



# Strengthening Governance Regulations for Pharmaceutical Samples

**Logan Hospital**

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**HRT 1713 'B14 - Medication Improvement'**

**21 & 22 June 2017**

**Brisbane**



# Key Problem

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- Governance arrangements/procedures over management of sample packs were not being followed
- Issues identified around storage, checking expiry dates, prescribing, dispensing, documentation, quality control
  - In some instances sample packs were being distributed direct from pharma to clinicians and hence bypassing standard governance processes
- Both non formulary and at times non PBS samples
- Often commencing for long term management of chronic disease
- Ethical issues raised over
  - starting patients on expensive long term non PBS medications
  - 'free' PBS but non LAM as no objective measure for clinicians to choose who was most in need of 'free medications'
  - Clinicians were distributing these to their patients based on their personal assessment of the patients financial position to afford the non LAM medications (effectively without access to an objective measure and hence of questionable probity)

# Aim of this innovation

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- Consultation with stakeholders around current processes to ensure clear understanding of the issue/s
- Introduction of clear governance processes in consultation with stakeholders for management of sample packs
  - placed sole control within the Pharmacy Department
- Single process that would apply across all departments and locations in the hospital
- Improved patient equity plus enhanced ethical and professional practice

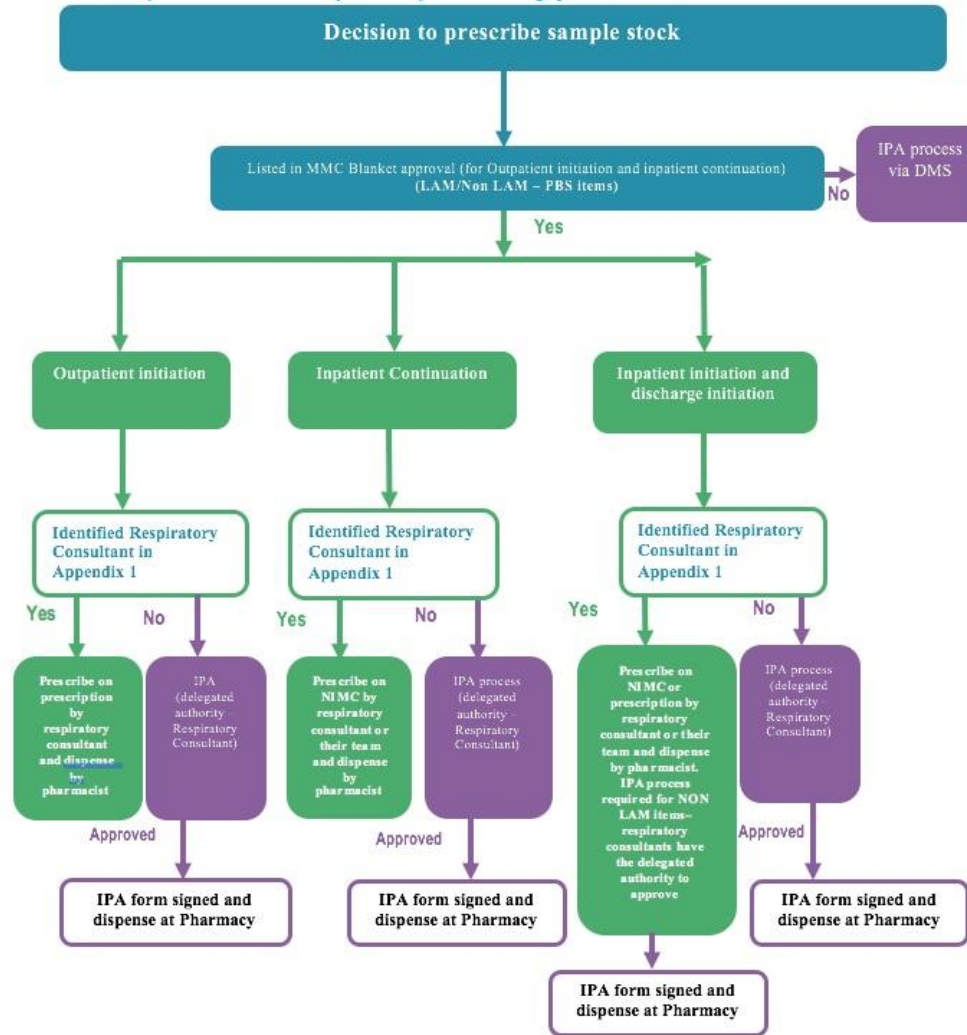
# Outcomes

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- Extensive consultation process with stakeholder engagement across divisions
- Formal feedback to the Medication Management Committee to stake case to have sample packs available
- All samples must be pre-approved by Pharmacy and Medication Management Committee
- Only PBS approved medications
- Only for outpatient initiation / inpatient continuation
- Only dispensed on authorised consultant written prescription
- Pharmacy control delivery, storage, stock control, dispensing, audit
- Pharmacy will charge a dispensing fee (per QH guidelines) unless quantity is less than standard PBS prescription

# Key Changes Implemented

## Sample Stock (Respiratory) Flow Chart



# Outcomes so far

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- Co-operative acceptance across the institution

# Lessons Learnt

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- We were able to achieve our goal through:
  - Inclusive approach involving pharmacy, governance and clinicians
  - Inviting those potentially affected to contribute to the process
  - Respectful and considerate across the range and diversity of opinions
  - Allowing the process to mature across a reasonable timeframe
  - Guided by our agreed underlying concern of respect for our patients and to ensure their safety
  
- For more information Contact:
  - Director of Pharmacy
  - Logan Hospital



