Policy · PHA-POL-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 17.3

At a glance

- A qualified pharmacist is accountable whenever the service is open, and the name is displayed.
- Cover is matched to opening hours and recorded on PHA-REG-001.
- The service does not open without an accountable pharmacist on duty.
- Any gap in cover is closed or the service is closed.
- Stop and get help straight away if: the pharmacy is open with no pharmacist on duty.

1. Purpose

To make sure a qualified pharmacist is accountable for every dispensing period (17.3).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

A pharmacy without a qualified pharmacist in charge has no one accountable for what is dispensed. Accountability must be named and present whenever the service is open.

5. Responsibilities

Role	Responsibility	Competence
Responsible pharmacist	Owns the cover rule and the rota	Pharmacist
Service manager	Opens the service only when cover is in place	Manager

6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Name the pharmacist.

- Name the accountable pharmacist for each session on the rota (PHA-REG-001) and display the name.

Key point: Named and displayed.

Step 2. Match cover to hours.

- Match the rota to the opening hours, and record any gap.

Key point: Matched.

Step 3. Close if no cover.

- Do not open the service, or close it, if no pharmacist is on duty.

Key point: Closed if uncovered.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Opening sessions with an accountable pharmacist on duty	100%	Monthly	Responsible pharmacist	Escalate to medical director

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility’s records policy years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
PHA-REG-001	Pharmacist rota and cover register	Register
WRK-REG-001	Training matrix register (existing, reused)	Register

17. Evidence

Reference	Note
E-009	Based on the WHO Medication Without Harm guidance (2017) and the WHO Good storage and distribution practices (2010).
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

- **Medication Safety: Operating SOP-MED-01 End to End** (T-08)

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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