Abstract Number: 4CPS-118

## IMPLEMENTATION OF QUALITY INDICATORS FOR HOSPITAL PHARMACY SERVICES IN A UNIVERSITY HOSPITAL

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#### **BACKGROUND AND IMPORTANCE**

- Quality indicators (QI) for hospital pharmacy services are measurement tools used to evaluate and improve the performance of hospital pharmacists (HPs)
- Unlike traditional workload measurements, these QI measure services delivered by HPs in order to optimize the use of medicines and medical devices

#### **AIM AND OBJECTIVES**

The objectives of this study were to describe the national set of QI for hospital pharmacy services, and report their scores over 2024 in a university hospital

### **MATERIALS AND METHODS**

- 4 In February 2024 we started implementing the national set of QI for hospital pharmacy services in a university hospital
- Indicators were self-reported by HPs (N=41) and scores were expressed as:
  - i. number of reported adverse reactions to medicines and medical devices
  - ii. number of reported quality deviations of medicines and medical devices
  - iii. number of internal education programs for healthcare professionals on medicines and medical devices
  - iv. number of information and instructions to healthcare professionals on medicines and medical devices provided by HP
  - v. medication review of intrahospital antimicrobial use in intensive care units (ICU) (number of interventions / total number of patients in ICU \* 100)

#### **RESULTS**

- Number of reported adverse reactions and quality deviations of medicines and medical devices were low throughout 2024 (not more than 5)
- Only 1 internal education program for healthcare professionals (physicians, nurses, HPs) regarding the new website and mobile application for antibiotic reconstitution was held every two months
- ❖ Number of information given to healthcare professionals by HPs
  - i. the highest in March (176) and April (135)
  - ii. the lowest in June (6)
- Number of antimicrobial stewardship interventions in ICU was more than 1000 in all reported months, except June (437.5)
- ❖ The noticeable differences in scores were due to variations in number of HPs reporting their pharmaceutical services (11/41 and less)

#### **CONCLUSION AND RELEVANCE**

- QI enables better insight into the quality of pharmaceutical services provided by HPs and make them more aware about their own performances
- These preliminary data indicate the need for further research on whether modest reporting of pharmaceutical services is due to lack of time or skills and the importance of further encouragement

