

## 2009 QUEENSLAND HEALTH AWARDS FOR EXCELLENCE

**Branch:** Medication Services Queensland (MSQ)  
**Category:** Improving access to safe and sustainable health services.

### Entry Title

MSQ Pharmacist Relief Team – Sustaining our workforce.

### Abstract

The Pharmacist Relief Team was established in response to the difficulties experienced by small pharmacy departments in accessing suitable locum cover when taking leave.

Relief team members are located across the state, with a range of hospitals acting as their “base” hospital for periods of time when not undertaking relief duties. Their salaries are paid corporately and the receiving health service district is responsible for all travel, accommodation and meal and incidental expenses incurred whilst relief is provided to their district.

The team provides cover for annual or long service leave requirements, educational leave and offers support for vacant pharmacist positions as demand allows. There are 26 hospitals across Queensland with a pharmacist establishment of five pharmacists or less, who are all able to request the services of the relief team.

### Aim

The Pharmacist Relief Team ensures the consistent high level of provision of pharmacy services by providing cover for pharmacists taking annual, long service leave or educational leave and offers a variety of support functions for vacant positions, sole pharmacist facilities and non-pharmacist sites.

### Nature of the problem

Smaller pharmacy departments with up to five pharmacists or less historically had to organise cover for their leave themselves. This occasionally included an inexperienced locum pharmacist being recruited from a commercial agency. Often, due to the unavailability of appropriately trained staff, it resulted in the absence of a pharmacist from the department during the period of leave.

This resulted in a decrease in clinical pharmacy services, possibly compromising patient safety.

### Extent of the problem

A survey of outstanding leave in smaller pharmacy departments throughout Queensland Health in January 2007 identified an average of greater than four weeks annual leave and 18 weeks long service leave accumulated. Extremes of this included a sole pharmacist who had worked 21 months with only one weeks leave and a pharmacist with 35 weeks long service leave accumulated. It was also identified that many had not been able to attend continuing professional development conferences in the last 12 months.

Pharmacist establishment	Time since last 2 week break (mths)	Annual Leave (wks)	Long service leave (wks)	Time since education (mths)
1	7 (1-21)	4.57 (2-10)	11.5 (10-13)	12.6 (2-48)
2	5 (1-13)	4.14 (1-8)	14	8.14 (2-24)
3	1	3.50 (2-6.5)	22.8 (14-35)	7 (2-12)
4	1	2	20	2
5	4 (3-5)	3 (2-5)	0	6.6 (3-12)
Average	5 (1-21)	3.88 (1-10)	18.53(10-35)	8.89 (2-48)

Many staff declined to take their entitled leave due to inexperienced locum cover, the inability to find a replacement at all, or the unwillingness to allow pharmacy services to be compromised.

The January 2007 vacancy survey identified a 36% vacancy rate in those pharmacy departments with five pharmacists or less. Staff turnover in those departments was approximately 16% as many staff became frustrated and chose to leave.

### Strategic Importance

Part of Queensland Health's Strategic Plan 2007-2012 is the development of our people in a way that recognises and supports their role in the delivery of health care services. The establishment of the Pharmacist Relief Team contributes significantly to service delivery, which now remains uninterrupted during periods of leave and where there are long term vacancies. Retention of a well trained workforce is also key to service delivery and the ability of the relief team to respond to requests for leave has contributed to the stability of the workforce in these rural areas.

### Planning and implementing solutions

The establishment of the Pharmacist Relief Team was a collaborative six month project between Clinical and Statewide Services (CaSS) and Medication Services Queensland, commencing in January 2007.

The project investigated the already operational models of the existing relief teams in CaSS in Radiology and Pathology and developed an appropriate model for the Pharmacist Relief Team. Shortly after the commencement of the project, two temporary relief team pharmacists were employed to undertake relief duties. Initially, their time was divided between providing leave cover and filling long-term vacancies where possible.

As awareness of the relief team grew and health service districts became aware of the service provided, demand for the team increased. The team progressed to an establishment of five members within five months of it's inception and has now settled to four regular team members.

It operates on a model of salary being paid by Medication Services Queensland with costs of accommodation, travel and meal and incidental expenses being the

responsibility of the receiving facility/health service district. Team members are also entitled to claim the appropriate rural allowance when spending time in locations where this is eligible to be paid.

## Outcomes and Evaluation

Demand for the services of the Pharmacist Relief Team has increased since establishment during 2007. The table below indicates the number of week's relief cover that each member of the team has provided during the last 12 months. Without this, pharmacy services in the receiving districts would have been compromised.

<b>Weeks Spent Relieving - March 08 - March 09</b>			
<b>Team Members</b>	<b>Cover provided in weeks</b>	<b>Base/Leave in weeks</b>	<b>% of weeks undertaking relief</b>
<b>RH</b>	44	8	84%
<b>LH</b>	35	17	67%
<b>RT</b>	43	9	82%
<b>BB</b>	43	9	82%
<b>Total</b>	165	43	80%

As a component of this, relief team members have provided support in long term vacancy areas for 61 of the last 72 weeks. Without their assistance many departments would have struggled to provide even the most basic pharmacy service and the districts who have received this type of support are constantly grateful for the existence of the team

Key Performance Indicators for pharmacy services are collected by the business twice a year. The input the relief team has had in maintaining continuity of service as outlined above, has been critical in assisting the maintenance of service levels and may even have improved services in some areas where there is no permanent pharmacist employed in a district.

## Sustaining change

The Pharmacist Relief Team was fully established by July 2007. In the 18 months since this time, team members have been fully occupied in the provision of relief support to their colleagues across the state. The concept for the relief team is self-sustaining and demand for their service continues to grow to such an extent that many of the team have spent little time at their base hospital, as indicated above.

Recently, exposure to rural and remote locations has provided secondment opportunities to some team members, resulting in long term temporary appointments in hospitals that traditionally struggle to recruit. A positive consequence of this is an ability to recruit junior pharmacists to the team as replacements who are keen to widen their experience with Queensland Health and see the opportunity to join the relief team to further develop their career.

## Future Scope

Currently, Queensland Health has a project underway to develop an Allied Health Relief Pool. This has potential to cover many disciplines and initial contact has been made to suggest a way to work together. The Pharmacist Relief Team is well

established within its own discipline and may well provide a model to assist in the development of other disciplines seeking to set up something similar to support their professional members and share information.

