Editorial

Derek Stewart¹ · Bart Pouls² · Filipa Alves da Costa³

Published online: 13 June 2021

© The Author(s), under exclusive licence to Springer Nature Switzerland AG 2021

In this issue of the International Journal of Clinical Pharmacy, we are delighted to launch the series ‘Best Clinical Pharmacy Practice Papers’. This is a collaborative initiative between the European Society for Clinical Pharmacy (ESCP) and the journal. ESCP is an international leader in advancing quality and innovation in clinical pharmacy. ESCP ‘promotes, supports, implements and advances education, practice and research in clinical pharmacy in order to optimize outcomes for patients and society’ [1].

This initiative aims to disseminate best practices through peer-reviewed publication, enhancing the exchange of knowledge and experience, and therefore contributing to promoting innovative and sustainable services. Best practices in clinical pharmacy are essentially innovations in practice and education that are ideally supported by comprehensive, systematic development and implementation processes. Evidence of benefit could include aspects of acceptability, appropriateness, effectiveness, cost-effectiveness, efficiency, satisfaction or sustainability [2].

Authors provide a detailed description of the phases of development, stages of implementation and type of evaluation conducted, aligned with key frameworks [3–5]. For these best practices to be potential role models that could be adopted or adapted elsewhere, authors describe stakeholders’ involvement in development, and any education and training activities for those delivering the practice. There is emphasis on the practice itself, highlighting innovation and any resource implications. The process of implementation is outlined, including how, where and when the best practice was implemented and those involved. Authors detail data

collected throughout planning, development or implementation, enabling the extraction of performance indicators or outcomes. To facilitate readers in adopting or adapting best practice in their setting, key facilitators and enablers to achieving best practice are highlighted, along with any barriers and information on how these were overcome.

We encourage readers to use these papers to get inspired and reflect on their own practices. This may provide an opportunity to benchmark practices and consider any potential future developments. While the transfer of practices from one country, culture and setting to another may not be straightforward, these papers may provide a starting point and avoid reinventing the wheel. There is potential for these best practice papers to generate impact on many levels. In addition to the direct impact on person-centred care and on professional practice, there could also be impact on workforce performance, healthcare organisation and culture and even at societal level.

In this first best practice paper, Rose et al. aimed to enhance medication therapy in people living with Parkinson’s Disease by establishing a regional network in Germany, leading to an interprofessional teamwork approach [6]. The core network has now grown to more than 150 participants and 50 institutions across all disciplines and sectors with clear benefits for the care of people living with Parkinson’s disease.

Future best practice papers describe a spectrum of clinical pharmacy activities delivered across various settings, including primary and secondary care, and encompassing the necessary education and training for the delivery of advanced and innovative practices. Rushworth et al. focus on the role of education, describing a novel simulation teaching method developed to support advanced general practice clinical pharmacists in Scotland. Hazen et al. describe the role of non-dispensing clinical pharmacists in general practice who, as medication experts, contribute to the prevention of medication-related harm by providing a broad range of pharmacy services thus preventing medication-related hospital admissions. The best practice paper by Borgsteede et al. centres on a model to improve medication safety in patients

✉ Derek Stewart
d.stewart@qu.edu.qa

¹ International Journal of Clinical Pharmacy, College of Pharmacy, QU Health, Qatar University, Doha, Qatar

² Research Department Sint Maartenskliniek, Nijmegen, The Netherlands

³ Faculty of Pharmacy, University of Lisbon, Av. Prof. Gama Pinto, 1649-003 Lisbon, Portugal

with multi-morbidity by providing recommendations on drug-disease interactions and implementing these in clinical decision support systems in the Netherlands. Rabus et al. describe the nationwide implementation of pharmaceutical care practices through a continuous professional development program in Turkey, using a train the trainers' model, demonstrating impact on performance of clinical pharmacists and ultimately on clinical outcomes.

These five best practice papers are a snapshot of initiatives that illustrate the scope of clinical pharmacy across healthcare systems. We hope these will motivate readers to enhance their practices and continue documenting them to further disseminate the benefits of clinical pharmacy.

References

1. Stewart D, Paudyal V, Cadogan C, Hazen A, Okuyan B, Lutters M, et al. A survey of the European Society of clinical pharmacy members' research involvement, and associated enablers and barriers. *Int J Clin Pharm*. 2020;42:1073–87.
2. Proctor ES. Outcomes for implementation research: conceptual distinctions, measurement challenges, and research agenda. *Adm Policy Ment Health*. 2011;38:65–76.
3. Medical Research Council. Developing and evaluating complex interventions. <https://mrc.ukri.org/documents/pdf/complex-interventions-guidance/> Accessed 01.05.2021.
4. Damschroder LJ, Aron DC, Keith RE, Kirsh SR, Alexander JA, Lowery JC. Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science. *Implement Sci*. 2009;4:1–5.
5. Bartholomew LK, Parcel GS, Kok G. Intervention mapping: a process for developing theory and evidence-based health education programs. *Health Educ Behav*. 1998;25:545–63.
6. Rose O, Happe S, Huchtemann T, Mönig C, Ohms I, Schwalbe O, et al. Enhancing medication therapy in Parkinson's disease by establishing an interprofessional network including pharmacists. *Int J Clin Pharm*. 2021. <https://doi.org/10.1007/s11096-021-01263-w>.

Publisher's Note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.