

Do pharmacists do more on weekends?

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Background

The Prince Charles Hospital (TPCH) is a 630-bed, metropolitan tertiary referral hospital located within 10km north of Brisbane CBD, Queensland.

The hospital has implemented the team-based clinical pharmacy service model since 2007.

Since 2014, a 7-day clinical pharmacy service has been implemented in attempt to cover as much evidence based clinical pharmacy services as possible.

In 2016, an increasing number of pharmacists reported higher stress level, poor job satisfaction and a reluctance to be rostered on weekends.

Aim

To compare the weekend and weekday clinical pharmacy services in terms of clinical pharmacy activities, workload and staff satisfaction.

Methods

Pharmacists working weekends during July and August 2016 collected standard key performance indicator (KPI) data on clinical pharmacy activities that were consistent with the National Safety and Quality Health Service Standard 4 and associated with improved patient outcomes.

The data was compared to historical weekday KPI data collected biannually between April 2014 and April 2016.

Twenty four pharmacists completed a 21-item survey, rating their work experiences using a 5-point scale (1= strongly disagree, 5 = strongly agree).

Results

Table 1: Comparison of clinical pharmacy activities and workload

ADMISSION	Weekdays	Weekend
Admission medication reconciliation within 24 hours	100%	68%
No. of medication reconciliation per day (hospital average)	75	33
No. medication reconciliation per pharmacist per day	2.7	8.25
INPATIENT		
Inpatient clinical pharmacy review	99%	12%
No. of pharmacy review per day (hospital average)	511	62
DISCHARGE		
Discharge medication reconciliation	93%	96%
No. of medication reconciliation per day (hospital average)	57	22
No. medication reconciliation per pharmacist per day	2	4.9

There was an obvious reduction in the proportion of patients receiving an admission medication reconciliation and those receiving clinical pharmacy review on the weekend.

It was evident that weekend pharmacists were performing much more admission and discharge medication reconciliation. This level of activity prevented them from providing other expected clinical pharmacy services, resulting in them feeling they were not providing an appropriate, safe service and suffering from fatigue and poor levels of job satisfaction.

Since 2017, TPCH Pharmacy has implemented the following:

- An extra 1.0 FTE clinical pharmacist added to the weekend roster
- An extra 0.5 FTE dispensary assistant added to the Saturday roster
- Introduction of electronic fund transfer and removal of cash handling

Table 2: Staff satisfaction regarding weekdays and weekend services

QUESTIONS	Weekdays	Weekend	Difference
I provide full medication history and reconciliation to all new patients within 24 hours of admission	4.61	2.13	- 2.48
I provide full discharge reconciliation to every patient	4.65	2.65	- 2.00
I provide counselling to all patients on discharge	4.65	2.70	- 1.95
I review all high risk patients every day	4.65	2.13	- 2.52
I review all patients every day	4.61	1.30	- 3.31
I have adequate time to perform appropriate TDM	4.43	2.22	- 2.21
I spend sufficient time talking to patients about how to use their medications	4.26	2.35	- 1.91
We have staff to handle the workload	4.48	1.74	- 2.74
I enjoy the work I do	4.48	2.91	- 1.57
I have job satisfaction	4.32	2.70	- 1.62
I don't find my work stressful	4.09	3.00	- 1.09
I feel that I can do a safe job	4.52	2.96	- 1.56
I don't feel rushed when processing prescriptions	4.09	3.09	- 1.00
I don't leave work with a 'bad' feeling or feeling that I missed something	3.52	2.04	- 1.48
I feel adequately supported	4.30	2.30	- 2.00
Interruptions/distractions (e.g. phone calls, nurses, doctors) make it difficult to work	4.17	2.74	- 1.43
I feel there is adequate communication with pharmacy staff	4.00	3.30	- 0.70
I feel there is adequate communication with ward staff	3.78	2.52	- 1.26
Staff clearly understand their roles and responsibilities	4.09	2.70	- 1.39
Staff work together as an effective team	4.09	3.35	- 0.74
I have time to take adequate break	3.52	1.39	- 2.13

Conclusion

Clinical pharmacy KPIs and staff satisfaction were generally poorer on weekends, while individual workloads were greater. This study provided data to support a business case for increased weekend staffing in 2017 and to enable changes to work practice and workforce arrangements on weekends.

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