The development of this self-assessment tool shows that the lack of shared guidelines leads to inequalities in the QS between the different FFRDS pharmacies. Nevertheless, some risks are common to these pharmacies. Hence, joint actions could be of critical importance to improve these QS.

Material and methods

An expert group composed of 15 members with different professions was created.

An audit check list made up of 194 items was built.

Each item was rated according to a risk level (from 0 "no risk" to 3 "unacceptable risk") and to an effort level required to control this risk (from 0 "no effort" to 3 "major effort").

Computer modelling was made (Excel file).

Results

This analysis revealed a high risk linked particularly to: pharmaceutical analysis and validation of medical prescriptions (70%), HP preparation and dispensation (67%). Furthermore, 16% of all the studied items showed a risk higher than 80%, whereas 32% showed a risk below 20%. As for the effort level required to control the risk, most items that have not been validated required a “low intensity” or a “medium intensity” effort. They represented 10% to 61% of items. Less than 8% of items required a “major effort”.

Discussion

The development of this self-assessment tool shows that the lack of shared guidelines leads to inequalities in the QS between the different FFRDS pharmacies. Nevertheless, some risks are common to these pharmacies. Hence, joint actions could be of critical importance to improve these QS.