



# Classification of pharmaceutical interventions

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## Evaluation, refinement and adaption of the GSASA classification system

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## **Abstract**

### **Background:**

Drug-related problems (DRP) are a major burden on the healthcare system, causing increased cost and morbidity, even mortality. Pharmacists in hospital and community are in an ideal position to detect, prevent, and resolve DRPs. Documenting the service provided by pharmacists is not only crucial on a political level but can also be a basis for outcome research. For both purposes a validated and broadly implemented classification system is a prerequisite.

### **Objectives:**

Optimisation of a classification system for pharmaceutical interventions in order to analyse quantitatively and qualitatively pharmaceutical services on a national level. The classification data should allow to develop a model of performance indicators for clinical pharmaceutical services.

### **Methods:**

To analyse the satisfaction of the GSASA classification system, we asked Swiss chief-pharmacists of hospitals (n=48) by an online questionnaire. These answers should give us some reasons about the type of documentation of pharmaceutical interventions and the satisfaction of GSASA classification system users. Additionally, we analysed GSASA tool data, received from Swiss hospitals. This facilitated us to improve suggestions of improvement for the GSASA classification system.

### **Results:**

The return rate of questionnaire was 94 % (n=45). Overall, 27 % of hospitals which document their pharmaceutical interventions used the GSASA classification system and were satisfied (56 %).

We received 9543 interventions from 11 hospitals, which were classified with the GSASA classification system. In 91 % of all interventions was the classification of all categories possible (n=8703). Overall were 67 % of interventions accepted by doctors (n=6390).

### **Conclusion:**

The GSASA classification system is a comprehensive system and is easy to use in daily routine. Most of the interventions were able to be classified with the available subcategories and were accepted by doctors.