
FIP STATEMENT OF POLICY

The role of pharmacists in promoting patient safety

Preamble:

This Statement of Policy is based on the reference document “Patient safety: Pharmacists’ role in ‘Medication without harm’” to be published in 2020, which aims to serve as a platform to inform and support policy and practice development of patient safety initiatives internationally, with a focus on medication safety across the continuum of care.

The Statement of Policy has been developed to be wide-ranging rather than exhaustive, given the extensive and ever-evolving role of the pharmacist in patient safety.

Background:

The World Health Organization (WHO) estimates that millions of patients are harmed each year due to unsafe health care, with 2.6 million deaths annually in low- and middle-income countries alone.¹ The most detrimental errors are related to misdiagnosis, prescription errors or incorrect use of medications.² Medication errorsⁱ alone cost an estimated USD 42 billion globally annually,³ and cause immense personal, social and economic impact. As it has been shown that most of these harmful errors are avoidable,⁴ it is important to target and prioritise this area to improve health care outcomes.

Patient safety is broadly defined by the WHO as “the absence of preventable harm to a patient during the process of health care and reduction of risk of unnecessary harm associated with health care to an acceptable minimum”.⁵ Medication safety is a large component of patient safety and encompasses preventing medication errors and medication-related harm,ⁱⁱ particularly in relation to high-risk medications⁶ and polypharmacy,³ and optimising safe medication use at each stage of a patient’s medication-use journey,¹ notably at the transitions of care.⁷

Pharmacists are key healthcare professionals, specialising in medication management. Pharmacists and their pharmaceutical support workforce are involved in a variety of activities that affect patient safety, including direct patient care and being part of healthcare teams. Pharmacists are well-positioned to advocate for both safer medication management systems, including management of medication shortages, and a culture of

Definitions

ⁱ Medication errors: “Any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the health care professional, patient, or consumer”.^{2,3}

ⁱⁱ Medication-related harm: “Patient harm related to medication. It includes preventable adverse drug events (e.g. due to a medication error or accidental or intentional misuse) and non-preventable adverse drug events (e.g. an adverse drug reaction)”.³



patient safety in health care organisations. An effective safety culture facilitates a just culture,⁸ which encourages reporting and learning from errors. In order for pharmacist teams to be involved in the global health agenda, their role in patient safety requires recognition and support by healthcare organisations and regulatory bodies.

FIP encourages all healthcare professionals and other key stakeholders, including patients and their caregivers, managers, policy makers and educators, to consider designing/optimising services collaboratively to improve patient safety. Interprofessional collaboration and communication among healthcare professionals in all healthcare settings are key to improving patient safety, along with a multifaceted approach at national and international levels. Key aspects include: development and optimisation of evidence-based medication safety-related policies and guidelines; timely access to effective medications and evidence-based treatments; systems for reporting, monitoring, analysing and disseminating safety events; evidence-based education programmes and campaigns which are regularly evaluated for impact; collaboration among stakeholders; patient empowerment programmes; and research programmes. The goal is to increase the safe and effective use of medications, prevent errors and decrease the risk of harm associated with health care.

AGAINST THIS BACKGROUND, FIP MAKES THE FOLLOWING RECOMMENDATIONS to the key stakeholders responsible for patient safety, recognising that the jurisdictions, roles and responsibilities of these stakeholders may vary between countries. Consequently, there is flexibility in who is responsible for acting and implementing the recommendations; however, all recommendations imply a collaborative approach among the key stakeholders, with specific emphasis on the involvement and engagement of healthcare professionals, patients and the public.

GOVERNMENTS AND POLICY MAKERS:

Policies, procedures and guidelines

- Implement a regulatory framework that allows and encourages the sharing of information where it facilitates the provision of safe individual patient care;
- In consultation with healthcare professionals and/or their associations, define levels and areas of individual and shared responsibility regarding the adoption of national health and medication-related policies and standards to safeguard patient safety;
- In consultation with healthcare professionals and/or their associations, develop, implement and monitor national health and medication-related policies that promote safe and effective use of medications
- In collaboration with healthcare professionals and/or their associations, support the development and implementation of national standards related to patient safety and, in particular, medication safety; and
- Support the implementation of non-punitive national systems for the reporting, monitoring, analysis and dissemination of safety events to encourage shared learning about medication errors and medication-related harms.



Engagement and advocacy

- Initiate and drive constructive dialogue with all key stakeholders concerned with patient safety;
- Promote collaborative work and patient care information sharing between health care professionals in full respect of data protection regulations;
- In consultation with individuals and/or their caregivers and patient/consumer organisations, develop, implement and promote programmes related to patient safety and patient empowerment;
- Implement programmes that allow people to access their health information, including clinical information and prescription records (e.g., via electronic health records) to empower them to take charge of their health and, at the same time, prevent inaccuracies and errors;
- Implement programmes that allow pharmacists to access relevant patient data, including clinical information (e.g., via electronic health records) to enable them to effectively provide health and pharmaceutical services; and
- Develop strategies to ensure the full use of pharmacy services to improve patient adherence and medication optimisation.

Education and training

- Support the inclusion of patient safety and the role of different healthcare professions in medical, pharmacy, allied health and science undergraduate or postgraduate curricula leading to professional qualification; and
- Initiate and support ongoing programmes to educate the public about the safe use of medications and the roles of pharmacists.

Resources

- In collaboration with healthcare professionals, health care organisations, patient/consumer organisations and researchers, develop, implement and monitor indicators and tools to proactively measure patient/consumer safety in practice, the outcomes of which can be used to promote and monitor the development of a safety culture;
- Promote the use of shared or integrated information platforms that allow access and sharing of information in a secure, comprehensive and accurate manner; and
- Facilitate reporting of medication errors by all key stakeholders, by removing barriers, and fostering non-punitive and proactive reporting, with the dissemination of evidence-based approaches to error reduction.

PHARMACY PROFESSION:

FIP member organisations:

Policies, procedures and guidelines

- In collaboration with key stakeholders, develop and promote best practice standards on patient safety that apply to all areas of pharmacy practice, targeting transitions of care,⁷ high-risk medicines⁶ and polypharmacy³;



- Establish non-punitive systems for reporting and addressing healthcare-related harm, including empowering individuals and/or their caregivers to report patient safety incidentsⁱⁱⁱ;
- Develop, implement, monitor and review indicators and tools to proactively measure improvements in medication safety in practice; and
- Ensure pharmaceutical teams are involved in medication supply and distribution in times of shortages.

Engagement and advocacy

- In collaboration with patient/consumer organisations, develop and deliver ongoing campaigns to educate patients, their caregivers and the public on the role of the pharmacist in medication safety, by enabling patients and the public to understand their own medications, by keeping a medication list and knowing their allergy history, and encouraging reporting of patient safety incidents;
- Develop strategies to share lessons learned from patient safety incidents (including medication-related harm) and near misses^{iv} with other healthcare organisations internationally; and
- Join the global community of pharmacists in celebrating the annual WHO World Patient Safety Day (17 September).

Education and training

- In collaboration with key stakeholders, develop training programmes on patient safety for pharmacists and their pharmaceutical workforce at all levels of practice;
- Contribute towards the medication safety component of medical, pharmacy and allied healthcare training programmes; and
- Deliver ongoing continuing education programmes for practising pharmacists and their pharmaceutical workforce on patient safety.

Pharmacists and their pharmaceutical support workforce:

Policies, procedures and guidelines

- Develop, implement, promote, monitor and review medication safety policies, procedures and outcomes in hospital, primary care, community and residential care and other relevant facilities to prevent patient safety incidents and improve patient outcomes;
- Implement non-punitive systems to record and share patient safety incidents and actions taken, and use these reporting systems to report, monitor, analyse, and disseminate shared learning of medication-related harms and near misses;
- Actively share anonymised patient safety data in full respect of data protection regulations, with approved local, regional and national bodies or registration databases to support a patient safety culture and
- Ensure systems are in place for supply of medications in times of shortages and for access to medications by patients most in need.

Definition

ⁱⁱⁱ Patient safety incident: "An event or circumstance that could have resulted, or did result, in unnecessary harm to a patient".⁹

^{iv} Near misses: "An incident that did not reach the patient".⁹



Engagement and advocacy

- Implement national standards and guidelines on patient safety in their practice;
- Engage in ongoing continuing education programmes on patient safety;
- Advocate for the patient with other healthcare professionals on medication-related issues;
- Deliver education programmes on patient safety to the pharmaceutical workforce team;
- Advocate for and create a positive patient safety culture at local, regional and national levels to avoid patient harm and to ensure non-punitive reporting and addressing of errors and issues related to patient harm;
- Promote medication safety processes to decrease the risk of error and harm, such as medication reconciliation, documentation of adverse drug reactions, documentation and communication of medication changes at transitions of care, monitoring of adherence to medication, empowering individuals and/or their caregivers to ask questions about the harms and benefits of medication;
- Collaborate with pharmacy organisations, other healthcare professionals and governments to create and implement educational policies to improve patient safety;
- Consider patients as equal partners, and ensure that they are fully informed and engaged when making healthcare decisions;
- Implement appropriate technology to improve patient safety; and
- Join the global community of pharmacists in celebrating the annual WHO World Patient Safety Day (17 September).

Education and training

- Participate in campaigns to educate the public on patient safety and the roles of pharmacists;
- Implement patient safety training programmes for all staff in their practice setting, including mechanisms to prevent patient harm, and for reporting, monitoring, analysing and disseminating patient safety incidents; and
- Be actively involved in medication management and quality improvement activities.

Healthcare-related research institutes and universities

- Ensure patient safety, and in particular the prevention of medication-related harm, is part of the pharmacy curricula and that interprofessional learning is facilitated;
- Advocate for medication safety to be part of medical and other allied healthcare curricula;
- Collaborate with key stakeholders to develop and implement medication safety training programmes;
- Be actively involved in delivering medication-related training programmes for medical and other allied healthcare curricula;
- Promote, participate in and/or initiate medication safety research; and
- Actively disseminate findings of research studies in all aspects of patient safety to local, national and international audiences.

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- Develop, implement and monitor systems related to patient safety according to national and international guidelines and regulations (e.g., systems for pharmacovigilance, emerging health threats, incident management and medication supply logistics);
- Develop strategies and actively share patient safety incident data, in full respect of data protection regulations, with approved local, regional and national bodies or registration databases to support a patient safety culture; and
- Ensure open communication and co-ordinated strategies with pharmacy teams in times of medication shortages and increased demands for pharmaceuticals.

AGAINST THIS BACKGROUND, FIP COMMITS TO:*Policies, procedures and guidelines*

- Advocate for the development of a regulatory framework that allows and encourages the sharing of information where it facilitates the provision of safe individual patient care;
- Contribute to the development of national health and medication-related policies;
- Contribute to the development of standards on patient safety in the healthcare system;
- Contribute to the development of indicators and benchmarks of patient safety; and
- Contribute to the development of national systems, which are non-punitive, for reporting and sharing patient safety incidents.

Engagement and advocacy

- Provide leadership for pharmacists globally to ensure that pharmacy remains a key stakeholder in medication and patient safety within healthcare systems and health policy;
- Ensure that medication safety remains high on the agenda of world health and healthcare professional organisations, as well as national pharmacy organisations;
- Support campaigns to educate patients and the public on their shared role with pharmacy teams to enable patient safety;
- Promote best practice and visibility of local pharmacist champions, member organisation champions and related projects; and
- Support the global community of pharmacists in celebrating the annual WHO World Patient Safety Day (17 September).

Education and training

- Support training in patient and medication safety in medical, pharmacy and allied health programmes; and
- Contribute to the development of patient safety training programmes for pharmacists and their pharmaceutical workforce.



References

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