

## **Basel Statements Self-assessment Questions**

## **Section 1: Demographic Information**

1: What is the name of your organisation or hospital?*	
2: In v	what country is your organisation or hospital located?*
3: In \	what state or territory is your organisation or hospital located?*
4: In \	what city is your organisation or hospital located?*
5: Wh	nich of the following best describes your institution?*
0 0 0 0 0	Academic Medical Center/Teaching Hospital (affiliated with a medical school) Community or Tertiary Hospital Specialty Hospital - Oncology Specialty Hospital - Pediatrics Specialty Hospital - Rehabilitation Specialty Hospital - Day surgery Rural Hospital Veteran's/Military Hospital Other, please describe
6: Population of surrounding or assigned hospital community*	
0	Over 500,000 people 100,000 - 499,000 people 50,000 - 99,000 people Less than 50,000 people
7: Nu	mber of hospital beds*
0	< 100 100 - 250 251 - 500 501 - 1000 1000



- 8: Please indicate the total number of full time (~40 hours per week) pharmacy staff on the pharmacy payroll who are assigned to the following categories. Note: Your answers may include decimals (eg. 1.5 = 1 full time staff member and a part time staff member). Enter zero if you have none.
  - Clinical pharmacist(s)\*
  - Distributitive pharmacist(s)\*
  - Integrated clinical/distributitive pharmacist(s)\*
  - Informatics pharmacist(s)\*
  - Medication use safety pharmacist(s)\*
  - Pharmacy resident(s)\*
  - Pharmacy technician(s) or pharmacist assistants\*
  - Admnistrative/support/clerical staff\*
  - Other non-pharmacist/non-technician staff\*
- 9

9: Ho	w many physicians are caring for patients in your hospital?*	
10: Primary services of the hospital (check all that apply)*		
0	Surgery	
0	Medicine	
0	Pediatric	
0	Oncology	
	Emergency room	
0	Primary care	
11: Which of the following clinics does this assessment include?*		
0	Primary care clinics only	
0	Speciality clinics only	
0	Both primary care clinics and speciality clinics.	
0	No clinics included	
12: Is there a pharmacy residency program in your hospital?*		
0	Yes	
0	No	
13: Is there a medical residency program in your hospital?*		
0	Yes	
0	No	

14: How many pharmacy students does your hospital take on rotations each year?\*



15: Which of the following best describes your practice setting?\*

- O Mostly distributive pharmacists are primarily engaged in drug distribution and reactive order-processing roles
- O Clinical generalists (integrated) model pharmacists accept responsibilities for both clinical and distributive activities of the pharmacy department
- O Separate clinical and distributive roles clinical pharmacists are engaged exclusively in clinical activities and accept little or no responsibility for issues related to the medication-use or delivery systems. Dispensing pharmacists are engaged exclusively to the distribution of medicines.
- O Comprehensive model -- includes pharmacists in distributive, generalist/integrated and specialist roles. A mixture of the above 3 models.
- O Other please describe

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Secti	on 2: Pharmacist Involvement
tie	To what extent are pharmacists actively involved on multidisciplinary teams within paent care areas or wards (example: pharmacist deployed on a medicine floor, pediatrics, or mergency room to discuss patient care with physicians/nurses/patients)? *
0	All care areas
0	Most care areas
0	Some care areas
0	A few care areas
0	No care areas
0	Question is unclear and I can't answer it. Please explain below.
	How often is procurement of medicines reviewed and adapted to fit different settings and emerging needs? *
0	Daily
0	Weekly
0	Monthly
0	Yearly
0	Never
0	Question is unclear and I can't answer it. Please explain below.
	How often are you confident that the procured medicine has met strong quality stan- ards including during stock outs? *
0	Daily
0	Weekly
0	Monthly
0	Yearly
0	Never
0	Question is unclear and I can't answer it. Please explain below.



ti	To what extent do prescriptions require transcription steps between the original prescripon and medicines administration record? Example: verbal orders, written orders, transcribing from one computer system to another *
0 0 0	All Most Some A few None Question is unclear and I can't answer it. Please explain below.
S2.05	5 Do hospital pharmacists have access to the full, official patient record? *
0	Yes No Question is unclear and I can't answer it. Please explain below.
	6 How often do pharmacists document their interventions in the hospital's official patient ecord? *
0 0 0	Always Most of the time Sometimes Rarely Never Pharmacists don't have access to documentation in patient record Question is unclear and I can't answer it. Please explain below.
U	Which best describes the extent to which patients (or patient caregivers) are being edcated by pharmacists on the appropriate use of their medicines (e.g., side effects, importance of adherence, medicine directions)? *
0 0	Every patient with new medications Only high risk patients or high risk medications No patient counseling by pharmacists provided Question is unclear and I can't answer it. Please explain below.
	3 To what extent do hospital pharmacists continually monitor patient's medications for afety, appropriate use, and optimal outcomes? *
0 0 0 0	All patients monitored on a daily basis All patients monitored when changes are made to a patient's therapy Some patients monitored based on patient selection criteria No patients are monitored by pharmacists Question is unclear and I can't answer it. Please explain below.



	To what extent do hospital pharmacists engage in research or auditing involving new ethods and systems to improve the use of medicines? *
0	The majority of hospital pharmacists A minority of hospital pharmacists Currently, not engaged in researching new methods and systems to improve the use of medicines
0	Question is unclear and I can't answer it. Please explain below.
	To what extent do hospital pharmacists engage in research or auditing involving new ethods and systems to improve human resource needs? *
	The majority of hospital pharmacists
	A minority of hospital pharmacists  Currently, not engaged in researching new methods and systems to improve human resource needs
0	Question is unclear and I can't answer it. Please explain below.
	How accessible are the hospital pharmacist(s) as a point of contact (examples: on call, none, in person) for health care providers? *
	Accessible to all health care providers at all times  Accessible only at certain times of the day and/or to only certain health care providers  Currently do not serve as a point of contact for health care providers  Question is unclear and I can't answer it. Please explain below.
S2.12	? To what extent are pharmacists trained to participate in collaborative prescribing *
0	All Most Some A few None Question is unclear and I can't answer it. Please explain below.
Secti	on 3: Preparation and Delivery
ak	Pharmacists ensure all health care professionals responsible for administering inject- ole medicines and/or chemotherapy receive education/training on the following. (check all nat apply)
	The use of the medicine
	The hazards involved with the medicine
	The necessary precautions with the medicine
	Question is unclear and I can't answer it. Please explain below.



S3.02 Does your hospital utilize a reporting system (local, regional, or national) for the follow ing (check all that apply)	
	Defective medicines Adverse drug reactions Medication errors Question is unclear and I can't answer it. Please explain below.
S3.03	Is the pharmacy/hospital pharmacist responsible for the following: (check all that apply):
	Safe medication use Appropriate medication use Cost-effective medication use Question is unclear and I can't answer it. Please explain below.
S3.04	Is the pharmacy/hospital pharmacist responsible for the following: (check all that apply)
	Selection of technologies that support the medicine use process.  Implementation of technologies that support the medicine use process.  Maintenance of technologies that support the medicine use process.  Assessment of clinical decision support systems and informatics used for guiding the medicine use process
	Development of clinical decision support systems and informatics used for guiding the medicine use process
	Implementation of clinical decision support systems and informatics used for guiding the medicine use process
	Maintenance of clinical decision support systems and informatics used for guiding the medicine use process
	Question is unclear and I can't answer it. Please explain below.
S3.05	Is the pharmacy/hospital pharmacist responsible for the following: (check all that apply)
	Procurement of strong quality assurance medicines
	Determining which medicines are included in ward stock Review, interpretation, and validation of all prescriptions prior to dispensing or administration
	Ensuring patient's medication allergies, drug interactions, contraindications and past adverse events are accurately recorded and evaluated prior to medicine administration
	Transferring patient medicines information as patients move between and within sectors of care
	Packaging of medicines
	Labeling of medicines
	Storage, preparation, dispensing, and distribution of all medicines, including investigational medicines
	Ensuring quality compounding of injectable admixtures and non-commercially available



	formulations
	Serving on the hospital Pharmacy and Therapeutics Committee
	Educating prescribers on the access to and evidence for optimal and appropriate use of
	medicines
	Providing orientation, drug information and education to nurses, physicians, and other
	hospital staff regarding best practices for medicines use
	Management and disposal of waste related to the medicine use process
	Providing advice on the disposal of human waste from patients receiving medicines
	Ensuring proper storage to maintain the quality, safety, and security of medicines across
	the supply chain
	Ensuring proper dispensing of all medicines
	Ensuring a transparent process of procurement of medicines and health products, in line
_	with best practices and national legislation
	Question is unclear and I can't answer it. Please explain below.
S3 06	Which of the following best practices are employed? (check all that apply)
	A contingency plan for medicine shortages or emergency purchases
	A reliable information system for procurement that provides accurate, timely, and accessible information
	A Formulary system (local, regional, and/or national)
	Pharmacist managed preparation of hazardous medicines, including cytotoxics
	Policies and strategies to prevent wrong route errors (eg. Enteral feeding catheters, label-
	ing of intravenous tubing near the insertion site)
	Policies addressing the use of medicines brought into the hospital by patients
	Policies addressing the use of herbal and dietary supplements
	Policies addressing off-label use
	Labeling Individual patient medicines with at least two patient identifiers (example: pa-
	tient name and date of birth), name of medicine, route, and dose
	Automated prescription filling
	Unit dose distribution
	A bar coding system or other machine scannable codes at administration
	Appropriate and current information resources to ensure safe preparation and adminis-
	tration
	System for tracing medicines dispensed by the pharmacy
	Storage of concentrated electrolyte products outside of patient wards
	Independent checking of chemotherapy doses against the original prescription by a
	pharmacist and one additional health care professional at the point of care prior to ad-
	ministration
	Utilization of the observation method at drug administration to detect errors and identify
	potential areas for improvement



Trigger tools for adverse drug events and optimal medicines use
Data collected and trended against internal benchmarks and/or best practices in other
institutions
Review of hospital medication practices by an external quality assessment accreditation
program
A human resource information system that contains basic data for planning, training,
appraising, and supporting the workforce
Procurement of standard concentrations of high-risk medicines, including electrolytes
Question is unclear and I can't answer it. Please explain below.

## **Definitions**

- Accredit: To certify that an institution meets certain quality criteria to either (a) provide
  care to patients or (b) receive reimbursement from some or all payers for care provided
  to patients; also refers to the process of verifying that educational and training programs
  meet specified standards and objectives.
- Administration: The final act of physically giving a medication to an individual, such as
  injecting a medication into a vein, applying a topical medication, or ingesting a tablet
- Adverse drug reactions: Noxious and unintended and occurs at doses used in man for prophylaxis, diagnosis, therapy, or modification of physiologic functions (per the World Health Organization).
- Automation: Mechanical device which functions automatically, without continuous input from the operator.
- Benchmark: a point of reference from which measurements may be made
- Clinical decision support includes computer alerts when medicines are ordered that
  interact with each other or prompts that encourage healthcare workers to use written
  order sets that guide medication selection, dosing, and monitoring for specific medical
  conditions.
- Collaborative Prescribing: A formal agreement in which a licensed provider makes a
  diagnosis, supervises patient care, and refers patients to a pharmacist under a protocol
  that allows the pharmacist to perform specific patient care functions (e.g., therapeutic
  exchange, dose adjustments) as part of a more comprehensive agreement.
- Compounding: Preparation, mixing, assembling, packaging, or labeling of a medicine.
   Compounding is not manufacturing in the legal sense.
- Cytotoxic: Capable of inducing cell death
- Dispense: To label from stock and supply a clinically appropriate medicine to a patient or care giver



- Formulary: List of medications stocked in the organisation or easily obtainable from an outside source
- Health care provider. A person who delivers proper health care in a systematic way professionally to any individual in need of health care services.
- Human Resources: The personnel employed in a business or organisation; personnel
- Intervention: Active process, either prospective or retrospective, by which a non-physician individual seeks to alter care from that which would otherwise be chosen to improve the patient's outcome. Examples: recommend a different therapy, notify doctor of a drugdrug interaction
- Investigational medicines: Medicines used in clinical trials
- Medication error any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the healthcare professional, patient, or consumer.
- Monitoring: watch closely or observe changes in therapy, labs, side effects etc.
- Multidisciplinary: composed of or combining several usually separate branches of learning or fields of expertise.
- Orientation: Process of familiarizing health care providers with new information, procedures, expectations, surroundings or circumstances; a process of training and education. Best Practice: a method or technique that has consistently shown results superior to those achieved with other means.
- Pharmacy and Therapeutics Committee have pharmacists who analyze medicine literature to help determine what medicines should be used in the hospital, recommend policies that include safety precautions (e.g., such as 2 independent checks before hazardous medicines are administered, determining therapeutic equivalents).
- Point of care: Activities taking place at the place and time where and when the patient is receiving health care services.
- Policy: A statement that clearly describes organisational position and reflects the expected actions and responsibilities to be taken in a given situation.
- Procurement: process of identifying and securing adequate supplies of medicines at affordable prices with an appropriate standard of quality. It includes all activities related to the management of the medication supply chain.
- Responsibility Are pharmacists accountable for, have scope of practice for, or serve a role in any of the following activities pharmacists accountable for, have scope of practice for, or serve a role in any of the following activities



- Responsible: pharmacists are accountable for, have scope of practice for, or serve a role
- · Technologies: distribution devices, administration devices and any other equipment
- Trigger Tool: Process of using "triggers" or "clues", to identify adverse events through retrospective monitoring of patient records
- Unit Dose: Medications are packaged or delivered individually (as a unit of use) rather than in bulk containers (containers with large quantity of the item)