



ASHP Health-System Pharmacy Initiative
moving forward

Self-Assessment Tool

Description:

The ASHP Health-System Pharmacy 2015 Initiative consists of goals and objectives set forth to guide and improve the practice of pharmacy in hospitals and health-systems by the year 2015. As hospitals and health-systems strive to meet these goals and objectives, it is necessary to assess overall achievement while emphasizing areas of strength and focusing areas for improvement.

ASHP has developed this tool to foster the self-evaluation of the achievement of each goal and objective described in the 2015 Initiative. It will give guidance to score your assessment, create a list of focus areas for your practice site, and assist in your planning for improvement. This tool is meant to periodically help evaluate your hospital or health-system, and is not meant for a comparison between institutions.

Each statement has been derived from the corresponding 2015 objective.

Helpful hints:

- To **view the objective**, click on the **hyperlinked objective number**.
- Information about **national baselines** for each objective can also be found through the link. (National baselines reflect the percentage of hospitals that routinely meet each objective.)
- It is useful to print the **2015 Crosswalk** to reference information on each objective while filling out this tool.

Directions:

- 1) Print document.
- 2) Read each statement carefully to best assess your practice site.
- 3) Tally the number of A's, B's, C's, and D's for each goal. (Disregard the Not Applicable objectives during scoring)
- 4) Refer to the **Overall 2015 Achievement** section and the **To Prioritize Your Results** section located at the end of the tool.
- 5) Re-take periodically to re-examine focus areas and gauge the progress of your efforts.

ASHP Health-System Pharmacy 2015 Initiative Self-Assessment Tool					
<p>GOAL 1 Increase the extent to which pharmacists help individual hospital inpatients achieve the best use of medications.</p> <p style="text-align: center; color: #0056b3;"><i>Please rate each of the following statements as best describes your practice site:</i></p> <p>2015 Objective</p>	Fully Implemented Throughout	Fully Implemented for Some Areas	Formally Discussed/ Considered, Not Yet Implemented	No Discussion or Activity	Not Applicable to Setting
	A	B	C	D	N/A
1.1 Upon admission pharmacists take the medication history of a majority of INPATIENTS with complex and high-risk medication regimens ¹ .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2 Pharmacists monitor ² a majority of INPATIENTS with complex and high-risk medication regimens.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3 Pharmacists manage medication therapy for INPATIENTS with complex and high-risk medication regimens, in collaboration with other members of the health-care team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4 At discharge INPATIENTS with complex or high-risk medication regimens receive medication counseling ⁵ by a pharmacist.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.5 Pharmacists interface with INPATIENTS or their caregivers in a meaningful way that patients/caregivers will remember speaking with a pharmacist while in the hospital.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.6 Pharmacists ensure that effective medication reconciliation occurs during transitions across the continuum of care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To evaluate adherence with individual 2015 GOALS , tally the number of A's, B's, C's, & D's Totals:	_____	_____	_____	_____	

Complex or high-risk drug regimens are those that are particularly subject to potential danger or hazard: e.g. challenging dosing schedules or routes of administration, medications with documented and significant drug interactions, polypharmacy, and medications with a narrow therapeutic index, insulin, antithrombotics, chemotherapy, etc.

Medication reconciliation should occur at the point of admission, transfer, discharge or any other handoff to another setting, service provider, or level of care. The pharmacist ensuring that effective medication reconciliation occurs is intended to mean that the pharmacist assures quality of the process, whether they directly perform the reconciliation or not.

Monitoring is the ongoing review of the whole patient, reviewing pertinent patient data (e.g., laboratory values, medications, patient parameters) and evaluating patient response to therapy. Monitoring is NOT the routine profile review that pharmacists perform at transcription/data entry.

ASHP Health-System Pharmacy 2015 Initiative Self-Assessment Tool					
GOAL 2 Increase the extent to which health-system pharmacists help individual non-hospitalized patients achieve the best use of medications.	Fully Implemented Throughout	Fully Implemented for Some Areas	Formally Discussed/ Considered, Not Yet Implemented	No Discussion or Activity	Not Applicable to Setting
<i>Please rate each of the following statements as best describes your practice site:</i>	A	B	C	D	N/A
2015 Objective					
2.1 Pharmacists that provide CLINIC care have organizational authority ¹ to manage medication therapy for patients with complex and high-risk medication regimens ² in collaboration with other health-care members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2 Pharmacists routinely counsel ³ CLINIC patients with complex and high-risk medication regimens.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.3 Pharmacists manage medication therapy for HOME CARE PATIENTS with complex and high-risk medication regimens, in collaboration with other members of the health-care team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4 Pharmacists manage medication therapy for LONG TERM CARE PATIENTS with complex and high-risk medication regimens, in collaboration with other members of the health-care team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To evaluate adherence with individual 2015 GOALS , tally the number of A's, B's, C's, & D's	_____	_____	_____	_____	
Totals:					

Complex or high-risk drug regimens are those that are particularly subject to potential danger or hazard: e.g. challenging dosing schedules or routes of administration, medications with documented and significant drug interactions, polypharmacy, and medications with a narrow therapeutic index, insulin, antithrombotics, chemotherapy, etc.

Medication Therapy Management encompasses a broad range of professional activities and responsibilities within the licensed pharmacist's, or other qualified health care provider's, scope of practice. These services include but are not limited to the following, according to the individual needs of the patient: Performing or obtaining necessary assessments of the patient's health status; Formulating a medication treatment plan; Selecting, initiating, modifying, or administering medication therapy; Monitoring and evaluating the patient's response to therapy, including safety and effectiveness; Performing a comprehensive medication review to identify, resolve, and prevent medication-related problems, including adverse drug events; Documenting the care delivered and communicating essential information to the patient's other primary care providers; Providing verbal education and training designed to enhance patient understanding and appropriate use of his/her medications; Providing information, support services and resources designed to enhance patient adherence with his/her therapeutic regimens; Coordinating and integrating medication therapy management services within the broader health care-management services being provided to the patient.

ASHP Health-System Pharmacy 2015 Initiative Self-Assessment Tool					
GOAL 3 Increase the extent to which health-system pharmacists actively apply evidence-based methods to the improvement of medication therapy. <i>Please rate each of the following statements as best describes your practice site:</i> 2015 Objective	Fully Implemented Throughout A	Fully Implemented for Some Areas B	Formally Discussed/ Considered, Not Yet Implemented C	No Discussion or Activity D	Not Applicable to Setting N/A
3.1 Pharmacists are actively involved in providing care to individual patients that is based on evidence, such as the use of quality drug information resources, published clinical studies or guidelines, and expert consensus advice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2 Pharmacists are actively involved in the development and implementation of evidence-based drug therapy protocols and/or order sets.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.3 The pharmacy actively participates in hospital-wide efforts to ensure that patients receive evidence-based medication therapies required by the CMS hospital quality initiative, Joint Commission Core Measures, and/or state-based quality improvement and public reporting efforts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.4 Pharmacists are actively involved in medication- and vaccine-related infection control programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To evaluate adherence with individual 2015 GOALS , tally the number of A's, B's, C's, & D's Totals:	_____	_____	_____	_____	

Core measures currently include 21 clinical quality measures, 13 of which include medications. These include medications associated with an acute myocardial infarction (ASA, betablockers, ACE inhibitors, fibrinolytics), heart failure (ACE inhibitors or ARBs), Pneumonia (vaccination, ATB selection), surgical care improvement (prophylactic ATBs).

Infection control programs, for the purposes of this initiative, include all medication- or vaccination-related efforts related to minimizing infections in the hospital setting. This might include antimicrobial stewardship programs, efforts to increase vaccination rates, antibiotic surgical prophylaxis protocols, etc.

Evidence-based medicine use draws on the results of controlled clinical trials and consensus advice on best practices.

Evidence-based protocols are intended to include treatment protocols and order sets that are supported by evidence and clinical practice guidelines.

ASHP Health-System Pharmacy 2015 Initiative Self-Assessment Tool

GOAL 4 Increase the extent to which pharmacy departments in health systems have a significant role in improving the safety of medication use. <p style="text-align: center; color: #0056b3;"><i>Please rate each of the following statements as best describes your practice site:</i></p> 2015 Objective	Fully Implemented Throughout A	Fully Implemented for Some Areas B	Formally Discussed/ Considered, Not Yet Implemented C	No Discussion or Activity D	Not Applicable to Setting N/A
4.1 The pharmacy department participates in an organizational program to achieve documented improvement in the safety of all steps in medication use annually.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.2 The pharmacy department conducts an annual assessment of the processes used for compounding sterile medications throughout the health system, consistent with established standards and best practices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.3 Routine medication orders ¹ are reviewed by a pharmacist prior to administration of first doses. (objective- 95% of medication orders)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.4 Pharmacists ensure that patients receiving prophylactic antibiotics for surgical infections have their prophylactic antibiotic therapy discontinued within 24 hours after the surgery end time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.5 Pharmacy technicians are certified by the Pharmacy Technician Certification Board (PTCB).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.6 Pharmacy technicians entering hospital and health-system practice have completed an ASHP-accredited pharmacy technician training program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.7 Pharmacists entering hospital and health-system practice will have completed an ASHP-accredited residency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To evaluate adherence with individual 2015 GOALS , tally the number of A's, B's, C's, D's Totals:	_____	_____	_____	_____	

ASHP Health-System Pharmacy 2015 Initiative Self-Assessment Tool

GOAL 5 Increase the extent to which health systems apply technology effectively to improve the safety of medication use. <p style="text-align: center; color: #0056b3; font-style: italic;">Please rate each of the following statements as best describes your practice site:</p> 2015 Objective	Fully Implemented Throughout A	Fully Implemented for Some Areas B	Formally Discussed/ Considered, Not Yet Implemented C	No Discussion or Activity D	Not Applicable to Setting N/A
5.1 Machine-readable coding (bar-codes) is used to verify medications at the point of DISPENSING.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.2 At the point of ADMINISTRATION, <u>All</u> medication doses administered to patients are verified by machine-readable coding (bar-codes).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.3 Computerized-prescriber order entry (CPOE) systems that include clinical decision support ¹ are used for routine medication prescribing for inpatients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.4 Pharmacists use medication-relevant portions of electronic medical records to manage medication therapy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.5 To ensure continuity of pharmaceutical care, pharmacists are able to access pertinent patient information and communicate across settings of care ² for patients with complex and high-risk medication regimens.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To evaluate adherence with individual 2015 GOALS , tally the number of A's, B's, C's, & D's Totals:	_____	_____	_____	_____	

ASHP Health-System Pharmacy 2015 Initiative Self-Assessment Tool

GOAL 6 Increase the extent to which pharmacy departments in health systems engage in public health initiatives on behalf of their communities. <i style="color: blue;">Please rate each of the following statements as best describes your practice site:</i>	Fully Implemented Throughout	Fully Implemented for Some Areas	Formally Discussed/ Considered, Not Yet Implemented	No Discussion or Activity	Not Applicable to Setting
2015 Objective	A	B	C	D	N/A
6.1 The pharmacy department has specific ongoing initiatives that target community health ¹ .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.2 The pharmacy department is directly involved in ongoing immunization initiatives that target the community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.3 The pharmacy department ensures that eligible patients in the institution receive both influenza and pneumococcal vaccinations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.4 The pharmacy department ensures that hospitalized patients who smoke receive smoking-cessation counseling.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.5 The pharmacy department receives formal up-to-date emergency preparedness training that is integrated with community preparedness and response programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To evaluate adherence with individual 2015 GOALS , tally the number of A's, B's, C's, & D's Totals:	_____	_____	_____	_____	

Overall 2015 Achievement:

Goal: All applicable objectives in the A category.

2015 Goals (TOTALS)	A	B	C	D
GOAL 1 (Totals from page 2)	___	___	___	___
GOAL 2 (Totals from page 3)	___	___	___	___
GOAL 3 (Totals from page 4)	___	___	___	___
GOAL 4 (Totals from page 5)	___	___	___	___
GOAL 5 (Totals from page 6)	___	___	___	___
GOAL 6 (Totals from page 7)	___	___	___	___
To evaluate overall achievement of the 2015 Initiative tally the number of A's, B's, C's, and D's.	___	___	___	___
Totals (out of 31 objective):	___	___	___	___

To Prioritize Your Results:

Greater the number of Yes's = Higher priority for strategic implementation

Focus Objectives <i>(Begin with D's, C's, & then B's)</i>	Does this area align with our organizational priorities around quality and safety?	Do our organizational resources allow the advancement of this objective?	Are regulatory, quality, or accreditation organizations also endorsing this objective? <i>(See 2015 Crosswalk)</i>	Is this a high volume diagnosis or high cost for our institution?	Is high risk medication or a high risk patient population involved?	Sum of Yes's
Sample: Objective 2.4 (D)	Y or N	Y or N	Y or N	Y or N	Y or N	4
	Y or N	Y or N	Y or N	Y or N	Y or N	
	Y or N	Y or N	Y or N	Y or N	Y or N	
	Y or N	Y or N	Y or N	Y or N	Y or N	
	Y or N	Y or N	Y or N	Y or N	Y or N	
	Y or N	Y or N	Y or N	Y or N	Y or N	
	Y or N	Y or N	Y or N	Y or N	Y or N	
	Y or N	Y or N	Y or N	Y or N	Y or N	
	Y or N	Y or N	Y or N	Y or N	Y or N	
	Y or N	Y or N	Y or N	Y or N	Y or N	
	Y or N	Y or N	Y or N	Y or N	Y or N	
	Y or N	Y or N	Y or N	Y or N	Y or N	

To help us improve this tool, please send comments to 2015@ashp.org.