



INTEGRATING ON-SITE PHARMACISTS INTO RESIDENTIAL AGED CARE FACILITIES

RESIDENTIAL AGED
CARE FACILITY'S
HANDBOOK



UNIVERSITY OF CANBERRA

The University of Canberra acknowledges the Ngunnawal people, traditional custodians of the lands where Bruce Campus is situated. We wish to acknowledge and respect their continuing culture and the contribution they make to the life of Canberra and the region. We also acknowledge all other First Nations Peoples on whose lands we gather.



Suggested citation: Kosari S, Naunton M, Koerner J, Haider I, Batten M, Dale M, Davey, R and the Study Team. (2022) Integrating On-Site Pharmacists into Residential Aged Care Facilities – RACF Handbook. University of Canberra, Canberra.

Contact

e racfstudy@canberra.edu.au

www.canberra.edu.au/research/institutes/health-research-institute/pharmacists-in-residential-aged-care-facilities

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USING THE ON-SITE PHARMACIST'S HANDBOOK



This Handbook provides practical information and guidance for residential aged care facilities (RACFs) to integrate an on-site pharmacist into their facility. It contains:

OVERVIEW OF THE ON-SITE PHARMACIST MODEL OF CARE

Use this to understand the on-site pharmacist model of care and its benefits to residential aged care facility residents, families, staff and other health care professionals.

➔ See pages 3–4

POSITION DESCRIPTION

Use this to assist with recruiting the on-site pharmacist.

➔ See page 5

ORIENTATION CHECKLIST

Go through this checklist with the on-site pharmacist at commencement in the facility and 3 months afterwards.

➔ See pages 7–8

TEMPLATE LETTER FOR RESIDENTS, FAMILIES AND CARERS

Use this Template Letter to introduce the on-site pharmacist to residents, families and carers.

➔ See page 10

TEMPLATE LETTER FOR FACILITY STAFF

Use this Template Letter to introduce the on-site pharmacist to nurses and care staff.

➔ See page 11

TEMPLATE LETTER FOR GPs, PRESCRIBERS AND HEALTH CARE PROFESSIONALS

Use this Template Letter to introduce the on-site pharmacist to GPs, prescribers and health care professionals.

➔ See page 12

ABOUT THE ON-SITE PHARMACIST MODEL OF CARE

Residents in residential aged care often have multiple co-morbidities and are prescribed large numbers of medication, which increases their risk of medication-related problems and drug adverse events, including hospitalisation.

The on-site pharmacist in residential aged care model is a new model of care where a qualified pharmacist, employed by the facility, works with residents, families, carers, facility staff, GPs and other health care professionals, facility staff to improve medication management.

THE ON-SITE PHARMACIST'S ROLE AND ACTIVITIES

The on-site pharmacist conducts activities that are within their scope of practice as an Australian health care professional registered with Australian Health Professional Registered Agency.

On-site pharmacist's activities include, but are not limited to:

- conducting clinical audits of resident's medication charts to identify residents at high-risk of medication related harms. Examples include Potentially Inappropriate Medications (PIMs) and other high-risk medications, such as psychotropic medicines, opioids, and antibiotics
- conducting medication reviews, where an on-site pharmacist reviews resident's medications at any time required, including following a clinical audit or at transitions of care, such as when a resident enters the facility, returns from hospital, is diagnosed with a new condition, or is referred to palliative care
- providing ad-hoc and regular education to RACF staff about medication management through individual and group education sessions, including training and assessment of medication administration competencies
- discussing resident's medication management with residents, families, carers and RACF staff
- reconciling residents' medications at transition of care, to ensure new medication regimes are correctly updated and that the resident and staff are aware of changes
- optimising the process of administering medicines during medication rounds to improve efficiencies and reduce time spent
- improving resident's clinical documentation to ensure allergies and diagnoses are up to date
- participating in residents' case conferences (multidisciplinary case conferences with GPs, residents, families, RACF staff, and other health care professionals)
- liaising with GPs and prescribers and other health care professionals including community and hospital pharmacists, occupational and speech therapists, dietitians, nurse practitioners, geriatricians, and specialists to improve resident's medication management
- reviewing medication incidents and taking appropriate quality improvement actions
- developing and updating RACF medication management policies and procedures such as medication storage, disposal of medicines, and psychotropic medicines reporting
- vaccination and coordinating vaccinations of residents and staff against influenza and COVID-19 (as per state and territory legislation)
- undertaking professional development

THE BENEFITS OF THE ON-SITE PHARMACIST MODEL OF CARE

The on-site pharmacist model of care, evaluated in the Pharmacists in Residential Aged Care Facilities (PiRACF) study, has been found to improve medication management in RACF settings including in reducing: the proportion of residents prescribed PIMs, anti-cholinergic burden of medicines prescribed, and dose of antipsychotic medicines prescribed. The model also established positive collaborative relationships between on-site pharmacists, RACF staff and GPs and was shown to potentially become a part of routine practice and normalised in RACFs.¹

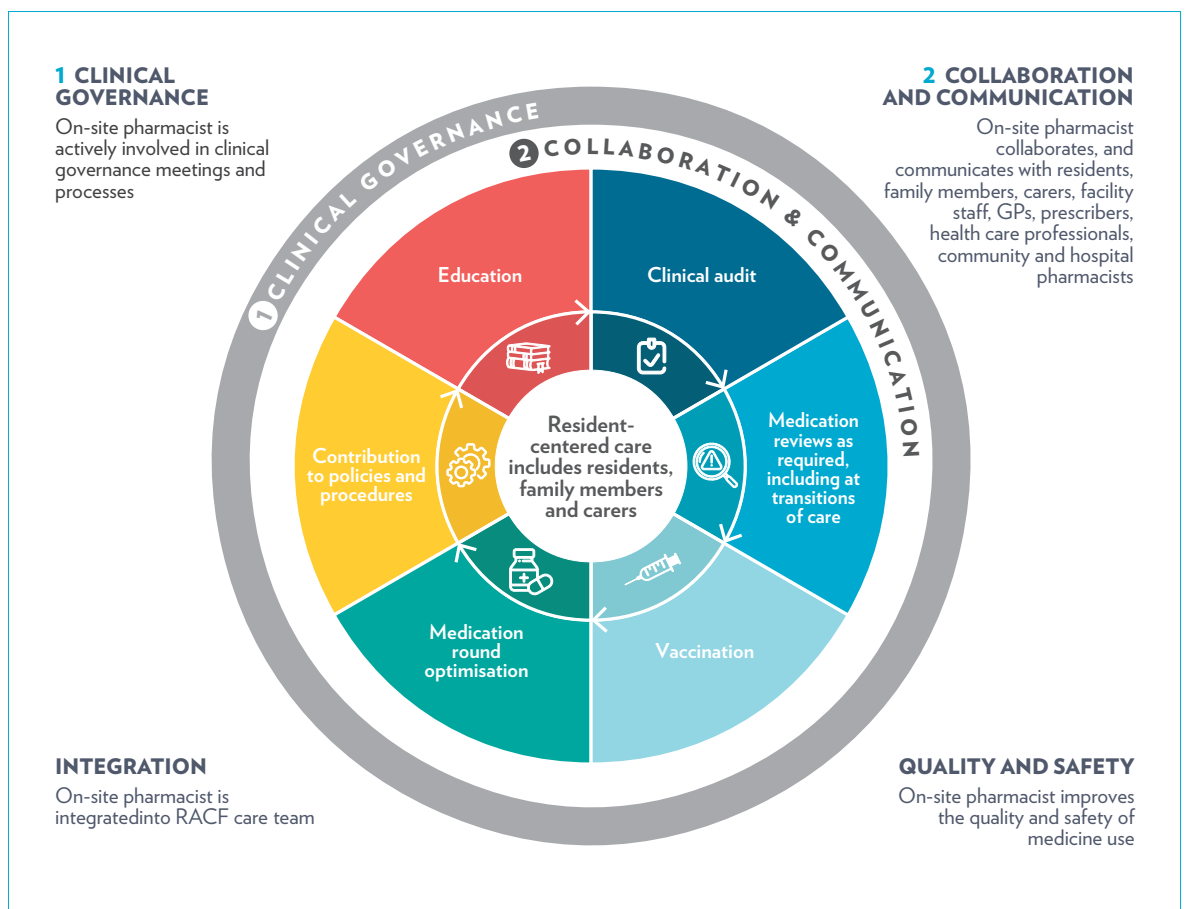


FIGURE 1. On-site pharmacists' activities in RACFs

1 Kosari S, Naunton M, Koerner J, Lancsar E, Munira L, Haider I, Batten M, Dale M, Davey, R and the Study Team. (2022) Pharmacists in Residential Aged Care Facilities (PiRACF) Study – Final Evaluation Report. University of Canberra, Canberra.

POSITION DESCRIPTION

The following position description may be used in the recruitment of your on-site pharmacist — please adapt it to suit your organisation's requirements.

ON-SITE PHARMACIST POSITION DESCRIPTION

The pharmacist will work under the general direction of the Residential Aged Care Facility (RACF) manager or care manager and will collaborate with RACF staff, GPs and prescribers (nurse practitioners, geriatricians, and specialists), health care professionals, and community and hospital pharmacists. Pharmacists will conduct activities within their scope of practice as a registered pharmacist and relevant to the clinical pharmacist role to improve the quality use of medicines and resident-centred care.

Duties

The pharmacist's duties will include:

- conducting clinical audits to identify residents most at risk of medication related problems and hospitalisations
- conducting medication reviews at any time required, including following a clinical audit or at transitions of care, such as when a resident enters the facility, returns from hospital, is diagnosed with a new condition, or referred to palliative care
- assessing and advising on resident's medication management
- liaising with residents, families and carers, RACF staff, GPs and prescribers (nurse practitioners, geriatricians, and other specialists), dietitians, speech pathologists, occupational therapists, and community and hospital pharmacists to coordinate medication-related issues
- participating in multidisciplinary case conferences
- improving resident's clinical documentation
- providing medication reconciliations at transition of care
- providing ad-hoc and regular education to staff on medications management, including assessing medication administration competencies
- contributing to and improving medication management policies and procedures
- participating in relevant committees including Medication Advisory Committee
- reviewing and optimising medication rounds
- conducting and coordinating vaccinations

Rate of pay — \$50 per hour



INTEGRATING THE ON-SITE PHARMACIST INTO YOUR FACILITY

Integration is key to the success of the on-site pharmacist's role. Ways in which the RACF can support integration of the on-site pharmacist are outlined in the orientation checklist below. It includes ways to orientate the pharmacist to the facility and identify priority activities. We suggest the facility manager and clinical manager work through this and then shares a copy with the on-site pharmacist.

ORIENTATION CHECKLIST

IN THE FIRST 1 TO 2 WEEKS		
Checked	Item	Comments
<input type="checkbox"/>	Ensure the on-site pharmacist completes the facility's induction processes	
<input type="checkbox"/>	Identify the on-site pharmacist's line manager and discuss preferred communication processes e.g., weekly face to face meeting, emails	
<input type="checkbox"/>	Ensure the pharmacist has access to facility information systems, including: <ul style="list-style-type: none"> • resident records • medication charts • My Health Records • Email • access to a computer • eMIMS or similar resources 	
<input type="checkbox"/>	Go through the position description and pharmacist's activities (see pages 3–5) and identify priority activities for the facility	
<input type="checkbox"/>	Introduce the on-site pharmacist to residents, families and carers: <ul style="list-style-type: none"> • Send the Introduction letter to residents, families and carers (see Template Letter, page 10) • Invite the on-site pharmacist to attend residents and families' meetings • Invite the on-site pharmacist to contribute an article to the residents and family's newsletter 	
<input type="checkbox"/>	Introduce the on-site pharmacist to facility staff, including care managers, RNs, ENs, and care staff: <ul style="list-style-type: none"> • Introduce the on-site pharmacist to facility staff at clinical and staff meetings • Discuss the activities the on-site pharmacist will be conducting in the facility • Send the Introduction letter to RACF managers and facility staff (see Template Letter, page 11) 	

ORIENTATION CHECKLIST (*continued*)

IN THE FIRST 1 TO 2 WEEKS		
Checked	Item	Comments
<input type="checkbox"/>	<p>Introduce the on-site pharmacist to health care staff who visit the facility and discuss how the on-site pharmacist can collaborate with them, including:</p> <ul style="list-style-type: none"> – GPs – Geriatricians and specialists – Community/supply pharmacist – Nurse practitioners – Specialist palliative care team – Other relevant health care professionals such as dietitians, occupational therapists, speech pathologists. <ul style="list-style-type: none"> • Provide the on-site pharmacist with a list of GPs and their contact details for GPs • Introduce the on-site pharmacist to GPs, prescribers and other health care professionals when they visit the facility • Invite the on-site pharmacist to attend resident's case conferences • Send the Introduction letter to GPs, prescribers and health care professionals (see Letter Template, page 12) 	
ONGOING		
<input type="checkbox"/>	<p>Invite the on-site pharmacist to attend and actively contribute to clinical governance at the facility, including participating in the relevant committees and meetings:</p> <ul style="list-style-type: none"> • Medication Advisory Committee • Committees assessing falls, medication incidents, quality and safety, and Anti-Microbial Stewardship • Attend hand over and clinical meetings 	
<input type="checkbox"/>	<p>Involve the on-site pharmacist in reviewing and improving medication management policies and procedures including:</p> <ul style="list-style-type: none"> • Reviewing and updating medication management policies and procedures • Updating resident's clinical documentation including allergies, adverse drug reactions and diagnoses • Ensuring S8 medicines are used, stored and disposed of according to legislation 	
<input type="checkbox"/>	<p>Invite the on-site pharmacist to develop systems to review resident's medications at transitions of care such as when residents enter the facility, after an Emergency Department or hospital admission, when a resident has declining health, or admission to palliative care</p>	
<input type="checkbox"/>	<ul style="list-style-type: none"> • Identify priorities for regular individual and group education sessions around medication management for new and existing staff and encourage staff to attend these • Involve the pharmacist in assessing staff medication administration competencies 	
<input type="checkbox"/>	<ul style="list-style-type: none"> • Invite the on-site pharmacist to observe medication administration rounds and advise on ways to improve efficiencies 	
<input type="checkbox"/>	<ul style="list-style-type: none"> • Discuss vaccination processes and how the pharmacist can conduct or contribute to improving staff and resident's vaccination uptake 	
3 MONTHS AFTER COMMENCEMENT		
<input type="checkbox"/>	<p>Review pharmacist activities and this checklist with on-site pharmacist</p>	

ENCOURAGING EFFECTIVE COMMUNICATION AND COLLABORATION

The success of the pharmacist's role will depend on effective communication and collaboration with GPs and prescribers, health care professionals (including community and hospital pharmacists, occupational and speech therapists and dietitians) facility staff, and residents, family and carers.

Facility and clinical managers can play an important role in supporting collaboration within the care team and the development of effective communication channels. Use the following templates within the first 1–2 weeks after the on-site pharmacist commences to introduce the on-site pharmacist:

- **Template Letter for residents, families and carers:** Introducing the on-site pharmacist to residents, families and carers (see page 10)
- **Template Letter for facility staff:** Introducing the on-site pharmacist to nurses and care staff (see page 11)
- **Template Letter for GPs, prescribers and health care professionals:** Introducing the on-site pharmacist to GPs, prescribers and health care professionals (see page 12)

INTRODUCING THE ON-SITE PHARMACIST TO RESIDENTS, FAMILIES AND CARERS

Dear residents, families and carers

Introducing the on-site pharmacist

As an on-site pharmacist has been employed at this facility, they will work with us to improve medication management and reduce overall care, making collaborating with residents, families and carers as well as facility staff, GPs and health care professionals who are involved with resident care.

ON-SITE PHARMACIST DETAILS

PREVIOUS NAME	LAST NAME	
LOCATION		
CONTACT	Phone	Mobile
	Facility	
SPECIALTIES	Geriatric <input type="checkbox"/> Geriatrics <input type="checkbox"/> Pharmacy <input type="checkbox"/> Clinical <input type="checkbox"/> Public <input type="checkbox"/> Practice <input type="checkbox"/>	Geriatric <input type="checkbox"/> Geriatrics <input type="checkbox"/> Pharmacy <input type="checkbox"/> Clinical <input type="checkbox"/> Public <input type="checkbox"/> Practice <input type="checkbox"/>

The on-site pharmacist is required to work with the supported care of patients. They have also undertaken training in the aged care clinical context and will make recommendations only on issues based on the resident's best interests.

Residents, family members and carers may be invited to discuss medication with the on-site pharmacist. They are welcome to contact them and discuss any questions or queries you may have about your medication and/or medicine issues.

Please contact the on-site pharmacist for any queries about medication management.

INTRODUCING THE ON-SITE PHARMACIST TO RACF STAFF

Dear residential aged care staff

Introducing the on-site pharmacist

As an on-site pharmacist has been employed at this facility, they will work with us to improve medication management and reduce overall care, making collaborating with residents, families and carers as well as facility staff, GPs and health care professionals who are involved with resident care.

ON-SITE PHARMACIST DETAILS

PREVIOUS NAME	LAST NAME	
LOCATION		
CONTACT	Phone	Mobile
	Facility	
SPECIALTIES	Geriatric <input type="checkbox"/> Geriatrics <input type="checkbox"/> Pharmacy <input type="checkbox"/> Clinical <input type="checkbox"/> Public <input type="checkbox"/> Practice <input type="checkbox"/>	Geriatric <input type="checkbox"/> Geriatrics <input type="checkbox"/> Pharmacy <input type="checkbox"/> Clinical <input type="checkbox"/> Public <input type="checkbox"/> Practice <input type="checkbox"/>

The on-site pharmacist is required to work with the supported care of patients. They have also undertaken training in the aged care clinical context and will make recommendations for use in consultation with other facility staff to improve medication management for residents.

Aspects that the on-site pharmacist may assist with include:

- Conducting staff education to identify and resolve all of medication related problems and requirements
- Assessing and advising on incident of medication management
- Leading staff (GPs and prescribers, nurses, pharmacists, geriatrics, and other specialist) doctors, speech, occupational therapists, and community health pharmacists to coordinate medication related care
- Participating in multi-disciplinary case conferences
- Supporting resident drug assessment
- Medication reconciliation on admission of care
- Providing education on staff or medication management, including assessing medication administration competencies
- Contributing to medication management policies and procedures
- Monitoring and advising medication needs
- Contributing to medication management policies and procedures
- Conducting risk monitoring activities

Please contact the on-site pharmacist for any queries about medication management.

INTRODUCING THE ON-SITE PHARMACIST TO GPs, PRESCRIBERS AND HEALTH CARE PROFESSIONALS

Dear GPs, prescribers (both practitioners, geriatrics and specialists) and health care professionals

Introducing the on-site pharmacist

As an on-site pharmacist has been employed at this facility to improve medication management and reduce overall care. They will work collaboratively with residents, families and carers as well as facility staff, GPs and health care professionals who are involved with resident care.

ON-SITE PHARMACIST DETAILS

PREVIOUS NAME	LAST NAME	
LOCATION		
CONTACT	Phone	Mobile
	Facility	
SPECIALTIES	Geriatric <input type="checkbox"/> Geriatrics <input type="checkbox"/> Pharmacy <input type="checkbox"/> Clinical <input type="checkbox"/> Public <input type="checkbox"/> Practice <input type="checkbox"/>	Geriatric <input type="checkbox"/> Geriatrics <input type="checkbox"/> Pharmacy <input type="checkbox"/> Clinical <input type="checkbox"/> Public <input type="checkbox"/> Practice <input type="checkbox"/>

The on-site pharmacist is required to work with the supported care of patients. They have also undertaken training in the aged care clinical context and will make recommendations based on the resident's best interests to improve medication management for residents.

Aspects that the on-site pharmacist may assist with include:

- Conducting staff education to identify medication issues of medication related problems and requirements
- Assessing and advising on incident of medication management
- Leading staff (GPs and prescribers, nurses, pharmacists, geriatrics, and other specialist) doctors, speech, occupational therapists, and community health pharmacists to coordinate medication related care
- Participating in multi-disciplinary case conferences
- Supporting resident drug assessment
- Medication reconciliation on admission of care
- Providing education on staff or medication management, including assessing medication administration competencies
- Contributing to medication management policies and procedures in facilities
- Monitoring and advising medication needs
- Contributing to medication management policies and procedures
- Conducting risk monitoring activities

The on-site pharmacist may contact you to discuss medication management related issues. They are welcome to contact you and discuss any questions or queries you may have about your medication and/or medicine issues.

Please contact the on-site pharmacist for any queries about medication management.

INTRODUCING THE ON-SITE PHARMACIST TO RESIDENTS, FAMILIES AND CARERS

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Dear residents, families and carers

Introducing the new on-site pharmacist

An on-site pharmacist has been employed in this facility. They will work with us to improve medication management and resident centred care, working collaboratively with residents, families and carers as well as facility staff, GPs and health care professionals who are involved with residents' care.

ON-SITE PHARMACIST'S DETAILS

FIRST NAME:

LAST NAME:

LOCATION:

CONTACT:

Phone:

Mobile:

Email:

DAYS ON DUTY:

Monday: Hours:Tuesday: Hours:Wednesday: Hours:Thursday: Hours:Friday: Hours:Saturday: Hours:Sunday: Hours:

The on-site pharmacist is registered and will work within their recognised scope of practice. They have also undertaken training in the aged care clinical context and will make recommendations using evidence-based tools to improve medicine management for residents.

Residents, family members and carers may be invited to discuss medications with the on-site pharmacist. You are welcome to contact them and discuss any questions or queries you may have about your medications and how to take them.

INTRODUCING THE ON-SITE PHARMACIST TO RACF STAFF

Dear residential aged care staff

Introducing the new on-site pharmacist

An on-site pharmacist has been employed in this facility. They will work with us to improve medication management and resident centred care, working collaboratively with residents, families and carers as well as facility staff, GPs and health care professionals who are involved with each resident's care.

ON-SITE PHARMACIST'S DETAILS			
FIRST NAME:	LAST NAME:		
LOCATION:			
CONTACT:	Phone:	Mobile:	
	Email:		
DAYS ON DUTY:	Monday: <input type="checkbox"/> Hours:	Tuesday: <input type="checkbox"/> Hours:	
	Wednesday: <input type="checkbox"/> Hours:	Thursday: <input type="checkbox"/> Hours:	
	Friday: <input type="checkbox"/> Hours:	Saturday: <input type="checkbox"/> Hours:	
	Sunday: <input type="checkbox"/> Hours:		

The on-site pharmacist is registered and will work within their recognised scope of practice. They have also undertaken training in the aged care clinical context and will make recommendations for our consideration using evidence-based tools to improve medicine management for residents.

Activities that the on-site pharmacist can assist with include:

- Conducting clinical audits to identifying residents most at risk of medication related problems and hospitalisations
- Assessing and advising on resident's medication management
- Liaising with GPs and prescribers (nurse practitioners, geriatricians, and other specialists), dietitians, speech pathologists, occupational therapists, and community and hospital pharmacists to coordinate medication- related issues
- Participating in multidisciplinary case conferences
- Improving resident's clinical documentation
- Medication reconciliation at transition of care
- Providing education to staff on medications management, including assessing medication administration competencies
- Contributing to medication management policies and procedures
- Reviewing and optimising medication rounds
- Contributing to medication management policies and procedures
- Conducting and coordinating vaccinations

Please contact the on-site pharmacist for any queries about medication management.

INTRODUCING THE ON-SITE PHARMACIST TO GPs, PRESCRIBERS AND HEALTH CARE PROFESSIONALS

Dear GPs, prescribers (nurse practitioners, geriatricians and specialists) and health care professionals

Introducing the new on-site pharmacist

An on-site pharmacist has been employed in this facility to improve medication management and resident centred care. They will work collaboratively with residents, families and carers as well as facility staff, GPs and health care professionals who are involved with residents' care.

ON-SITE PHARMACIST'S DETAILS

FIRST NAME:

LAST NAME:

LOCATION:

CONTACT:

Phone:

Mobile:

Email:

DAYS ON DUTY:

Monday: Hours:

Tuesday: Hours:

Wednesday: Hours:

Thursday: Hours:

Friday: Hours:

Saturday: Hours:

Sunday: Hours:

The on-site pharmacist is registered and will work within their recognised scope of practice. They have also undertaken training in the aged care clinical context and will make recommendations using evidence-based tools to improve medicine management for residents.

Activities that the on-site pharmacist may assist with include:

- Conducting clinical audits to identify residents most at risk of medication related problems and hospitalisations
- Assessing and advising on resident's medication management
- Liaising with GPs and prescribers (nurse practitioners, geriatricians, and other specialists), dietitians, speech pathologists, occupational therapists, and community and hospital pharmacists to coordinate medication- related issues
- Participating in multidisciplinary case conferences
- Improving resident's clinical documentation
- Providing education to staff on medications management
- Contributing to medication management policies and procedures in facilities
- Conducting and coordinating vaccinations

The on-site pharmacist may contact you to discuss residents' medications management related issues. We invite you to work collaboratively with them. Please contact the on-site pharmacist to discuss any aspect of residents' medication management.



**UNIVERSITY OF
CANBERRA**

Canberra ACT 2601 Australia

T +61 2 6201 5111

canberra.edu.au