Pharmacy Audits PHC Remote Guideline

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Author	Senior Pharmacist Primary Health Care CAHS; Senior Pharmacist Primary Health Care TEHS
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Purpose

To provide Primary Health Care remote staff with information about pharmacy related audits promoting safe and effective use of medicines.

Guideline

Primary Health Care (PHC) supports the use of pharmacy related audits to promote safe and effective use of medicines. For the purpose of this document pharmacy audits refer to any audit related to medicines management, drug storage rooms and pharmacy services. For PHC remote health centres, routine audits are generally conducted by:

- Section 100 (S100) contracted pharmacist once in every six month period,
- Senior Pharmacists PHC CAHS and TEHS; Medication Safety Nurse Consultant PHC TEHS

Ad hoc audits may be conducted by:

- Senior Clinicians, such as Nursing Coordinators, Continuous Quality Improvement Facilitators
- Authorised Officers (previously Poisons Inspectors) under the NT Medicines and Poisons and Therapeutic Goods Act (MPTGA) as required.

Primary Health Care Managers (PHCM) are to ensure that medicines and drug storage rooms are managed in accordance with the relevant legislation and PHC Remote policies. PHCMs and staff conduct ongoing Quality Assurance (QA) activities which promote safe and effective medicines management. Quality Checks documenting that the monitoring requirements have been met include:

- Accountable Drugs Checks
- Cold Chain Storage Checks
- Essential Checks

In addition, a range of pharmacy related documents provide systems and process for managing medicines.

1 Section 100 Pharmacist Health Centre Site Visit Audit

Under the Section 100 Pharmacy contract, the S100 Contracted Pharmacy arranges for a suitably qualified and experienced pharmacist to visit each PHC remote health centre at least once in each six-month period. During the site visit, the contracted pharmacist will assess whether medicines are managed in accordance with the NT MPTGA and other medicine management policies and guidelines and will provide staff with professional advice and guidance.

Auditing is used to assess compliance with medicines management requirements. The pharmacist will work collaboratively with staff at each remote health centre to audit:

- All pharmaceutical storage locations in accordance with regulatory requirements and relevant Department of Health and PHC policies, systems and procedures, in particular Drug Storage Room Standards.
- Medicines for condition of stock, expiry dates, compliance against the Standard Drug List (SDL), stock levels and ordering processes.
- Compliance of medicines documentation, including S8 and RS4 registers, S8 and RS4 delivery receipts,
- Availability of medicines references against the standard reference list
- Cold chain management for vaccines and medicines requiring refrigerated storage
- Medicines in the designated emergency kits
    - ~ Emergency Outreach Drug Box
    - ~ Anaphylaxis Kit
    - ~ Fit Kit
    - ~ Obstetric Drug Kit

See the Drug Storage Room PHC Remote Audit which provides the audit template.

1.1 Following the Health Centre Site Audit

Following the site audit, the S100 Contracted Pharmacist will:

- Discuss the results of the audit, and any issues arising, with the PHCM and staff at the time of the health centre site visit
- Provide support and guidance to health centre staff to address issues identified by the audit
- Discuss any significant issues with the Senior Pharmacists PHC CAHS and TEHS within one week of each site visit
- Ensure relevant RiskMan reporting is completed if necessary
- Complete a report (utilising the standard DoH audit tool template) of each visit and dispatch reports within five (5) working days. All significant issues will be highlighted, eg incorrect storage of pharmaceutical products or issues affecting the provision of a quality pharmaceutical service.
- Distribute copies of the report to the Senior Pharmacists PHC CAHS and TEHS, relevant PHCM, District Manager and Director of Nursing and Midwifery.

The Senior Pharmacists PHC CAHS and TEHS will also forward copies to other relevant personal as required.

2 Poisons Inspections by Authorised Officers

Under the NT MPTGA, Authorised Officers may inspect premises for compliance with medicines and poisons legislation (including storage, record keeping, packaging, labelling, advertising and supply). PHCMs and health centre staff are obliged to accommodate and assist the authorised officers as required during poisons inspections.

3   Ad Hoc Audits

Audits may be conducted on an ad hoc basis in response to issues or incidents identified at health centres. The audit and the team responsible for conducting the audit would be commissioned by PHC management. This may include the Senior Pharmacists PHC CAHS and TEHS and/or Medication Safety Nurse Consultant PHC TEHS.

Quality Assurance		
	Method	**Responsibility**
Implementation	Document will be accessible via the Policy Guidelines Centre and Remote Health Atlas	PGC Administrators
Review	Document is to be reviewed within three years, or as changes in practice occur	Senior Pharmacist Primary Health Care CAHS Senior Pharmacist Primary Health Care TEHS
Evaluation	Evaluation will be ongoing and informal, based on feedback.	Senior Pharmacist Primary Health Care CAHS Senior Pharmacist Primary Health Care TEHS
Compliance	Receipt of timely health centre audit reports from S100 Pharmacist Monitor relevant quality returns from health centres Issues / incidents will be entered into RiskMan as necessary and will be followed up	Senior PHC Pharmacist CAHS Senior PHC Pharmacist TEHS Professional Practice Nurse CAHS Relevant District Manager Relevant Manager Senior Pharmacist Primary Health Care CAHS Senior Pharmacist Primary Health Care TEHS Medication Safety Nurse Consultant PHC TEHS

Key Associated Documents	
Key Legislation, By-Laws, Standards, Delegations, Aligned & Supporting Documents	Drug Storage Room PHC Remote Audit Quality Return Forms: Accountable Drugs Checks – CAHS | TEHS Essential Quality Checks – CAHS | TEHS Cold Chain Storage Checks – CAHS | TEHS Cold Chain PHC Remote Guideline Drug Storage Room Standards PHC Remote Guideline Schedule 8 and Restricted Schedule 4 Medicines PHC Remote Guideline Section 100 Pharmacy Arrangements PHC Remote Guideline Section 250 NT MPTGA PHC Remote Guideline Standard Drug List PHC Remote Guideline Standard Reference List PHC Remote Guideline

Standard Drug List Stock Management PHC Remote Guideline

S8 and RS4 Drug Register Example PHC Remote – CAHS | TEHS

Emergency Kits:

Anaphylaxis Kit Contents PHC Remote List

Emergency Outreach Drug Box Contents PHC Remote List

Fit Kit Contents PHC Remote List

Obstetric Drug Kit Contents PHC Remote List

NT Medicines, Poisons and Therapeutic Goods Act and Regulations

NT Medicines Management Framework

Pharmaceutical Society of Australia

Guide to providing Pharmacy Services to Aboriginal and Torres Strait Islander people

Professional Practice Standards *(also available via the 'Practice and Business Support' tab)*

Standard 1: Fundamental Pharmacy Practice
Standard 3: Dispensing and Other Supply Arrangements
Standard 8: Counselling
Standard 9: Collaborative Care
Standard 15: Dose Administration Aids

RiskMan (intranet)

References	As Above

Definitions, Acronyms and Alternative Search Terms	
Term	Description
Authorised Officer:	under the MPTGA, this is the Chief Health Officer (CHO); or a person appointed by the Chief Health Officer (CHO) (section 274(2) MPTGA) as an authorised officer; or a police officer of or above the rank of sergeant.

Evidence			
Reference	**Method**	**Evidence Level (I-V)**	**Summary of Recommendation from this Reference**
N/A	N/A	N/A	N/A

National Safety and Quality Health Service Standards							
Clinical Governance	Partnering with Consumers	Preventing and Controlling Healthcare Associated Infection	Medication Safety	Comprehensive Care	Communicating for Safety	Blood Management	Recognising & Responding to Acute Deterioration
☒	☐	☐	☒	☐	☐	☐	☐