

Impact of Pharmacist Services Targeting Medication Safety and Patient Education in the Pediatric and Obstetric Settings

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Background

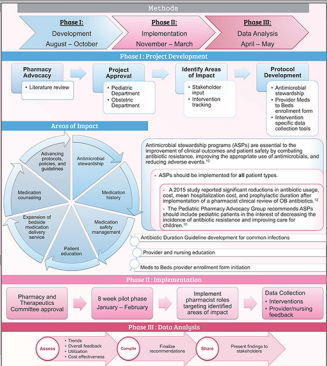
St. Peter's Health (SPH) continues to grow inpatient pediatric and obstetric (OB) service lines with the addition of new providers and services. In the past year, SPH has hired two pediatric hospitalists, leading to increased patient census as well as increased opportunities for pharmacist recommendations and interventions. The Joint Commission, the American Academy of Pediatrics, Pediatric Pharmacy Advisory Group, and American Society of Health System Pharmacists recommend to establish pediatric pharmacy services on the basis of quality of care, safety, and financial impact.^{1,2,3}

This prospective service development study will investigate the impact of a clinical pharmacist on medication safety and patient outcomes in the pediatric and obstetric settings.

According to guidelines for preventing medication errors in pediatrics, a pharmacist's specialized knowledge of medications and their role in the drug distribution process are essential to preventing medication errors and ensuring appropriate medication use.⁴ Pharmacists can be helpful prior to patient discharge in making certain that patients and/or caregivers have all the necessary drug information and knowledge to correctly measure and administer post-discharge medication therapy. Clinical pharmacists not only improve drug safety, but can also help decrease costs, improve quality of pharmacotherapy, and refine a patient's drug knowledge.^{1,4,5}

Obstetric outcomes in the United States have worsened since 1987.⁶ In 2020, the Joint Commission stated health systems must improve quality and safe care for women during all stages of pregnancy and in the postpartum period.⁷ This population presents a variety of unique physiologic and pharmacokinetic changes requiring careful medication prescribing and dosing, in addition to requiring some high-risk medications throughout their course of care. Pharmacists can help bridge the gap between the lack of medication-related data and medication-decision making in the OB patient population. The expansion of pharmacy services to this vulnerable population is the next step to improving outcomes.⁸

- Objectives**
- Primary Objective:** To evaluate the impact of pharmacist services targeting medication safety and patient education in the pediatric and obstetric settings
- Secondary Objectives:**
1. Assess for an appropriate medication history process
 2. Assess impact of expanding Meds to Beds service to pediatric/obstetric floor
 3. Assess for appropriate discharge education
 4. Track pharmacist time spent and impact of medication safety interventions
 5. Identify areas of improvement in antibiotic therapy in the pediatric, obstetric, gynecologic, and women's health population



Proposed Pediatric/Obstetric Pharmacist Responsibilities

Antimicrobial stewardship	Medication history	Medication safety management
Patient education	Bedside medication delivery service	Medication counseling
Advance protocols, policies, and guidelines	Alleviate gaps in clinical efficacy and safety data of medications	

Discussion

Based on other models, studies, guidelines, and recommendations, clinical pharmacists play a substantial role in the pediatric and obstetric settings.¹³

This prospective service development project will involve working collaboratively with pediatric hospitalists, obstetric providers and nurses to identify areas of the biggest impact. Throughout the pilot phase, the pharmacist will focus on collecting supporting data to demonstrate improvements in provider and patient satisfaction, cost savings, promotion of medication safety, and guideline-based care in the infectious disease setting. Expansion of the Meds to Beds service will also allow more patients/caregivers to benefit from the convenience of bedside prescription delivery and thorough medication education upon discharge.

References



Author Disclosures

Authors of this presentation have the following to disclose concerning possible financial/personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation: Keasty Jessop: Nothing to Disclose, Shayla Barraclough: Nothing to Disclose, Jada Cunningham: Nothing to Disclose, Heidi Simons: Nothing to Disclose, Aimee Thornton: Nothing to Disclose.