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Key stakeholders' experiences with the implementation of medication reviews in community pharmacies: a systematic review.

MICHEL, D., TONNA, A., DARTSCH, D. and WEIDMANN, A.


2022



Key stakeholders' experiences with implementation of medication reviews in community pharmacies – a systematic review

8th PCNE Working Symposium 2022 , Lisbon, Portugal
11-12 February 2022

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*"It remains a conundrum why medication reviews
are not comprehensively and consistently being
delivered across the large number of jurisdictions
that have these pharmacy services. This paper will
certainly help progress such efforts."*

(Reviewer at RSAP, 2021)

AIM

- to critically appraise, synthesise and present the evidence on stakeholders' experiences with MRs
- to identify barriers and facilitators to implementation of MRs

METHOD

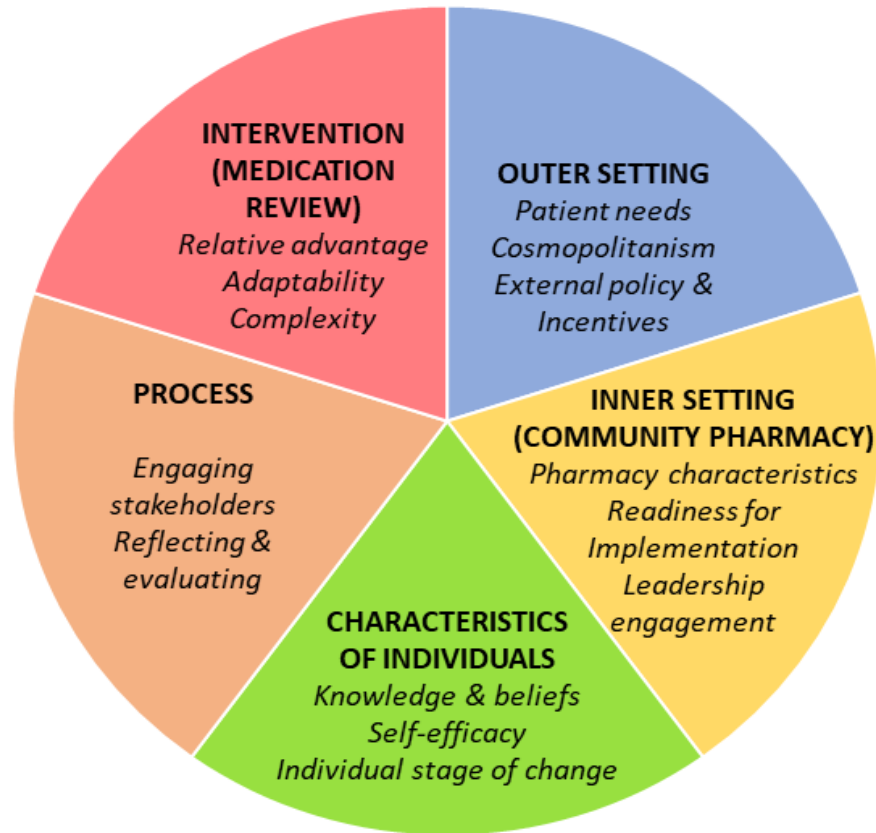
- Systematic search in MEDLINE, Scopus, CINAHL, IPA in June 2019
- English, German, Spanish
- Participants:** Pharmacists, patients, doctors and other external stakeholders
- Setting:** Community pharmacy
- Intervention:** Medication Review
- Outcomes:** Experiences, views, attitudes, barriers, facilitators

RESULTS

- Out of 909 records 23 studies met the inclusion criteria (per June 2019)

Country (No of studies)	UK (6)	USA (5)	E (5)	NZ (2)	B (1)	D (1)	CH (1)	SLO (1)	Q (1)
----- Participants									
Pharmacists	x	x	x	x	x		x	x	x
Patients	x		x						
Doctors	x		x	x		x			
Payers	x	x							
Other	x		x		x				

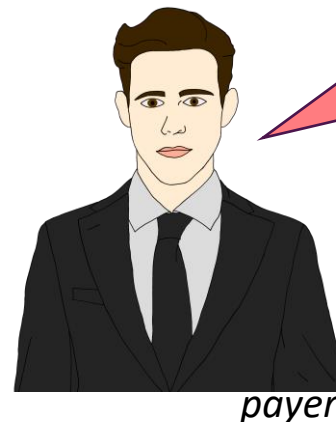
Consolidated framework for implementation research (CFIR) [1]



DOMAINS and *constructs*

INTERVENTION: MEDICATION REVIEW

- **Relative advantage** of MRs compared to standard care acknowledged across all stakeholder groups
- Perceptions of **evidence strength** varied though
- MRs need to be **adaptable** to patient needs and setting
- **Complexity** of MR implementation, delivery and documentation was perceived as barrier



Relative advantage
“...dramatic improvement
in management of diabetic
patients [...] in the
community. So we know
the value is there.” [2]

OUTER SETTING

- Clear mandate and **policy** are necessary
- Adequate **remuneration** for both pharmacists and doctors
- **Collaboration** between doctors and pharmacists must be fostered (**cosmopolitanism**)
- MRs are believed to meet **patients needs**

Patient needs

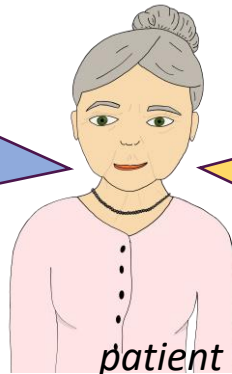
"It offers an added value in the care that you can offer as a pharmacist to the patient."
[1]



pharmacist

Cosmopolitanism

"I don't think doctors like it, outside interference. Be it from a pharmacist or anybody else." [2]



patient

INNER SETTING

- A well-functioning team can be an important facilitator
- Integrating MRs in the existing workflow was challenging
- **Leadership engagement** is fundamental
- Lack of **resources**, in particular lack of time and staff, were big barriers
- Inadequate **internal goals** hamper outcome quality
- MRs can trigger a **culture** shift towards more pharmaceutical care

Goals and feedback

"[multiples] have got head offices telling them off, ringing them up, shouting at them to do MURs and come hell and high water they're doing MURs..." [3]

Leadership engagement

"If this fails, nothing will help. If the boss says, no, I am not investing. He is the driving factor." [4]



payer

INDIVIDUALS

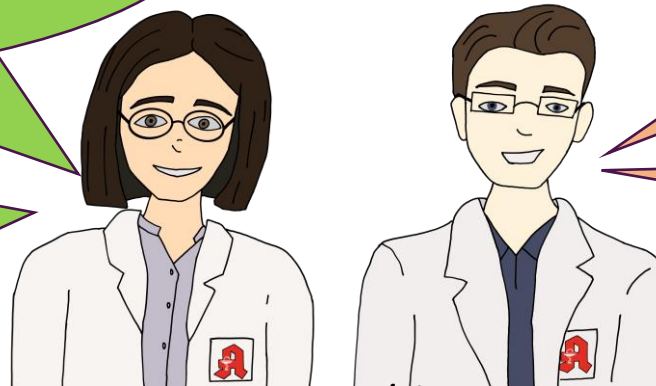
- Pharmacists
 - held **positive attitudes** towards MRs
 - placed high **value** on MR for a number of reasons
 - were open to fulfil new pharmaceutical tasks
 - **believed** in positive patient outcomes
- Lack of **self-confidence** was a barrier, in particular for beginners

Individual state of change

"A lot of knowledge in pharmacotherapy is expected [...]. This is our main tool. It gives you self-confidence." [1]

Knowledge and beliefs

"I think [MR] build a really good relationship with customers." [2]



pharmacists

PROCESS

- Few studies reported **planning** or **reflecting and evaluating** the implementation process
- **Engaging patients** was particularly important in jurisdictions where MRs were not well-established
- **Engaging doctors** could be challenging

Engaging doctors

"A mixed bag. Some are interested, some are not. It can even vary within the practice." [3]

Engaging patients

"People who need it most are the least easy to convince." [4]