



The performance of the clinical pharmacist in hospitalized patient care

A atuação do farmacêutico clínico no cuidado ao paciente hospitalizado

La actuación del farmacêutico clínico em la atención al paciente hospitalizado

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ABSTRACT

Objective: Analyze the performance of the clinical pharmacist in the hospital environment in the care of hospitalized patients. **Methods:** This is a cross-sectional study, with a qualitative approach, developed from semi-structured interviews with pharmacists who work in hospital pharmacies. The participants were selected through the help of key informants, people who have special knowledge of the population under study. The interviews took place in neutral and safe locations and were recorded with the interviewee's prior agreement. The recorded tapes were transcribed and subjected to all phases of data analysis. In this study, a triangulation of methods was carried out to guarantee the reliability of the data, which were the sum of the semi-structured interviews, the use of the field diary, the participant observations, and the validation of the categories by an external researcher. **Results:** It was observed that the role of the clinical pharmacist in the hospital environment is wide and important in the care and promotion of health of hospitalized patients. **Conclusion:** The functions performed by this professional ensure safe care to the patient, since they propose a safe dispensing of drugs and reduce the risk of adverse events related to drug treatment.

Keywords: Pharmaceutical Care, Hospital Pharmacy Service, Patient Safety, Patient Care.

RESUMO

Objetivo: Analisar a atuação do farmacêutico clínico em ambiente hospitalar no cuidado com o paciente hospitalizado. **Métodos:** Trata-se de um estudo transversal, com abordagem qualitativa, desenvolvido a partir de entrevistas semi-estruturadas com farmacêuticos que atuam em farmácia hospitalare. Os participantes foram selecionados através do auxílio de informantes-chave (*key informants*), pessoas que possuem um conhecimento especial sobre a população em estudo. As entrevistas aconteceram em locais neutros e seguros e foram gravadas com a concordância prévia do entrevistado. As fitas gravadas foram transcritas e submetidas a todas as fases da análise de dados. Neste estudo foi realizada a triangulação de métodos para garantir a fidedignidade dos dados, sendo eles a soma das entrevistas semiestruturadas, o uso do diário de campo, das observações participantes e a validação das categorias por pesquisador

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externo. **Resultados:** Observou-se que a atuação do farmacêutico clínico no ambiente hospitalar se mostra ampla e importante no cuidado e na promoção da saúde do paciente hospitalizado. **Conclusão:** As funções desempenhadas por este profissional garantem ao paciente uma assistência segura, pois propõem uma dispensação segura dos medicamentos e reduz o risco de eventos adversos relacionados ao tratamento medicamentoso.

Palavras-chave: Atenção Farmacêutica, Serviço de Farmácia Hospitalar, Segurança do Paciente, Assistência ao Paciente.

RESUMEN

Objetivo: Analizar la actuación del farmacéutico clínico en el ámbito hospitalario en la atención a los pacientes hospitalizados. **Métodos:** Se trata de un estudio transversal, con abordaje cualitativo, desarrollado a partir de entrevistas semiestructuradas a farmacéuticos que actúan en farmacias hospitalarias. Los participantes fueron seleccionados con la ayuda de informantes clave, personas que tienen un conocimiento especial de la población objeto de estudio. Las entrevistas se realizaron en lugares neutrales y seguros y fueron grabadas con el consentimiento previo del entrevistado. Las cintas grabadas fueron transcritas y sometidas a todas las fases de análisis de datos. En este estudio se realizó una triangulación de métodos para garantizar la confiabilidad de los datos, los cuales fueron la suma de las entrevistas semiestructuradas, el uso del diario de campo, las observaciones participantes y la validación de las categorías por un investigador. **Resultados:** Se observó que el papel del farmacéutico clínico en el ámbito hospitalario es amplio e importante en el cuidado y promoción de la salud de los pacientes hospitalizados. **Conclusión:** Las funciones realizadas por este profesional garantizan una atención segura al paciente, ya que proponen una dispensación segura de medicamentos y reducen el riesgo de eventos adversos relacionados con el tratamiento farmacológico.

Palabras clave: Atención Farmacéutica, Servicio de Farmacia Hospitalaria, Seguridad del Paciente, Atención al Paciente.

INTRODUCTION

The care provided by the clinical pharmacist consists of the integrated action of the hospital pharmacy with the other assistance units, whose focus of intervention is the recovery of health and promotion of rational use of medicines by the patients assisted. Pharmaceutical assistance is given through dispensing, pharmacotherapeutic follow-up, health education, pharmaceutical orientation, medication reconciliation, review of pharmacotherapy, among other attributions (ADDO-ATUAH J, 2014; ARAÚJO PS, et al., 2017).

The clinical pharmacist, as well as the entire multiprofessional team, also acts in the development of care, focusing on patient safety and therapeutic results, contributing to the quality of life and safety of those in treatment, not allowing doubts to arise about the therapy offered for each patient, and offering their support should they arise (KAIRUZ T, et al., 2010; PINHO MS, et al., 2016).

Within this context, the Federal Council of Pharmacy (FCP), exercising its constitutionally guaranteed activity, regulated with Resolution No. 585/2013 the clinical attributions of the professional pharmacist, such as: establishing a relationship of care with the patient, planning drug therapy in conjunction with the multidisciplinary team of the hospital, analyzing prescriptions and if necessary issuing opinions, having access to patient records, evaluating the results of clinical and laboratory tests, among others (FCP, 2013).

The role of the clinical pharmacist goes beyond dispensing medications, since quality care is expected, based on the evaluation and pharmacotherapeutic follow-up, which is essential for the recovery of the hospitalized patient, also bringing benefits to the multidisciplinary team that operates in the service (FERNANDES O, et al., 2015; SANTANA KS, et al., 2018).

The clinical pharmacist, along with the multiprofessional team involved in the care of hospitalized patients, provides an effective follow-up of the clinical evolution of patients, by enabling safe and rational prescriptions. This professional contributes to an adequate therapeutic follow-up, control of the use of potentially inappropriate drugs, in the discussion of cases for dose adjustments. Moreover, its evaluation can significantly reduce discomfort and adverse effects, and contribute to better patient recovery (VIANA SSC, et al., 2017; COELHO MMA, et al., 2022).

Studies that discuss the performance of the pharmaceutical professional in the scope of hospitalized patient care are scarce. In this context, researchs that analyze the perception of these professionals regarding their performance and the importance of their practices to guarantee the adequate support in drug therapy, care, and safety of the patient in the hospital environment become necessary. Thus, the present study aimed to analyze the role of the clinical pharmacist in the hospital environment in caring for hospitalized patients.

METHODS

The methodological foundation adopted in this research was qualitative, based on Hermeneutics-dialectics. According to Patton MQ (2002), qualitative research is a technique that allows a deepening of a given situation and with a greater level of detail, which seeks to understand a phenomenon from the world view of individuals.

According to Gadamer HG (1999), in hermeneutics, the understanding of meanings occurs through communication between human beings, with language as its central nucleus. For Habermas J (1987), dialectics seeks in the facts, in language, in symbols and in culture, the obscure and contradictory nuclei in order to perform an informed criticism of them (MINAYO MCS, 2014).

Pharmacists working in hospital pharmacy were included in the study. The sample size was enough to ensure the inclusion of all profiles to be analyzed and to meet the established criteria. The selection was interrupted when the interviewees reached redundancy, reaching the point of theoretical saturation, i.e., when the information started to be repeated and no new data allowed additional insights about the phenomenon under study (PATTON MQ, 2002; TAYLOR SJ, 1998). Thus, the sample included 11 interviewees.

At first, the participants were selected through the help of key informants, people who have special knowledge of the population under study (WHO, 1994), who were two pharmacists specialized in clinical pharmacy and with extensive experience in hospital pharmacy. The sampling strategy was the snowball technique, a methodological microstrategy that happens when a previously located individual is asked, through a nominative process, to name other individuals who meet the established criteria, so as to ensure the progression of reference chains (FERNANDES JL e CARVALHO MC, 2003).

As a research instrument, we opted for a semi-structured interview guided by a script, elaborated and structured based on the subsidies provided by the key-informants. Data collection was performed through participant observation, records in a field diary, and recorded semi-structured interviews. In general, this script addressed the pharmacist's perception about pharmaceutical care in the hospital environment and how he/she ensures efficacy, reliability and patient safety through his/her conduct (BOUÇAS E, et al., 2018;; NÉRI EDR, et al., 2019).

The interviews took place in neutral and safe places and were recorded with the prior agreement of the interviewee, after reading and understanding the free and informed consent form, formulated according to the standards of the Research Ethics Committee (REC) of Faculdades Integradas do Norte de Minas - Funorte. The recorded tapes were transcribed and submitted to all phases of data analysis.

The researchers transcribed the participants' speeches, which were printed and bound. To preserve the identity and anonymity of the study participants, codes were used to identify them. One of the researchers checked the transcription produced in relation to the original recording, listening attentively to the speeches

of the study participants, aiming to guarantee the fidelity of the recording, the opinions, and the elimination of errors.

The field diary notes on the teachers' work routine and the researchers' observations were also organized, and added to the transcribed interviews and the components of the research corpus. After this step, the texts were read horizontally and exhaustively, and the empirical categories were constructed, in addition to the transversal reading of each subset of the data, through the theoretical variables adopted in the study (FIGUEIREDO WS, 2008; COUTO MT, et al., 2010).

In the study, hermeneutics enabled the understanding of texts and units of meaning directly related to the performance of the clinical pharmacist in the hospital environment, while dialectics showed the contradictions and difficulties in this work process and the promotion of health of hospitalized patients.

In this study, a triangulation of methods was performed to guarantee the reliability of the data, which were the sum of semi-structured interviews, the use of a field diary, participant observations, and the validation of categories by an external researcher.

The research project was submitted to the Research Ethics Committee, and was approved under opinion number 4,195,686 (CAAE 34536720.3.0000.5141). All the interviewees signed a Free and Informed Consent Form, after the researchers had answered all their questions, making it clear that the confidentiality of the information would be preserved. The research was self-funded, and there were no conflicts of interest.

RESULTS AND DISCUSSION

A total of 11 pharmacists participated in this study. The mean age of the participants was 30±7.8 years, 81% were female, the majority had graduated more than 6 years ago (63.6%), and 72.2% of the pharmacists reported working in the hospital environment for less than 5 years.

With the application of data interpretation levels (MINAYO MCS, 2014), the respondents' speeches were placed in their context, and from that, the Record Units were elaborated, and later, the Elementary Context Units were determined, seeking segments of the speeches of pharmacists who work in hospital pharmacy that would help better understanding for the coding of speeches, as shown in **Table 1**.

Table 1- Record Units and Elementary Context Units identified in interviews with pharmacists who work in hospital pharmacy.

Registration Units	Context Units
<ul style="list-style-type: none"> - Activities aimed at patient care - Patient treatment - Provision of service that guarantees patient safety - Risk prevention 	<ul style="list-style-type: none"> - Clinical importance of the pharmacist in the care and safety of hospitalized patients
<ul style="list-style-type: none"> - Hospital pharmacy management - Feasibility of medical prescription - Supply of medicines and products according to the prescription - Ensure patients' accessibility to material resources (medicines and hospital medical supplies) necessary for patient safety. 	<ul style="list-style-type: none"> - Professional activities in the hospital environment
<ul style="list-style-type: none"> - Standardization of medicines - Pharmacy and Therapeutics Commission 	<ul style="list-style-type: none"> - Pharmaceutical care and quality assurance of hospital pharmacy service

Registration Units	Context Units
- Qualification of suppliers and carriers that provide services to the hospital pharmacy	
- Analysis of prescriptions - Medication reconciliation - Interaction between the multidisciplinary team - Assistance from the multidisciplinary team - Bed run and patient guidelines	- Quality of patient care within the hospital pharmacy
- Evolution of pharmaceutical care - Challenges for pharmaceutical professionals - (Re) structuring of pharmaceutical services in the hospital environment - Need for material and technological resources	- Pharmaceutical care provided by hospital pharmacists

Source: Barbosa TCV, et al., 2023.

After the construction and analysis of the Units of Record and Units of Elementary Contexts, three final categories of analysis were defined: 1) Pharmaceutical care for hospitalized patients, 2) The pharmacist and the assurance of efficacy, reliability, accessibility and safety of the hospitalized patient, and 3) Pharmacists' perception of pharmaceutical care in the hospital environment.

Table 2- Final categories of analysis of interviews with pharmacists who work in hospital pharmacy.

Elementary Context Units	Final Categories of Analysis
- Clinical importance of the pharmacist in the care and safety of hospitalized patients - Professional activities in the hospital environment	1) Pharmaceutical care for hospitalized patients.
- Pharmaceutical care and quality assurance of hospital pharmacy service - Quality of patient care within the hospital pharmacy	2) The pharmacist and the assurance of efficacy, reliability, accessibility and safety of the hospitalized patient.
- Pharmaceutical care provided by hospital pharmacists	3) Pharmacists' perception of pharmaceutical care in the hospital environment.

Source: Barbosa TCV, et al., 2023.

The speeches were distributed within the defined analytical-interpretative categories, as shown below:

Pharmaceutical care for hospitalized patients

The pharmaceutical professional is responsible for assisting the user of health services by providing rationalization in the use of medicines, health education, health promotion, and promoting actions that enable patients to practice self-care safely (NÉRI EDR, et al., 2019; BARROS DSL, et al., 2020).

This professional has an active interaction with the patient, solving the most diverse problems related or not to the therapy, always paying attention to the correct and safe dispensing of the medications. Moreover, pharmaceutical care is a great ally in health promotion, because it follows the therapy proposed to the

patient, seeking to achieve results that contribute to the patient's quality of life related to the use of medication (PINHO MS, et al., 2016; NURGAT ZA, et al., 2011).

In the present study, it was evident that the evaluated professionals know the clinical importance of the professional in the care and safety of the hospitalized patient:

"The pharmacist develops activities more directed to patient care, which are the clinical activities" (F11).

"The pharmacist can directly interfere in the patient's treatment" (F07).

"We work in a way that highlights safety, proposing safe medication dispensing" (F10).

"Without his [pharmacist] performance, the risk of the patient having drug-related events is very high" (F09).

The pharmacist has clinical attributions that involve the promotion, protection and recovery of health, in addition to the prevention of diseases in order to promote the rational use of medicines and optimization of pharmacotherapy (FERREIRA HKS, et al., 2021).

He makes up the multidisciplinary team involved in the care of the hospitalized patient with his well-defined attributions within the care conduct related to the use of medications. Among the clinical activities performed by the pharmaceutical professional are the analysis of medical prescriptions and, consequently, the autonomy to propose adjustments in therapy. Here, the contribution of this professional in care planning is highlighted in order to reduce possible adverse reactions, since, in addition to dispensing, it is his responsibility to guide and monitor the drug treatment of patients, which can contribute to its success (MODESTO ACF, et al., 2016; CALADO DS, et al., 2019).

In addition, it should be noted that the presence of a hospital pharmacist in the process of analysis and validation of prescriptions and dispensing within the scope of the hospital pharmacy, prevents errors and promotes the safe use of medicines. This professional represents one of the last barriers to identify, correct and reduce risks associated with therapy. His work with the clinical staff of the multidisciplinary team effectively intervenes in the transcription, prescription, administration and dispensing of medications, impacting the reduction of the incidence of medication errors and the increase in patient safety (CARVALHO AMR, et al., 2019).

Other activities developed by the pharmacist that contribute to the care and safety of hospitalized patients were also evident:

"The pharmacist enters the hospital to manage the pharmacy" (F01).

"Who guarantees the viability of the medical prescription is the pharmacist. The doctor prescribes, but who really guarantees that you will have the medicine or the hospital medical product is the pharmacist" (F01).

"We make accessible everything the patient needs" (F02).

The clinical pharmacist, together with the multiprofessional team, guides patients regarding the drug treatment to which they are being submitted in order to prevent negative outcomes associated with pharmacotherapy. Moreover, to follow up the clinical outcomes, after putting into practice the interventions proposed by the pharmacist during therapeutic monitoring, it is necessary to evaluate the real results of drug therapies and to guarantee the safety of the hospitalized patient (BOUÇAS E, et al., 2018; FERRACINI FT, et al., 2011; LIMA LF, et al., 2016).

In the hospital environment, the pharmacist is the professional who has the knowledge to evaluate and contribute to the prescription of medicines and hospital medical material, besides being part of the multi-professional team involved in the care of hospitalized patients, carrying out research, elaborating protocols,

supervising the storage and supply of drugs, which guarantees health promotion and patient safety (FERRACINI FT, et al., 2011; MEDEIROS JA, et al., 2019).

The pharmacist is a health professional with indispensable qualifications regarding pharmacological treatments, which makes his presence in health environments such as hospitals essential, so that the patient's treatment occurs in the safest and most effective way possible (VIEIRA IPM, et al., 2021).

The pharmacist and the assurance of efficacy, reliability, accessibility and safety of the hospitalized patient

Issues related to the use of drugs, especially with regard to quality assurance, reliability, accessibility and patient safety constitute a health problem worldwide, in this context, discussions about patient safety in hospital units configure a trend worldwide and has frequently been addressed (ANJOS ES, et al., 2021).

The pharmaceutical professional, for knowing the pharmacological aspects of the drugs, is responsible for guiding the patient regarding the safe use of the medication, the possibility of adverse reactions, side effects, possible interactions and dosage. This anamnesis and, consequently, the proposed intervention, is possible through the visit to the bedside so that the professional knows the patient's profile, considering that for a better acceptance and adherence to treatment, the therapy must be adapted to the patient's lifestyle, taking into account his or her routine and restrictions (PINHO MS, et al., 2016; NÉRI EDR, et al., 2019).

When asked about how the pharmaceutical professional ensures the efficacy, reliability, accessibility, and safety of the hospitalized patient, it was possible to observe that this care begins in the standardization and acquisition of medicines:

"We have a pharmacy and therapeutics commission that evaluates the standardization of medicines" (F08).

"The pharmacist qualifies suppliers and transporters of the drugs" (F10).

The Pharmacy and Therapeutics Committee is a consulting and deliberating body, whose function is to assist the health team in the selection of drugs and health products to be used in the institution, as well as their rational use. It is generally composed of health professionals with various backgrounds. The composition of the Committee will depend on the availability of existing human resources. It is recommended that it be composed of physicians, pharmacists, nurses, dentists, among other health professionals who work in the hospital environment (BRASIL, 2001; SANTANA RS, et al., 2014).

The Pharmacy and Therapeutics Commission is fundamental in the hospital environment, for it is responsible for analyzing the acquisition of new technologies in medicines, as well as evaluating the already existing and standardized technologies in the institution. In addition, it offers control and management of the use of medicines, containing their irrational and indiscriminate use, improving the health of patients and assisting managers in the use of resources with efficiency and responsibility (SANTANA RS, et al., 2014; ABRAMOVICIUS AC, et al., 2012).

In this context, it is noteworthy that starting from the awareness of the health manager, especially the hospital, establishing a Pharmacy and Therapeutics Commission, there is the possibility of a better management of clinical and pharmacotherapeutic resources, due to the existence of well-defined protocols and for assisting the process of choosing to incorporate new technologies in medicines, as well as for evaluating other technologies that already exist in the standardization of hospitals. That will contribute to the hospital's financial allocation, directly reflecting the purchase and acquisition of medicines, medical materials and the more effective supply of these inputs for the hospital environment, and even for investment in improvements of the institution itself, whether physical or continuing education for health professionals who work there (JESUS JMP, et al., 2022) and also for those who have agreements with educational institutions and which are a field of practice for the training of new professionals.

In addition to management activities that are important to ensure the quality of patient care in hospital pharmacy, pharmacists also reported clinical care:

"Here in the hospital we have a clinical pharmacy service, and we follow up on the prescriptions" (F10).

"We evaluate the prescription" (F03).

"The moment the prescription is made, it goes out to us, if we identify any weakness, before this medication reaches the patient, we make an intervention" (F05).

"We approach them when there are errors, we look for the doctor" (F10).

"This issue of patient safety involves the whole multidisciplinary care team" (F05).

"The pharmacist provides care to the patient in order to optimize his pharmacotherapy, together with other health professionals aiming at the effectiveness of his treatment" (F04).

"The pharmacist visits the beds to guide the patient regarding the correct use of the medication, to ensure that the patient is receiving the medication safely" (F04).

Besides acting in the detection of problems related to the use of medicines, the clinical pharmacist daily analyzes the prescriptions while the patient is under the care of the multiprofessional team and performs drug reconciliation at hospital admission and discharge, which has a positive impact on ensuring patient safety with respect to the prescribed therapy, in addition to providing the health service in which he/she works with control and cost reduction (BOUÇAS E, et al., 2018; FERRACINI FT, et al., 2011; FONTOURA A, 2019).

Pharmacists' perception of pharmaceutical care in the hospital environment

Pharmaceutical care is based on the integrated attention of the pharmacist with all the health team involved in the care of the hospitalized patient, whose focus is centered on care, rational use of drugs, and patient safety. Therefore, it is essential to have a good communication and interaction of the hospital pharmacy with all the sectors involved in the assistance provided (ARAÚJO SQ, et al., 2017).

Regarding the pharmaceutical care provided by hospital pharmacists in hospitals in the North of Minas Gerais, it was observed that:

"We are in a process of evolution so that every day we can provide the best care to the patient" (F04).

"We have an average scope, we can't meet all patients, all demand [...]" (F10).

"Today we understand that we have room for improvement, we have structured the bases of pharmacy and act punctually in situations and circumstances that we can identify" (F06).

[...] it will get better when we can expand our approach a little more, the activities we perform can be done for the total number of patients, [...] having more professionals or even the use of tools that facilitate and assist the activity (F08).

[...] many times, it is not even the quantity that favors the performance, but a better technology, more advanced, better used, can also accelerate this pharmaceutical attention process (F08).

Through pharmaceutical care it is possible to minimize the risks of pharmacotherapy, contributing to the patient's learning about self-care, promoting well-being through pharmaceutical guidance. However, the rational use of medicines is still a weak point in pharmaceutical assistance, which needs more attention, since it promotes the health of patients in drug treatment, avoiding frequent hospitalizations (CALDAS ALL, et al., 2020).

It is evident the knowledge of pharmacists about the need for improvement in the attention given to patients and in the structuring of a hospital pharmacy that meets this demand. For this, it is necessary to invest in technologies that bring quality and speed in the approach of this professional, consequently improving pharmaceutical assistance to hospitalized patients.

CONCLUSION

The role of the clinical pharmacist in the hospital environment is broad and important in the care of hospitalized patients. The functions performed by this professional ensure safe care to the patient, since they propose a safe dispensing of drugs and reduce the risk of adverse events related to drug treatment. It is important to emphasize that the pharmacy commission is important in standardizing drugs and health products with quality standards. Moreover, evaluating and monitoring prescriptions are essential for the detection of possible therapeutic failures and early pharmaceutical intervention, in order to preserve the integrity and safety of the patient.

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