

improve patient outcome and patient care, in order to support a hospital pharmacy CTF legislation process in the European Union.

Material and methods We identified 70 publications based on data up to 2010 from our previous study¹ and were evaluated with indepth assessment regarding pharmacists' qualifications.

Results Forty (57%) publications had sufficient information on the qualifications of pharmacists and an additional 7 (10%) papers had partial information. Of the papers with detailed information on pharmacists' qualifications, 30 (43%) defined the pharmacists as 'clinical pharmacists' having additional training. Other qualifications were mentioned, such as intensive care, pain, oncology, paediatric, internal medicine and infectious diseases specialised pharmacists, that also verified the importance of postgraduate training. Further information on the qualifications of pharmacists were included in additional training to highlight their competency in clinical services. The publications provided evidence of the positive effect of pharmaceutical interventions for patient outcomes in many fields, including internal medicine, acute care medicine, oncology, paediatrics and surgery, also demonstrating the economic benefits of the interventions.

Conclusion and relevance Clear evidence was provided that only qualified pharmacists with a postgraduate education can provide the correct services to patients and consequently improve their outcomes, similar to other professions (physicians and nurses) in the healthcare system.

REFERENCES AND/OR ACKNOWLEDGEMENTS

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No conflict of interest.

6ER-019 TEACHING AND LEARNING EFFECT ANALYSIS OF AN INTERPROFESSIONAL TRAINING PROGRAMME FOR UNDERGRADUATE PHARMACY INTERNS

¹YN Lin*, ²CW Huang. ¹Tainan Municipal Hospital managed by Show Chwan Medical Care Corporation, Pharmacy, Tainan, Taiwan ROC; ²Chia Nan University of Pharmacy and Science, Pharmacy, Tainan, Taiwan ROC

10.1136/ejhp-pharm-2020-eahpconf.454

Background and importance Insufficient communication and lack of integration between medical departments can lead to adverse events.

Aim and objectives The purpose of interprofessional education (IPE) is to educate students on how to enhance their interprofessional practice (IPP) and improve healthcare outcomes for patients through teamwork.

Material and methods Clinical teachers and students (undergraduate pharmacy interns) attended at least three consensus meetings between medical departments for a patient based situation, such as bisphosphonate related osteonecrosis of the jaw. Data on teaching and the learning effect were collected with a 5 point questionnaire (threshold based on expert validity as 3) between November 2016 and September 2019. The outcome of two way feedback between the clinical teachers and students was evaluated with a one sample t test using SPSS (Statistical Product and Service Solutions) V.23.0.

Results Thirty-eight questionnaires were collected for each patient based situation. The average score was up to 3 for teachers assessing students and up to 4 for students assessing

teachers. An improvement in knowledge and skill with the interprofessional training was found (eg, an increase in understanding of common morbidities and diseases (4.39 ± 0.59), improved communication skills with other professionals (4.37 ± 0.63) and increasing familiarity with the referral process between medical departments (3.24 ± 0.63)). The satisfaction of students with the interprofessional training was as follow: appropriately arranged learning content (4.58 ± 0.55), meeting time (4.24 ± 0.68) and instructor qualifications (4.66 ± 0.58).

Conclusion and relevance Our results indicated that interprofessional training for a patient based situation had a positive influence on students' collaboration with medical departments. Several patient based situations translated to IPE/IPP in our hospital were listed in a book and published as a reference teaching material.

REFERENCES AND/OR ACKNOWLEDGEMENTS

No conflict of interest.

6ER-020 STANDARDISATION OF PROCESSES BY ELECTRONIC ASSISTED PRESCRIPTION PROGRAMME IN A UNIVERSITY PAEDIATRIC HOSPITAL

MA Pérez-Moreno*, C Álvarez Del Vayo-Benito, M Moleón-Ruiz, E Alfaro-Lara, F Araujo-Rodríguez, A Monzón-Moreno. Hospital Universitario Virgen Del Rocío, Pharmacy Department, Seville, Spain

10.1136/ejhp-pharm-2020-eahpconf.455

Background and importance Standardisation of processes and electronic assisted prescription programmes (EAPP) are essential tools to prevent medication errors, especially relevant in vulnerable populations, such as children.

Aim and objectives To standardise the processes associated with pharmaceutical prescriptions for hospitalised paediatric patients in a university hospital, through an EAPP, as a precursor to the installation of automatic dispensing cabinets.

Material and methods The study was conducted in a tertiary university paediatric hospital with intensive care (ICU) and paediatric onco-haematology units (reference population 557 576 inhabitants), during the period July 2018 to June 2019.

Interventions performed to ensure patient safety during EAPP implementation were: (1) meetings with professionals involved to agree on particularities/actions; (2) adaptation/validation of drug information in the EAPP to the paediatric population; (3) configuration of the EAPP login credentials; (4) training activities for nurses (all individualised sessions as required by work shifts) and doctors (group sessions to explain the tool and individualised training to prescribe); (5) protocolisation of pharmaceutical prescriptions for frequent pathologies; and (6) standardisation of intravenous infusions (fixed concentrations) for administration of drugs in the ICU.

The process was conducted in areas with simple prescriptions to those with more complex prescriptions. As an initial pilot, one area maintained a double prescription system to detect weaknesses/areas of improvement. Pharmacists performed pharmaceutical validation of prescriptions and spent part of their time in the paediatric units resolving doubts/problems and detecting/correcting errors.

Results Around 1500 medication sheets were reviewed/completed with dosage regimens according to weight/paediatric age group/indication, standardised administration schedules and medication alerts. Login users reviewed 50 residents, 87 doctors and 160 nurses.