

HP — THE SOURCE

By DIANE LANGLEBEN, MRPHARMS

I was going to give this piece the title “*Hospital Pharmacist* 1994–2004” but discarded the idea as sounding too much like an obituary. One thing of which I can be sure is that *Hospital Pharmacist*, or “HP”, as it is affectionately known, is in fine fettle, as indeed is the branch of the pharmacy profession that it serves.

In the beginning, *Hospital Pharmacist* was the brainchild of the then editor of *The Pharmaceutical Journal*, Douglas Simpson, who launched it as a supplement to the *PJ* in July 1987. There were just two issues that year but from the following year until 1995, *Hospital Pharmacist* was published on a quarterly basis. However, the real breakthrough occurred in February 1994 when it was published as a separate journal, still with Douglas Simpson as editor. Over the years since 1994, demand led to an increase in the number of issues per year: four in 1994, six in 1995, 10 in 1997 and 11 in 2003. Since 1997, *Hospital Pharmacist* has also organised a highly successful annual one-day conference whose theme has reflected the hot topic of the day. Each year, *Hospital Pharmacist* has been fortunate in attracting eminent keynote speakers and experts in the field to talk on the conference theme.

There have been several changes in editor over the years. Mr Simpson handed over the reins to Beverley Harrison, a pharmacist with experience of the hospital pharmacy world in 1996. I took over from Mrs Harrison in 1999 after 15 years working as a hospital pharmacist in North London. The present incumbent, Gareth Jones, became editor in 2003.

This month we celebrate 10 years of a journal that has

Mrs Langleben is a freelance writer. She was editor of *Hospital Pharmacist* from 1999–2003

grown into a much-respected publication dedicated to keeping hospital pharmacists abreast of the latest developments and practice within this branch of the profession. I suggest that this has been in parallel with the development of hospital pharmacy itself.

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There was a time when the job of a hospital pharmacist was purely one of supply, and in many parts of the world this still holds true. However, here in the UK, there have been enormous changes and I dare say that hospital pharmacists from a bygone era would hardly recognise the profession that we have today. As the work of hospital pharmacists becomes more specialised, it is important that the new ways of working are disseminated as widely as possible to them and *Hospital Pharmacist* is the ideal vehicle to do this.

Of significance over the past 10 years has been the recognition both by government and, via the

media, the general public of the worth of hospital pharmacists. In recent years, various documents have highlighted the contribution that hospital pharmacists make to the care of patients during their hospital stay. One only has to think of the Audit Commission’s “A spoonful of sugar”, published in 2001, which firmly brought a profession perceived as “the backroom boys” out into the public eye. Naturally, the publication of the document led to much comment within the pages of *Hospital Pharmacist* over the following year. In 2003, “A vision for pharmacy in the new NHS” also highlighted what hospital pharmacists can teach other sectors of the profession about the efficient use of such things as robotics, staff and information technology.

On the back of this “outing” of the profession, it is gratifying to see that it is now not unusual for the national media to seek the opinions and highlight good practice within hospital pharmacy. Last month, for example, *The Times* published an interesting article showing the impact that a discharge services pharmacist makes by taking over the discharge process from junior doctors. This service has saved money, freed doctors’ time for direct patient care and reduced errors. As important was the fact that patient satisfaction increased because they received their discharge medicines quickly and were helped to understand the rationale for them by the pharmacist.¹

A year ago, the results of a survey were published in *Hospital Pharmacist*. It was satisfying to find that what we thought about the contents of the journal was endorsed by the responses and remarks of readers. One interesting fact that came out of the survey was that *Hospital Pharmacist* also has a loyal base of readers from overseas, even in countries such

as Australia and Canada, which have highly regarded hospital pharmacy journals of their own. There are many journals out there for pharmacists to read but my conclusion, both from the survey and from personal contact with many working in the profession, is that *Hospital Pharmacist* is the only one tailored to the needs of hospital pharmacists and certainly the only one whose appearance is eagerly awaited each month. In many instances, it is the only one to make it out of the polythene wrapper.

So what will be on the pages of *Hospital Pharmacist* between now and 2014? The immediate future is going to be dominated by pharmacist prescribing. It is predicted that hospitals will have directors of prescribing and that routine prescribing will become the domain of pharmacists aided by technology. I cannot gaze into my crystal ball too far into the future. However, one thing is certain: whatever the concerns of hospital pharmacists in the next 10 years, *Hospital Pharmacist* will be there as a platform for discussion and dissemination of best practice.

Surely the ultimate aim of the profession is to ensure the same standards of service to patients, irrespective of where they are being treated, whether it be in England, Scotland or Wales and in the most prestigious teaching hospital or in the small local district hospital. To this end I have no doubt that *Hospital Pharmacist* has a full part to play in providing the necessary information to hospital pharmacists in an interesting and thought-provoking way.

REFERENCES

1. What worked for me. Available at www.timesonline.co.uk/printFriendly/0,,1-421-970571,00.html (accessed 21 January 2004).