patients who collected medicines from the pharmacy. This included adult male and female patients above 12 years. Their responses were recorded and tallied in the register book. This study was carried out between October 2017 and December 2017.

Results Eleven factors were established. Out of 5235 patients who received pharmaceutical services, 1641 patients were interviewed. The dispensing design factor represented 23.45%, while the least was the language factor with 0.24%.

Abstract 4CPS-257 Table 1 Factors that influence the patients from getting clear medication instructions

Factor (s)	Number of patients	%
1. Design of dispensing bench	384	23.45
2. Overcrowding at the dispensing window	312	19.01
3. Lack of concentration	172	10.48
4. Distractions i.e noise	156	9.50
5. Interruption by phone	143	8.71
6. Dispenser's attitude	90	5.48
7. Polypharmacy	23	1.40
8. Patient's state of mind	19	1.15
9. Dispensed want was not expected	11	0.67
10. Not feeling well	9	0.54
11. Language	4	0.24
12. Others	318	19.37

Conclusion Health professionals have a duty to ensure that instructions are given to the patients with clear understanding in whatever situations they are operating from, in order to achieve a complete healthcare delivery system.

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No conflict of interest.

4CPS-258 IMPACT OF A TEAM OF CLINICAL PHARMACISTS IN A PAEDIATRIC SURGERY UNIT: RESULTS AFTER 6 MONTHS

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10.1136/ejhp-pharm-2019-eahpconf.407

Background In the paediatric surgery unit (38 beds), due to the multiplicity of prescribers (anaesthetists and surgeons) and to the parents' presence who are accustomed to looking after their child's medications, the management of patients' home medications is a critical point. The two main specialties of the unit are orthopaedic and visceral surgeries. A clinical pharmacy team has been deployed in the unit in April 2018 to improve medication safety.

Purpose To assess the impact of the pharmaceutical team in the unit.

Material and methods The pharmaceutical team undertook three main missions:

- Medication reconciliation (MR) for patients undergoing treatment: before admission for planned patients and after admission for non-planned patients. These patients were identified thanks to the anaesthetist consultation or the electronic record.
- MR on transfer to the rehabilitation centre, if necessary.
- Medication review during hospitalisation.

Since April, every pharmaceutical intervention (PI) has been registered and categorised according to the French Society of Clinical Pharmacy classification.

Results Over the past 6 months, the team realised 321 MRs on admission; 60 MRs on transfer to the rehabilitation centre; and all the prescriptions were reviewed daily from Monday to Friday.

Thirty-seven per cent of planned patients and 11% of non-planned patients had an undergoing treatment before their admission.

The team realised 163 PIs concerning 120 patients, throughout medication review or MR. These PIs mainly concerned omitted medication (46%), incorrect posology (33%) and inadequate use (13%). A PI has been recorded for 20% of patients for whom the medications were reconciled.

According to the Anatomic, Therapeutic and Chemical classification, the most represented classes were A: alimentary tract and metabolism (29%); N: nervous system (26%); R: respiratory system (13%); and J: anti-infectives for systemic use (11%).

Conclusion This analysis highlights that about one-quarter of children have a current medication on admission. It is important to focus on those patients to be effective. Considering the number of PIs, the work of the pharmaceutical team, together with the medical team, is essential in securing patients' healthcare and achieve continuity in medication management.

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No conflict of interest.

4CPS-259 EVALUATION OF PATIENTS', DOCTORS' AND COMMUNITY PHARMACISTS' SATISFACTION CONCERNING PHARMACEUTICAL CONSULTATIONS FOR PATIENTS RECEIVING ORAL ANTI-CANCER DRUGS

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10.1136/ejhp-pharm-2019-eahpconf.408

Background The development and expansion of oral anti-cancer agents provide multiple benefits, including improvement in patients' quality of life but also create numerous challenges such as side-effect management or medication adherence. In January 2018, we implemented pharmaceutical consultations, as part of a multidisciplinary consultation programme for patients receiving oral chemotherapy agents.

Purpose The aim of this study was to evaluate patients', community pharmacists' and oncologists' satisfaction with the pharmaceutical consultations.