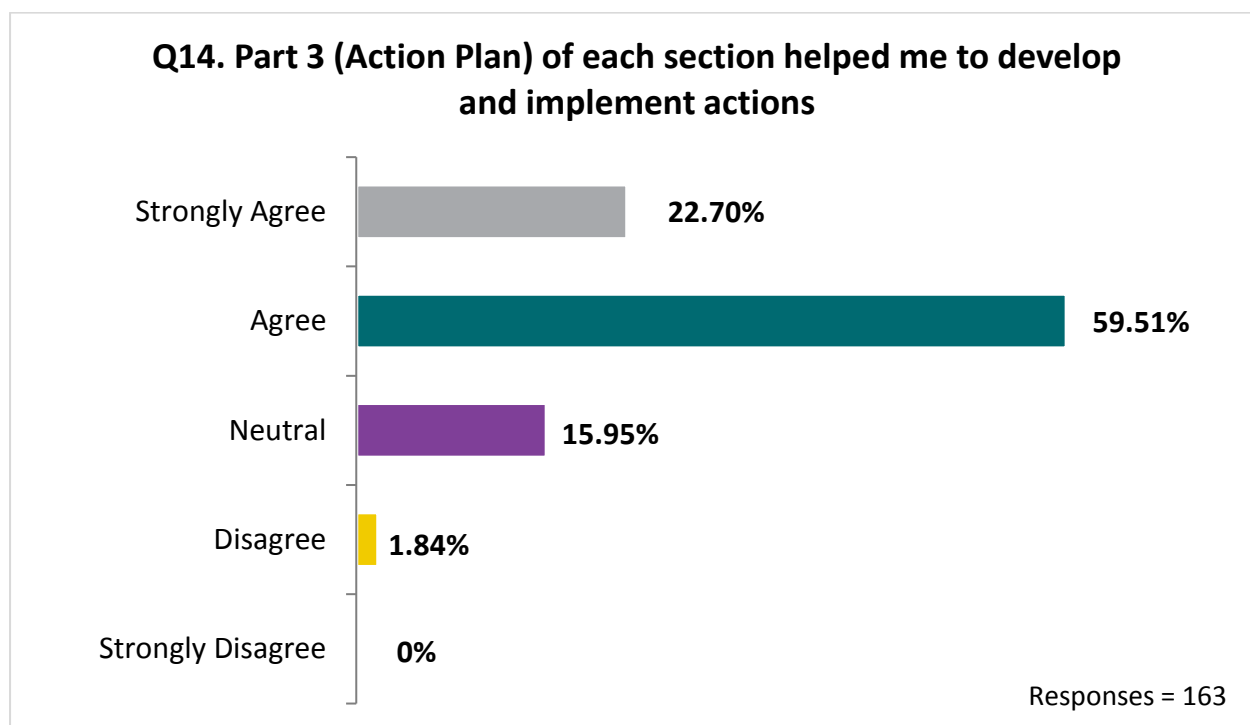
- It was indicated that it was clear, concise and easy to complete.
- It provided a very good overview, was varied and went into enough detail.
- It was suggested that it was too reflective, and that simple box ticking would be easier. It was also felt that it took longer to complete than anticipated.
- It was felt that it highlighted areas that weren't considered in previous audits that were completed by the pharmacy.
- Some felt that by completing this section, it has instilled confidence and helped measure compliance.
- The additional observations and comments section presented the opportunity to reflect on the practical questions.
- It was felt that reflection should be in Part 3, the action plan.
- Some respondents indicated that hospital pharmacy needs to be considered.

**Question 13:****Additional Comments Received:**

Pilot participants were invited to provide additional comments on Part 2 (Compliance Assessment) of each section. Twenty eight (28) comments were received and are summarised below:

- In general, the respondents welcomed the compliance assessment, and found it helpful. It was suggested that it provided a good indicator of what compliance and best practice is in each of the sections.
- It was suggested that it was vague and difficult to differentiate between mostly and partially compliant, and some would have preferred a scoring system. In addition, some found it difficult to categorise their pharmacy objectively, and found that they often fell in between categories.
- It was suggested that it would be preferable to only have two categories, compliant and non-compliant.
- Some felt that the section didn't serve much purpose, and was time consuming.
- It was also suggested to remove the colour coding.

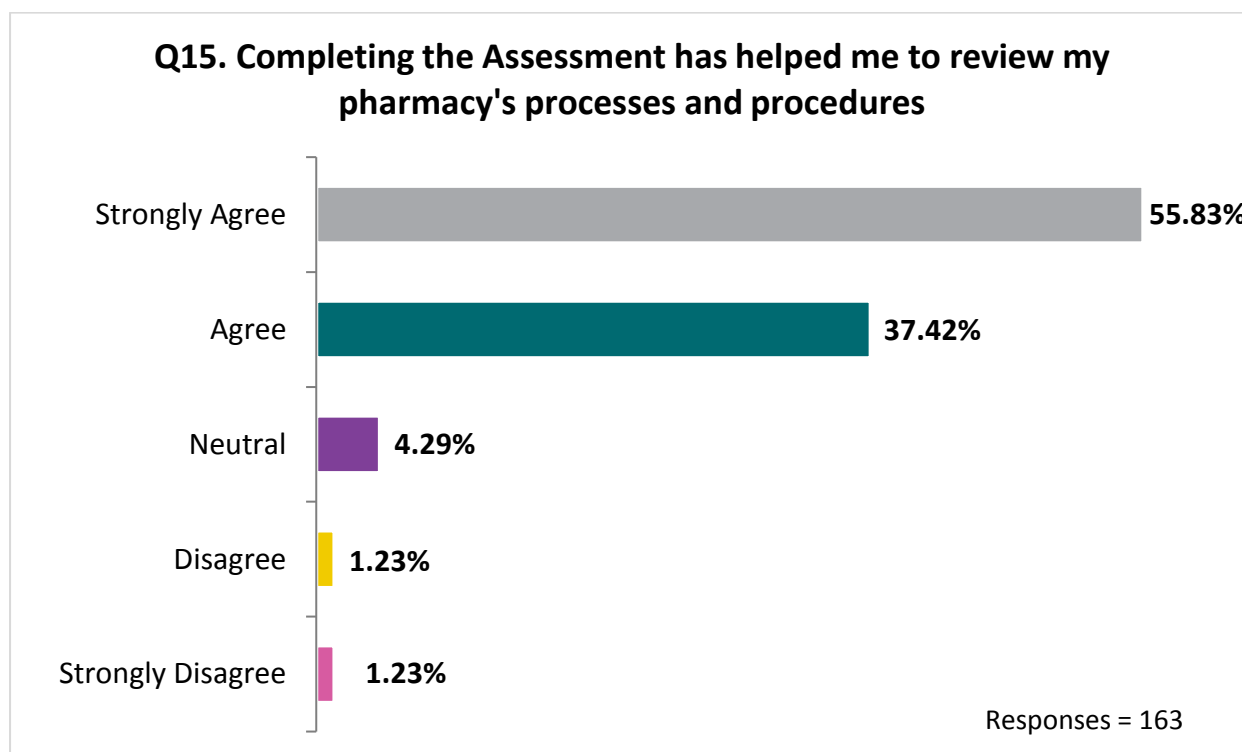
## Question 14:



## Additional Comments Received:

Pilot participants were invited to provide additional comments on Part 3 (Action Plans) of each section. Twenty-nine (29) comments were received and are summarised below:

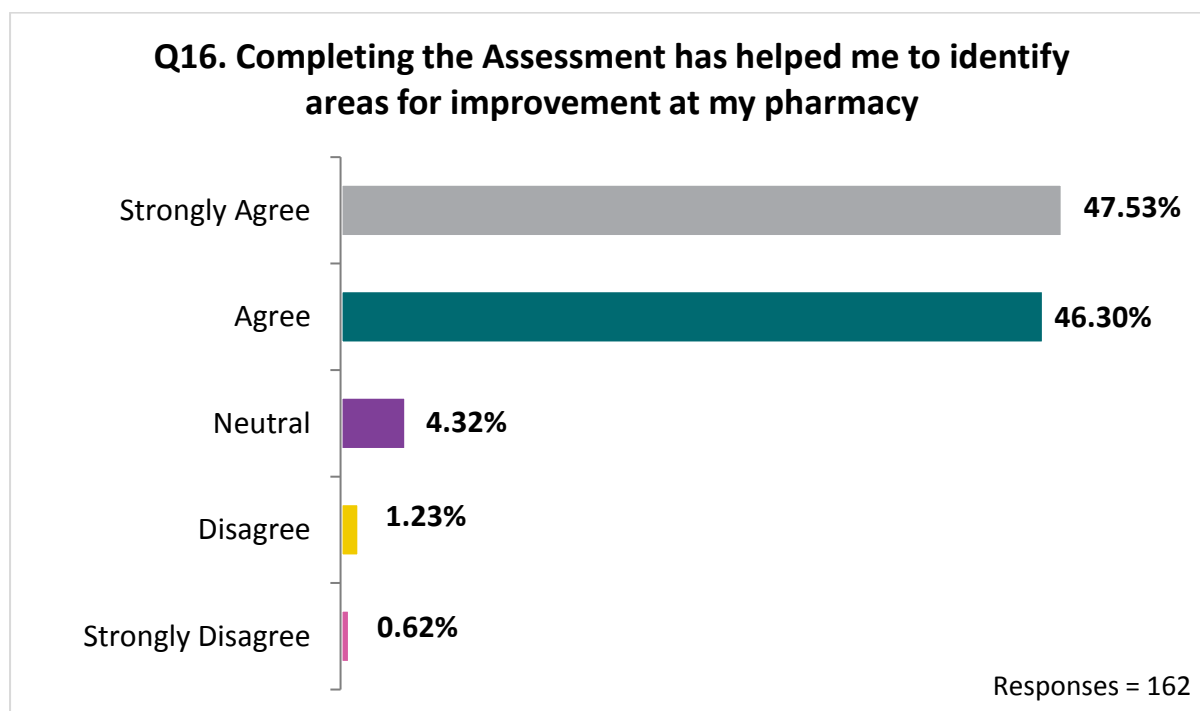
- It was felt that this section was helpful and easy to complete. Although some respondents indicated that this was the most difficult part of the assessment, as they had no previous experience in completing action plans.
- It was suggested that it was useful for prioritising actions as the timelines ensured tasks will be completed in a timely manner and that progress could be monitored.
- Some felt that it provided an opportunity to involve staff members and delegate responsibilities.
- The most significant number of comments were in relation to the limited space available to record details, the layout and location of action plans within the Assessment. For ease of reference, some respondents felt that a separate section of the Assessment should be allocated to the action plans. It was also suggested to include a follow up/progress section and a section to record instances where no actions were required.
- Some respondents' feedback said that it would time consuming to develop and implement action plans.
- The need to include the supervising pharmacist's signature on the action plans was queried.

**Question 15:****Additional Comments Received:**

Pilot participants were invited to provide additional comments on whether completing the Assessment helped review the pharmacy's processes and procedures. Twenty five (25) comments were received and are summarised below:

- It was felt that it would provide an opportunity to reflect on practice, identify areas for improvements. Some respondents indicated that they felt in control of their procedures upon completion.
- It was suggested that it is a positive step to assist pharmacies to continually monitor and ensure ongoing compliance.
- Some respondents indicated that it will help prepare for a PSI inspection.
- It was indicated that it was an onerous process.
- It was felt that some sections were not relevant to hospital pharmacy.

## Question 16:

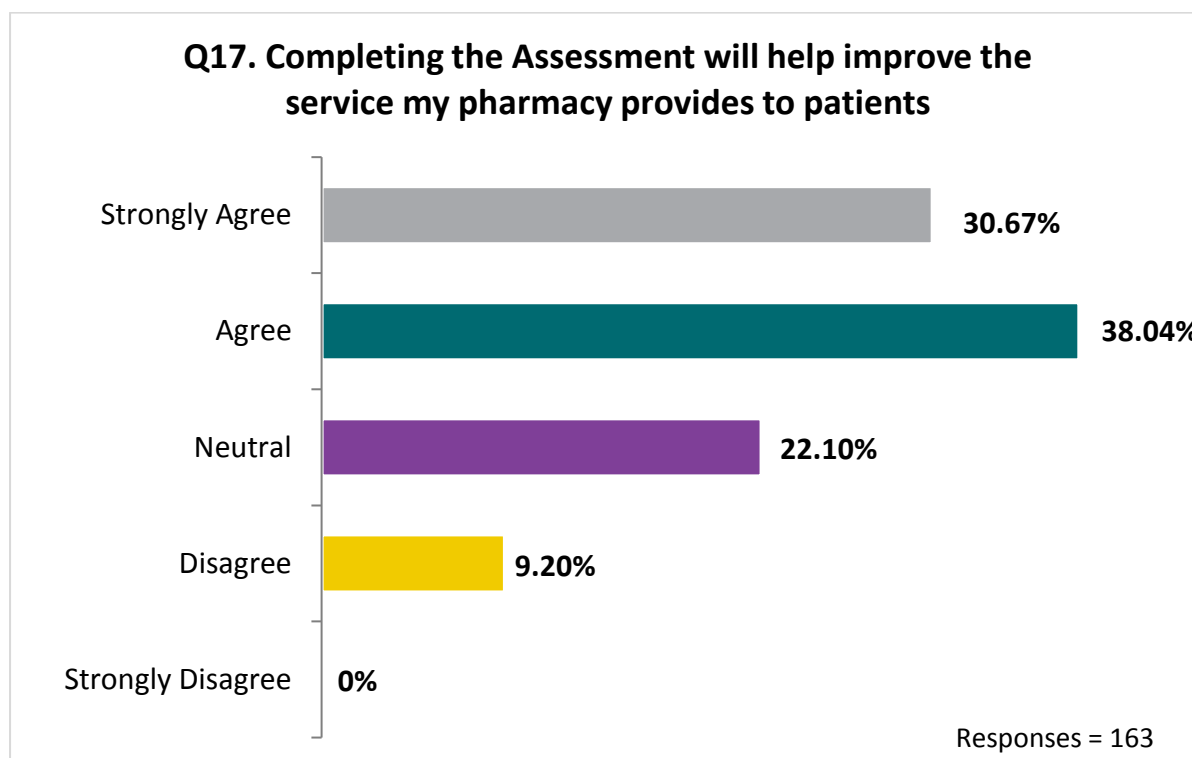


## Additional Comments Received:

Pilot participants were invited to provide additional comments on whether completing the Assessment has helped identify areas for improvement at the pharmacy. Fifteen comments were received.

In general it was felt that it was very helpful way of identifying areas for improvement, which would otherwise be hard to identify when you are working in the same environment every day. Some respondents indicated that it gave them new ideas on how to make improvements at the pharmacy.

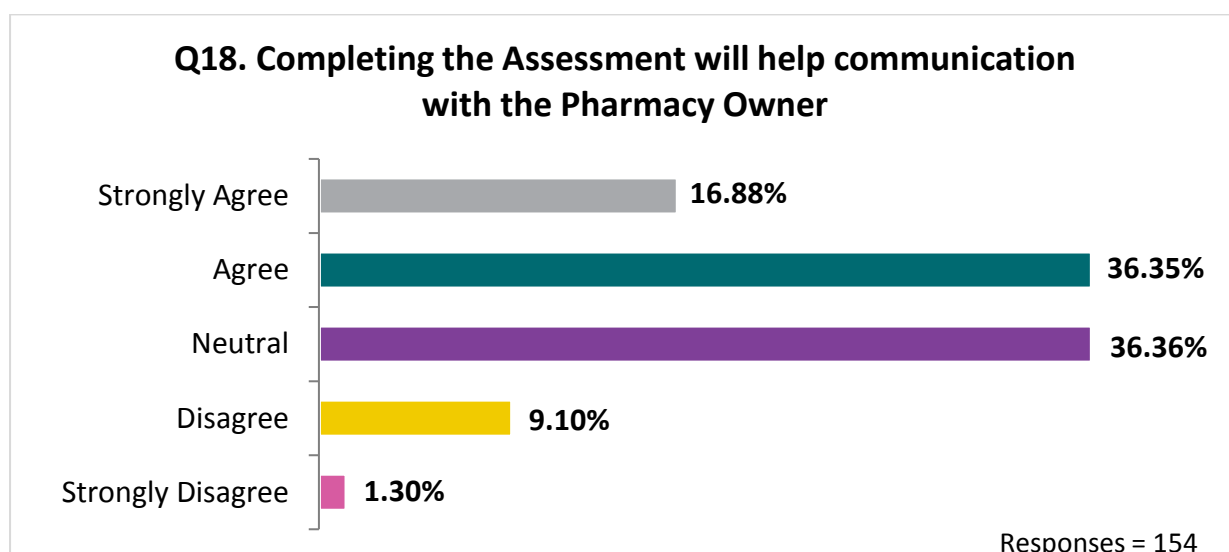
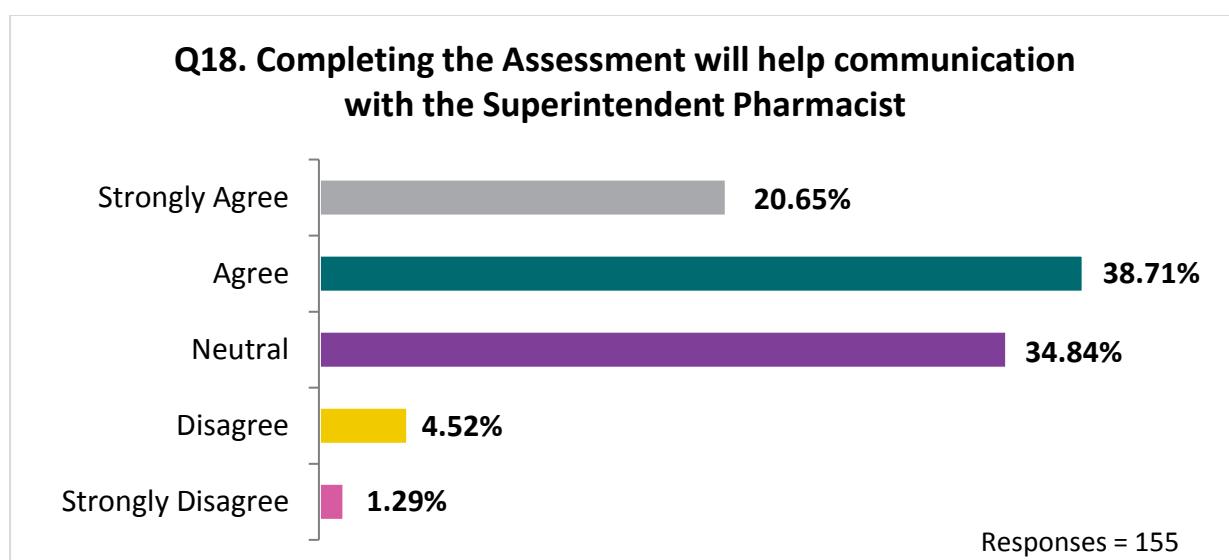
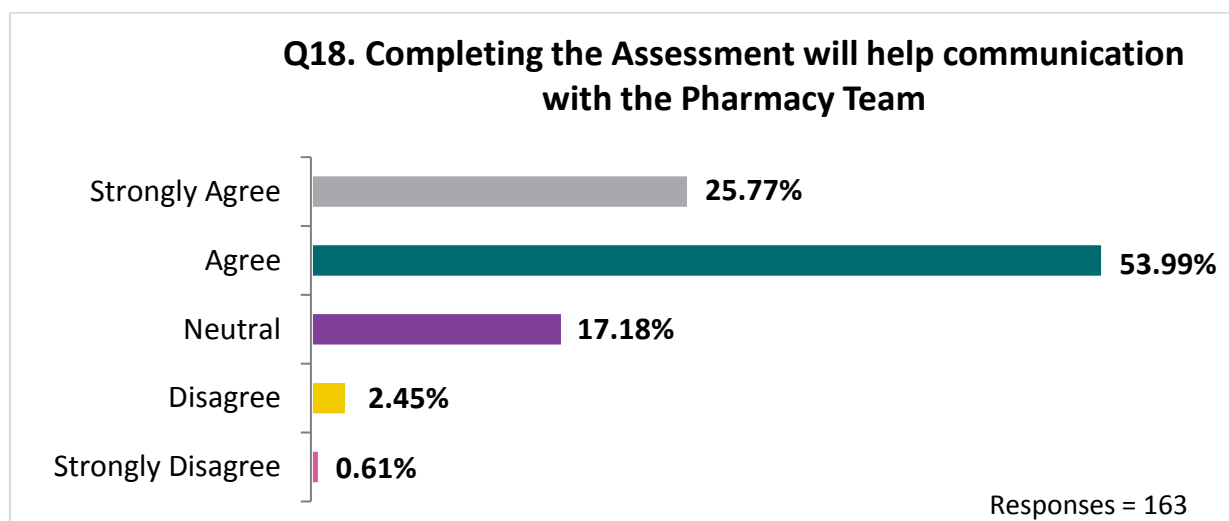


**Question 17:****Additional Comments Received:**

Pilot participants were invited to provide additional comments on whether completing the Assessment will help improve the service a pharmacy provides to patients. Thirty one (31) comments were received and are summarised below:

- It was suggested that it will ensure that all registered pharmacies provide the same level of care to their patients, that procedures are in place and that staff are trained efficiently. The by-product of this would be improved pharmacy services. Conversely, other respondents' feedback indicated that the Assessment would have little impact on improving patient outcomes, but more so in ensuring that the pharmacy is compliant with legislation.
- Some respondents believed that it will help on the administrative side of the pharmacy, and improve patient counselling.
- Some respondents indicated that they already provide an excellent service to patients. Others felt the time taken to complete the Assessment will reduce the time that could be spent with patients.
- Some areas, for example the sale and supply of non-prescription medicines, will improve the service thus improving patient safety.
- It was also indicated that the service will only improve once the remedial actions have been implemented.

## Question 18:



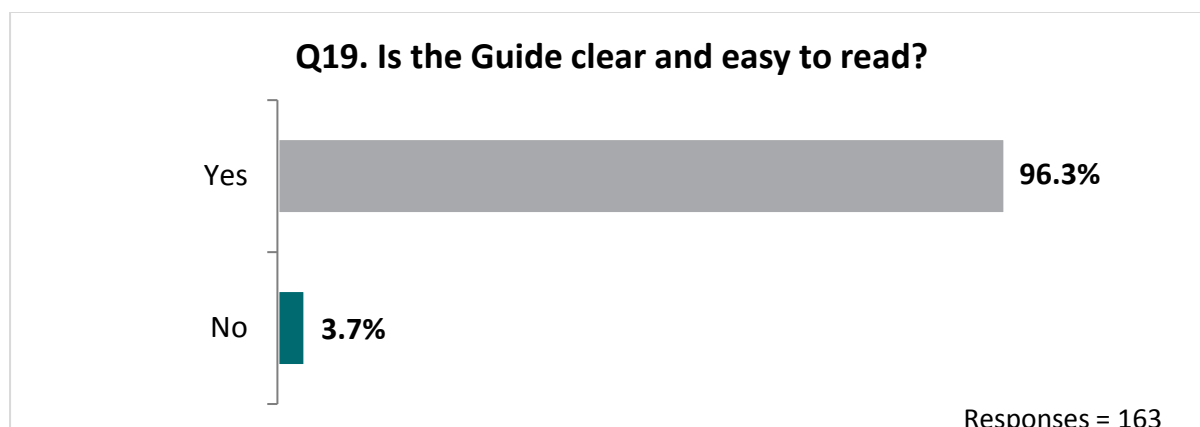
### Additional Comments Received:

Pilot participants were invited to provide additional comments on whether completing the Assessment will help communication with the pharmacy team, superintendent pharmacist and supervising pharmacist. Twenty seven (27) comments were received and are summarised below:

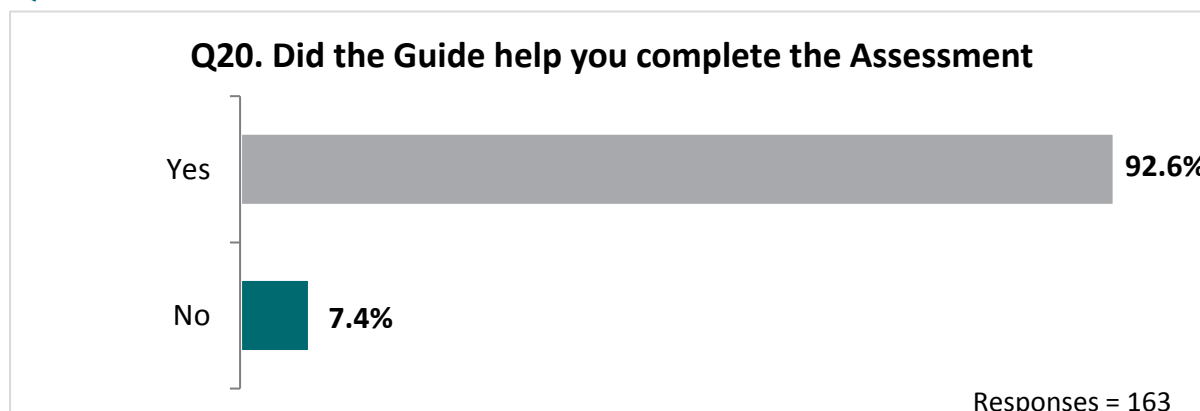
- It was suggested that it highlighted the benefits of communication with the team and will ensure that the lines of communication are kept open, and shared learnings between the team.
- It was felt that it greatly improved communication with pharmacists and the team and that it will present an opportunity to discuss issues with the manager/pharmacy owner.
- Some respondents indicated that it presented talking points and an opportunity to plan together.
- Some respondents indicated that communication systems are already in place.
- It was suggested that it will help identify areas where communication is needed.
- It was also suggested that it will be a useful way of communicating with the patient.

### Guide to Completing the Pharmacy Assessment System

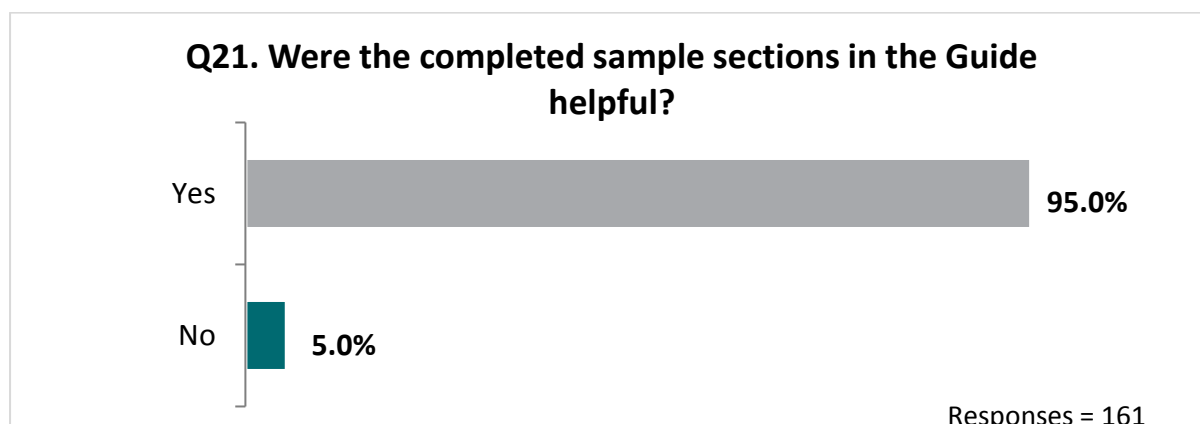
#### Question 19:



#### Question 20:



### Question 21:

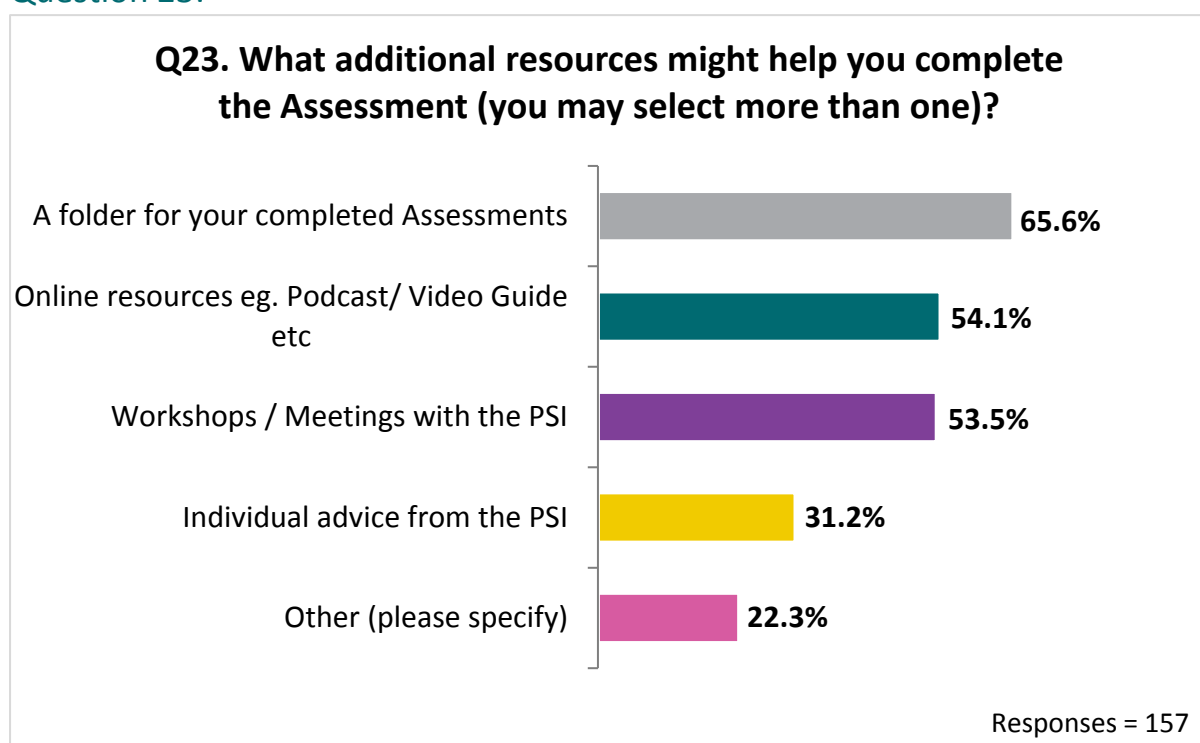


### Question 22:

Pilot participants were invited to provide any other suggestions for improvements to the Guide. Thirty seven (37) comments were received. In general respondents welcomed the Guide. Additional comments are summarised below:

- Some respondents commented that the Guide could include more information. Although others indicated that it could be shortened and/or integrated within the Assessment as it was a self-explanatory document.
- It was suggested that additional sample action plans or more worked examples could be included.
- It was suggested that the Guide could include more colour.

### Question 23:



### Additional Comments:

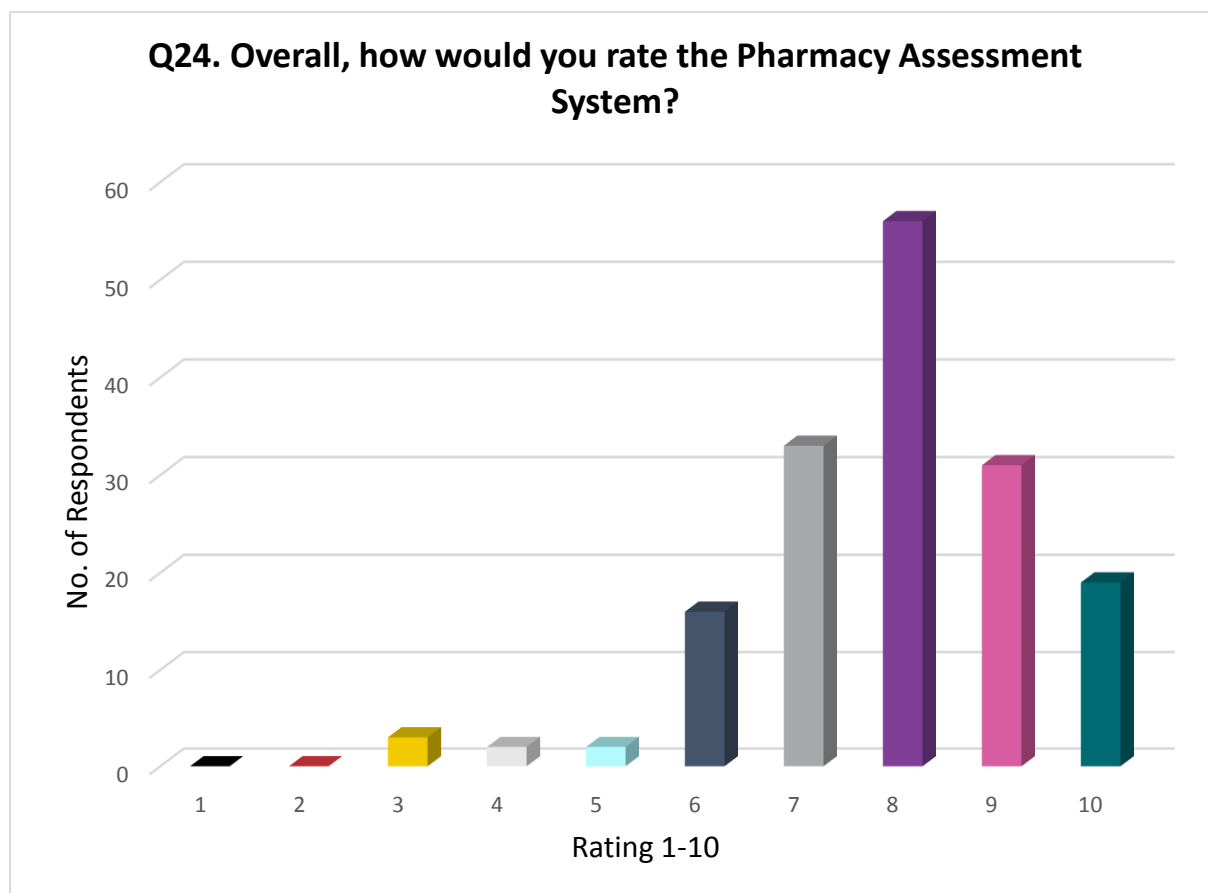
Pilot participants were invited to specify 'other' additional resources that might help complete the Assessment. Thirty five (35) suggestions were received. Among those, the majority again referred to the references already listed above, and other suggestions are outlined below:

- The list of the most common areas of non-compliances found during inspections.
- Completed sample sections for the various sections.
- More information on how to complete Part 3 (Action Plan).
- Separate action plan sheets to follow up.
- An example of a well completed and poorly completed Assessment.

### Overall Rating and Additional Comments

#### Question 24:

Pilot participants were invited to give their overall rating for the pharmacy assessment system on a scale of 1 to 10, with 1 being very poor and 10 being excellent. 162 responses were provided, and the average overall rating was **7.8**.



### Question 25:

Pilot participants were invited to provide any other suggestions for improvements to the Pharmacy Assessment System. Sixty four (64) comments were received through the online survey, and additional comments were received by email.

The additional recommendations have been summarised, the most significant were in respect to the layout and content and are outlined below:

- Add a comparison section to help determine if compliance has improved since the previous Assessment
  - Review the compliance assessment statements for greater clarity
  - Communication to highlight the benefits of completing the Assessment
  - Queried the amount of detail required in certain sections
  - Requested additional guidance / clarification on certain sections or questions
  - Create a website platform to support the use of the Assessment and information sharing
  - Develop additional sections, for example seasonal influenza vaccination services
- Provide a specific timeframe for completing the Assessment
- Review the electronic (editable) version to ensure that information can be inputted, the document saved and printed.
  - Include a section in the action plan to record circumstances whereby no action was appropriate at the time of review
  - Comments on format of questions and the number of questions/activities included in the Assessment.
  - Needs to be more relevant to the hospital setting.
  - Provide a time frame for completing the Assessments.
  - Provide more completed samples or completed Assessments.
  - Clarification on how the Assessment will be reviewed during an inspection.

## 3. Conclusion

The PSI welcomed all contributions from the pharmacies that participated in the pilot to gather feedback on the draft Pharmacy Assessment System. We would like to thank all participants for the information provided. These submissions proved invaluable and were considered, together with the submissions received to the public consultation of the Pharmacy Assessment System, in updating the finalised format, content and inclusions for the Pharmacy Assessment System set of documents.

The final version of the Pharmacy Assessment System, together with the accompanying Guide, was launched in October 2016 with the first cycle of assessment commencing in all pharmacies in January 2017.