



EDITORIAL

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The SEFH National Survey: An Essential Strategic Planning Resource

La Encuesta Nacional de la SEFH: recurso esencial para la planificación estratégica

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The findings of the SEFH National Survey - 2019, conducted by the Spanish Society of Hospital Pharmacists and the Spanish Foundation of Hospital Pharmacists, provide critically important insights into the medication-use process and pharmacy practice in hospitals in Spain. With its focus on hospital pharmacy resources, infrastructure, and professional development activities, the survey addressed several key topics including compounding, clinical services, information provision, quality, accreditation, and human resources. Surveys of this type play a foundational role in medication-use-related strategic planning at the local, provincial, and national levels.

Given the multitude of competing priorities and interests that confront pharmacy enterprises in hospitals and health systems, regular strategic planning is essential to design a forward-looking vision, establish service priorities, and prioritize allocation of resources. These processes should also result in the development of strategic plans that incorporate a clear understanding of their parent organizations' strategic priorities. In the United States, pharmacy departments routinely use the ASHP National Survey of Pharmacy Practice in Hospitals and Health Systems¹ along with the Practice Advancement Initiative 2030 recommendations² and the ASHP/ASHP Foundation Pharmacy Forecast Report³ to guide their local strategic planning efforts. Similarly the methods and the results of the SEFH National Survey - 2019 can inform local strategic planning processes in several ways. As a first step, an understanding of the priorities in a national survey can support a pharmacy enterprise's efforts to develop a visionary strategic plan. The survey domains themselves (e.g., number of employees, clinical practice areas, technology) can be used to identify key considerations, including goals and objectives, for the strategic planning process. The actual results can inform the development of local measures of progress that ultimately can be compared to national benchmarks, including comparisons to hospitals in the same geographic region.

Along with their role in local planning, surveys of pharmacy practice serve many essential strategic roles at the regional and national level. Professional societies and associations rely on these practice surveys to guide their activities in several areas. For example, the ASHP National Survey of Pharmacy Practice in Hospitals and Health Systems provided essential background for the 2010 ASHP/ASHP Foundation Pharmacy Practice Model Initiative (now the ASHP Practice Advancement Initiative 2030) including integration of key ASHP national Survey themes in the pre-meeting surveys that shaped the Summit's recommendations.

Professional organizations also use these types of survey results to advance practice through educational offerings, practice tools, publications, professional policy development, advocacy, interprofessional collaborations, and research. Frequently, especially with high priority initiatives, a multipronged approach is used by professional organizations to advance practice. The ambulatory care data from the ASHP National Survey⁴, which documented growth in outpatient clinic-based pharmacy practices from 19.2% in 2006 to 32.9% in 2018, have been used to inform multiple initiatives including the 2014 Ambulatory Care Summit, Midyear Clinical Meeting and ASHP Summer Meetings educational programs, *American Journal of Health-System Pharmacy* content including theme issues, and advocacy efforts at the state and federal levels.

Likewise in the United States, the ASHP National Survey has served the critically important purpose of providing measures of the effectiveness of efforts to address national health policy priorities. For example, after the publication of *To Err is Human*⁵ in 1999, which identified serious risks to patient safety in the U.S. healthcare system, technology solutions, many of which targeted medication use, were recognized as integral to enhancing safety in hospitals. These included electronic medical records, computerized provider order entry, barcode-enabled medication administration (BCMA), and intelligent infusion devices. Quantifying the success of widespread technology implementation was critical to tracking the national response to *To Err is Human*. For example, although BCMA was identified as early as the mid-1990s as an important safety enhancement, the 2002 ASHP National Survey⁶ reported that only 1.5% of respondents indicated that this technology was used in their hospitals. ASHP continued to track these data over time as displayed in table 1.



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Table 1. Barcode-enabled medication administration (BCMA) adoption in U.S. Hospitals, 2002-2014

Year	Respondent Hospitals with BCMA (%)
2002	1.5
2005	9.4
2008	25.1
2011	50.2
2014	88.4

BCMA: barcode-enabled medication administration.

During this period, ASHP undertook a number of initiatives to drive the adoption of BCMA through professional policy development, education, provision of practice tools, research support, and publication of journal articles and books. While it is impossible to establish a causal relationship between ASHP's contributions and the widespread implementation of BCMA over time, the availability of the ASHP National Survey data provided signals that guided the Society's commitment of resources to support accomplishment of this critically important national patient safety goal. Likewise, these data provided insights into BCMA adoption to other stakeholders in the patient safety arena. Similarly the findings from SEFH surveys can be used to guide program development in national priority areas in Spain and track progress over time.

The findings of regular practice surveys also serve an important role in research and education where the data can play a direct role in generating new research questions and shape learning objectives. On the research front, if the survey results demonstrate a disparity in implementation of a service in hospitals in different geographic regions, subsequent studies could be undertaken to further elucidate the reasons for the gap and to evaluate new implementation strategies. In terms of education, the results of national practice surveys can be used strategically to inform curricula development in schools of pharmacy and residency programs. This will help ensure that education and training are aligned with current advances in practice. On a more tactical level, the survey results can also serve as an invaluable resource in course work and other educational offerings, such as journal clubs, to stimulate discussions around contemporary pharmacy practice in hospitals. Inclusion of reviews of the survey results in continuing education for practitioners can provide a closed-loop capability as these practitioners endeavor to implement changes in their practice settings.

The results of the SEFH National Survey - 2019 are an invaluable contribution to the understanding of healthcare delivery and pharmacy practice in Spain and contribute to a global understanding of pharmacy practice. As hospital pharmacy leaders in Spain endeavor to optimize health outcomes, these findings provide an invaluable resource to guide local and national strategic planning to further enhance healthcare delivery and pharmacy practice.

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