



Consultation: [HSO 11004:2025 Inpatient Services – Public Review - HSO](#)

Submitted: November 17th, 2025

Executive Summary: The draft standard effectively addresses many key issues in inpatient services including appropriate systems, workforce design and patient-centered care. However, there is a significant gap regarding alignment with medication management standards and pharmacy services which are critical components of inpatient services to ensure patient safety and continuity of care throughout transitions in inpatient services.

CSHP provided the following feedback:

- **Pharmacy Services:** Crucial aspects of inpatient services related to the alignment of medication management standards are not addressed, such as:
 - **Service Design and Infrastructure:** Needs guidance on appropriate layout and access to pharmacy work areas (i.e.: medication storage areas in unit, infusion rooms, pharmacist workspaces, and sterile compounding facilities).
 - **Workforce Competency and Training:** Needs guidance on training for medication safety, sterile compounding training, prescribing practices, adverse event reporting, and safe handling of hazardous medications.
 - **Care Transitions:** Topics such as medication ordering, verification, reconciliation, pharmacist consultation, interprofessional reviews, medication discharge and use of patient’s own medication supply or patient’s self-administration of medications.
 - **Equity, Diversity, and Inclusion:** Medication-related needs often vary based on patient culture, language, and socioeconomic background needs to be addressed to ensure equitable access to medications, culturally appropriate medication education, or translation of discharge instructions.
 - **Various Emerging Practices and Specific Topics in Inpatient Services:** Topics without guidance in the standard include antimicrobial stewardship, opioid stewardship, therapeutic drug monitoring, IV to PO conversion protocols, pharmacogenomics, management of controlled substances in inpatient services, and the use of decision support systems.
 - **Care Pathways (Section 4):** Medication protocols, titration schedules, and monitoring strategies are not included in the care pathways yet are crucial to ensuring effective management of these conditions.



- **Quality Improvement:** There is no mention of tracking adverse drug events, medication error rates, formulary compliance, sterile compounding facility or competency audits, or medication reconciliation completion rates.
- **Language/Terminology:**
 - Replace “client” with “patient” to better align with Canadian healthcare terminology. Consider delineating “clinical team” vs. “team”.