

## Library Current Awareness Bulletin: Pharmacy – December 2019

This is a new current awareness bulletin from the Library & Knowledge Services team at Airedale. If you have any comments or queries please do not hesitate to contact us. Our contact details can be found on the final page of this bulletin.

**Please note:** This bulletin contains a selection of material and is not intended to be comprehensive. Professional judgment should be exercised when appraising the material. The Library & Knowledge Services team takes no responsibility for the content and accuracy of the information supplied.

Section	Page(s)
Alerts	1
Guidance and Reports	1
News	2
Community Pharmacy	2-3
Hospital Pharmacy	3-5

Articles can be accessed from the links provided. An OpenAthens account may be required to access some of the articles. [Register for OpenAthens](#) – use your Airedale email address when registering.



### Alerts

Alerts and Recalls for Drugs and Medical Devices (GOV.UK)

[View the November and December Alerts](#)

[Letters and drug alerts sent to healthcare professionals in October 2019](#)

### Guidance and Reports

[NHS Community Pharmacist Consultation Service: Toolkit for Pharmacy Staff](#)

NHS England  
 Nov 2019

[NICE Guidance and Advice List – November and December Updates](#)

The National Institute for Health and Care Excellence

[Pharmaceutical buying groups in the NHS – updated 19<sup>th</sup> November 2019](#)

GOV.UK

## News

[BBC News articles on the pharmaceutical industry](#)

[Changes introduced to education and training of pharmacy support staff](#)

General Pharmaceutical Council

Dec 2019

[Community pharmacists to expand role in patient care](#)

National Health Executive

Dec 2019

[GPhC and PSNI to introduce a common registration examination for pharmacists in Great Britain and Northern Ireland](#)

General Pharmaceutical Council

Dec 2019

[GPhC launches new guidance for pharmacist prescribers](#)

General Pharmaceutical Council

Nov 2019

[GPhC survey of registered pharmacy professionals shows picture of pharmacy workforce today](#)

General Pharmaceutical Council

Dec 2019

[New Pre-Reg Podcast on Calculations now available!](#)

Royal Pharmaceutical Society

Nov 2019

[Pharmacists suffer the mental health consequences of workplace pressures](#)

Royal Pharmaceutical Society

Dec 2019

## Community Pharmacy

[An overview of systematic reviews of economic evaluations of pharmacy-based public health interventions: addressing methodological challenges](#)

*Systematic Reviews*, vol. 8

Nov 2019

[Fourteen systematic reviews were included. Reviews reported favourable economic findings for 71% of studies with full economic evaluations. The types of economic analysis are diverse. Two critical quality domains are absent from most reviews. Key findings include the following: certain types of risk of bias, wider scope of study designs, and most economic quality criteria met but some issues unresolved or unclear. Triangulation revealed additional gaps. Limitations include choice of critical quality domains and potential biases in the overview process.]

[Applying a whole systems lens to the general practice crisis: Cross-sectional survey looking at usage of community pharmacy services in England by patients with long-term respiratory conditions](#)

*BMJ Open*, vol. 9(11)

Nov 2019

[This study used marketing theory to identify factors that could influence patients to make better use of community pharmacies within the primary care pathway. A cross-sectional postal survey design, applying the '7Ps marketing mix' ('product', 'price', 'place', 'promotion', 'people', 'process' and 'physical evidence'), was sent to patients with asthma or chronic obstructive pulmonary disease registered at two GP practices in Greater Manchester.]

[Challenges and strategies in communication with people with dementia and their informal caregivers in community pharmacies – a narrative approach](#)

*Scandinavian Journal of Caring Sciences*, Epub ahead of print

Nov 2019

[This study aimed to research the challenges faced and strategies used by community pharmacists who deal with people living with dementia and their informal caregivers. In two workshops with 74 participants, 15 small groups were formed, each of which generated and discussed a small story. Fourteen of those narratives were reported, tape recorded and transcribed. In these 14 narratives, community pharmacists reflected on their experiences with people with dementia or their informal caregivers. The narratives were systematically analysed and interpreted.]

[Community pharmacists as partners in reducing suicide risk](#)

*Journal of the American Board of Family Medicine (JABFM)*, vol. 32(6) pp. 763-767

Nov 2019

[This commentary considers the role of community pharmacists in assessing and identifying suicidal ideation in collaboration with primary care providers. The barriers to collaboration are considered and the availability of training for pharmacists in the US are discussed. Recommendations for interdisciplinary suicide screening are presented.]

[How timely is access to palliative care medicines in the community? A mixed methods study in a UK city](#)

*BMJ Open*, vol. 9(11)

Nov 2019

[There were two sequential phases in this mixed methods study conducted across five community pharmacies in Sheffield: (1) prospective audit of prescriptions and concurrent survey of patients/representatives collecting palliative medicines from pharmacy and (2) interviews with community pharmacists and other healthcare professionals that deliver palliative care in the community.]

[Quality indicators and community pharmacy services: a scoping review](#)

*International Journal of Pharmacy Practice*, vol. 27(6) pp. 490-500

Dec 2019

[A scoping review of the use of quality indicators for community pharmacy practice, including their methods of development and evaluation. EMBASE and PubMed were searched to identify papers published between January 2008 and April 2018. Of the 988 records identified from the search, 15 articles were included. Eleven studies described the development of quality indicators, eight of which included the evaluation of the psychometric properties of the indicators developed. Four studies examined the impact of quality indicators on practice.]

[The knowledge, attitudes, and practices of community pharmacists in their approach to antibiotic use: A nationwide survey in Italy](#)

*Antibiotics*, vol. 8(4)

Dec 2019

[A cross-sectional telephone survey using a semi-structured interview was undertaken between September 2018 and April 2019 among a random sample of community pharmacists in Italy. The aim was to evaluate the knowledge, attitudes and practices toward antibiotic resistance and antibiotic use and to investigate their influencing factors.]

## Hospital Pharmacy

[A survey of antibiotic administration practices involving patients with sepsis in UK critical care units](#)

*International Journal of Clinical Pharmacy*, Epub ahead of print

Nov 2019

[UK critical care pharmacists were invited to participate in a survey on behalf of all 240 critical care units via a UK Clinical Pharmacy Association message board. The survey focused on administration practices for 22 antibacterial agents and aimed to find out whether common practice exists for intravenous antibiotic administration in critical care units across UK NHS Trusts. Responses were received covering 64 units, a response rate of 26.2%]

[A UK hospital survey to explore healthcare professional views and attitudes to patients incorrectly labelled as penicillin allergic: an antibiotic stewardship patient safety project](#)

*European Journal of Hospital Pharmacy: Science and Practice*, vol. 26(6), pp. 329-333

Nov 2019

[A questionnaire was distributed to medical, nursing and pharmacy staff at a 750-bed teaching district general hospital with no specialist allergy service. The aim was to ascertain the views, beliefs and attitudes of hospital staff to incorrect penicillin allergy records to determine healthcare worker motivation for implementation of a penicillin de-labelling antibiotic stewardship intervention. 193 staff responded: 58% medical, 31% nursing and 11% pharmacy.]

[Development of a hospital deprescribing implementation framework: A focus group study with geriatricians and pharmacists](#)

*Age and Ageing*, Epub ahead of print

Nov 2019

[This study used focus groups with geriatricians and pharmacists representing four UK hospitals to characterise barriers and enablers to deprescribing in hospital. Geriatricians and pharmacists described several deprescribing enablers including alignment with their role and generalist knowledge, and routine patient monitoring. Themes were mapped to the theoretical domains framework (TDF), enabling prioritisation of domains for behaviour change.]

[Economic impact of patient's own medication use during hospitalisation: a multicentre pre-post implementation study](#)

*International Journal of Clinical Pharmacy*, vol. 41(6) pp. 1658-1665

Dec 2019

[In seven Dutch hospitals (university, teaching, general, and specialised) eight surgical and medical wards were selected to study the economic impact of patient's own medication use on medication waste and hospital staff's time spent during hospitalisation. The primary outcome of the study was the total economic value (€) of wasted medication per 100 patient days.]

[Evaluating the Connect with Pharmacy web-based intervention to reduce hospital readmission for older people](#)

*International Journal of Clinical Pharmacy*, vol. 41(5) pp. 1239-1246

Oct 2019

["Connect with Pharmacy" is a new electronic web-based transfer of care initiative employed by Leeds Teaching Hospitals NHS Trust which allows the sharing of discharge information between the hospital and a patient's chosen community pharmacy. This evaluation investigated whether the timely sharing of discharge information with community pharmacies via "Connect with Pharmacy" reduced hospital readmission rates in older patients.]

[Impact of pharmacist involvement on Telehealth Transitional Care Management \(TCM\) for high medication risk patients](#)

*Pharmacy*, vol. 7(4)

Nov 2019

[Seventy-six patients were enrolled in this pilot study to evaluate the impact of pharmacist involvement in the preexisting telehealth transitional care management (TCM) program at Atrium Health (US healthcare organisation) on the quality and safety of the medication discharge process for high medication risk patients. Primary endpoints included the number and types of medication list discrepancies identified, number and types of medication-related problems identified, and the rate of unplanned 30-day hospital readmissions.]

[Intervention planning for Antibiotic Review Kit \(ARK\): A digital and behavioural intervention to safely review and reduce antibiotic prescriptions in acute and general medicine](#)

*Journal of Antimicrobial Chemotherapy*, vol. 74(11) pp. 3362-3370

Nov 2019

[ARK is a digital, organizational and behavioural intervention that supports implementation of 'review and revise' to help healthcare professionals safely stop unnecessary antibiotics. Stakeholder consultation and qualitative research with doctors, nurses and pharmacists in UK hospitals identified barriers to and facilitators of the intervention and its implementation.]

[Medication error rate in transition of care: General Practitioner \(GP\) referrals to a regional emergency department](#)  
*Healthcare*, vol. 7(4)

Nov 2019

[This single-site, observational, diagnostic accuracy study aimed to quantify medication discrepancies in transition of care from primary care to the emergency department (ED) over a 12-month period. Medication lists in GP referrals to a regional ED were examined against a Best Possible Medication History performed by a hospital pharmacist.]

[Organisational context of hospitals that participated in a multi-site mentored medication reconciliation quality improvement project \(MARQUIS2\): a cross-sectional observational study](#)

*BMJ Open*, vol. 9(11)

Nov 2019

[A cross-sectional observational study using a web survey (contextual factors) and a national hospital database (hospital characteristics) with hospitals participating in the second Multi-Centre Medication Reconciliation Quality Improvement Study (MARQUIS2). The primary outcome was contextual factor ratings (organisational capacity, leadership support, goal alignment, staff involvement, patient safety climate and team cohesion).]

[Pharmacist-led geriatric clinic: A unique service for complex elderly patients](#)

*Canadian Pharmacists Journal*, vol. 152(6) pp. 367-369

Nov 2019

[A quality improvement evaluation of an outpatient pharmacist-led geriatric clinic at the Vancouver General Hospital in British Columbia. All pharmacist documentation of every clinic visit was reviewed and data were abstracted for patient baseline characteristics and interventions. Interventions were categorized as follows: drug discontinuation, drug dose change, drug initiation and compliance interventions.]

[Post-surgical antibiotic prophylaxis: Impact of pharmacist's educational intervention on appropriate use of antibiotics](#)

*Journal of Infection and Public Health*, vol. 12(6) pp. 854-860

Nov 2019

[A prospective quasi experimental study was conducted by enrolling 450 patients from the tertiary care hospital of Lahore, Pakistan, 225 patients in each arm (control and intervention) using non-random convenient sampling. The study parameters included antibiotic indication, choice, dose, frequency, duration and associated costs.]

[Validation of the LESS-CHRON criteria: reliability study of a tool for deprescribing in patients with multimorbidity](#)

*European Journal of Hospital Pharmacy*, vol. 26(6) pp. 334-338

Nov 2019

[The 'LESS-CHRON criteria' (List of Evidence-Based Deprescribing for Chronic Patients criteria) is a tool, developed using a Delphi methodology, with 27 criteria to guide deprescribing. Each criterion consists of drugs and their indications, conditions under which deprescribing would be considered, a health variable to be monitored after deprescribing and a follow-up period. The aim of this study was to evaluate the reliability of the LESS-CHRON criteria in a population of patients with multimorbidity to determine the possible usefulness of this tool in clinical practice.]

**Airedale NHS Library**

The library is open Monday to Friday 9am to 5pm.

Outside of these hours it is possible to access the library computer room and study area.

 [www.educationairedale.co.uk/library](http://www.educationairedale.co.uk/library)

 [Airedale.library@anhst.nhs.uk](mailto:Airedale.library@anhst.nhs.uk)

 01535 294412

Airedale General Hospital – Location B11