

# Cognitive Offloading for Community Pharmacists

Human Factors | Professional Practice | Community Pharmacy

## ✓ SET UP: Build Your Safety System Once

- Source a dedicated notebook or task log for non-dispensing tasks
- Laminate a short checklist for opening, closing, CD checks, and daily governance tasks
- Source a visual hold marker: a coloured cone, card, or basket flag
- Colour-code workflow baskets (Waiting, Deliveries, Queries, Managed Repeats, Clinical)
- Designate a specific bench as the reduced-interruption accuracy checking area
- Brief the whole team on each system and the patient-safety rationale

## ■ EVERY SHIFT: Protect Working Memory

- Write tasks down immediately. Do not rely on working memory for non-clinical tasks
- Place the hold marker on the basket every time an interruption occurs mid-check
- Take a five-second pause to note your place before shifting attention to a colleague
- Complete a structured written handover in the final few minutes of every shift
- Use your chosen decompression landmark to mentally disengage from work

Pitfall	What goes wrong	Prevention
"I will remember it"	Interruptions disrupt working memory and increase the risk of forgotten tasks	Write it down immediately
Complex tools	Extra workload undermines the benefit	Keep it simple and consistently used
No team briefing	Systems are ignored or bypassed	Explain the safety rationale to all
Substitutes safety checks	Errors may reach patients undetected	Offloading supports, but never replaces, professional judgement and independent checks

**Remember**  
**STOP:** Store tasks externally • Track interruptions visually • Organise the environment • Pass on information through handovers.  
**Offloading reduces cognitive load but does not replace professional judgement, clinical assessment or independent accuracy checks.**