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Pharmacy owners' views and experiences with implementation of medication reviews - a qualitative study

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INTRODUCTION

Following amendment of German legislation in 2020, patients are entitled to pharmaceutical care services including medication reviews (MRs). Despite this, the provision of such services is not mandatory for community pharmacies and MRs are not widely available. The decision to implement MRs depends on the individual owners.

AIM

- to explore pharmacy owners' understanding, beliefs and experiences of MRs
- to investigate owners' willingness to offer MRs as a service
- to examine their perceptions of barriers and facilitators towards implementation of MRs in German community pharmacies.

METHOD

- purposive sampling based on an online background survey
- online semi-structured interviews with pharmacy owners (June - September 2021)
- piloted topic guide based on
 - findings of a systematic review [1]
 - Framework for Implementation of Services in Pharmacy (FISpH) [2]:
 - **EXTERNAL SYSTEM**
 - **LOCAL SETTING**
 - **ORGANISATION (PHARMACY)**
 - **INDIVIDUALS (PHARMACISTS)**
 - **SERVICE- (MR-) CHARACTERISTICS**
- audio - recording, ad verbatim transcription
- independent coding by two researchers
- data management assisted by QRS NVivo 11®
- Ethics approval:
 - RGU, Aberdeen, Scotland
 - Ärztekammer Hamburg, Germany

FINDINGS

Out of 67 respondents, 21 owners were invited to participate covering all stages of MR- implementation [3], geographical region, type and size of pharmacies. Data saturation was reached after 18 interviews.

Frequently mentioned constructs and implementation factors were mapped against the 5 domains of FISpH:

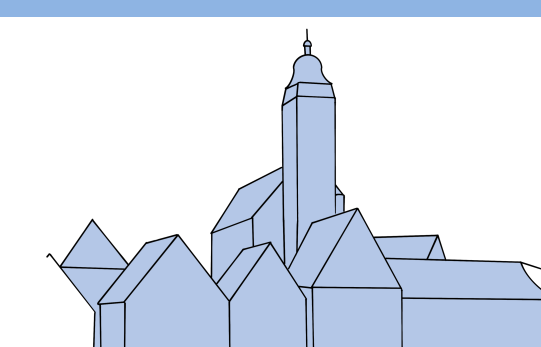
EXTERNAL SYSTEM

Interviewees desired

- Adequate remuneration
- Reliable legal framework for MR delivery
- Implementation support
- Pharmacotherapy and administrative training



LOCAL SETTING



- Profound rapport with patients in community
- Mutual trust and collaboration with doctors grows over time
- Currently low demand of MRs
- Public unawareness of scope and aim of MRs

Community's perception about MR
„Medication reviews need to be more public. [The service] needs to be visible.” [P17]

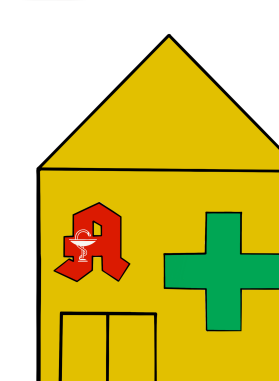
Interprofessional network & collaboration
„We definitely need the cooperation of the doctor, the togetherness [...] otherwise it leads to misunderstandings.” [P12]

Implementation support
„I'd like long-term support, refreshing knowledge, guided exchange with peers.” [P18]

Remuneration
„Remuneration needs to cover costs, to pay the pharmacist.” [P9]

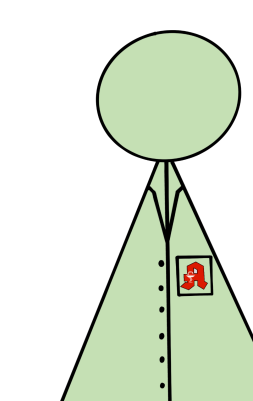


ORGANISATION (PHARMACY)



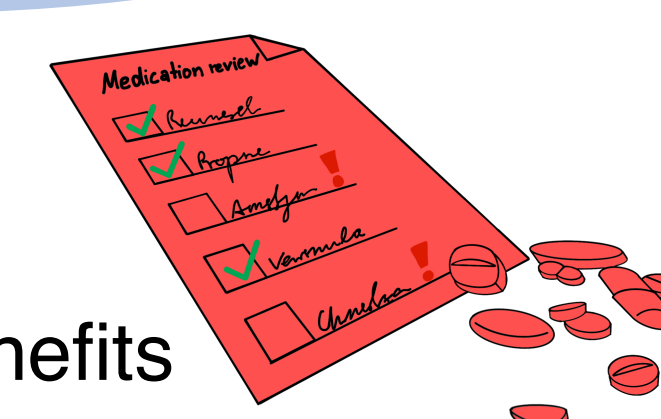
- Serious staff shortages
- High tension for change towards pharmaceutical care (not necessarily MRs)
- Many environmental stressors
- Broad range of experience levels

INDIVIDUALS (PHARMACISTS)



- Heterogeneous knowledge about MRs
- Very positive attitudes towards MRs
- Belief in own self-efficacy
- Sceptical about colleagues' proficiency

SERVICE (MR)



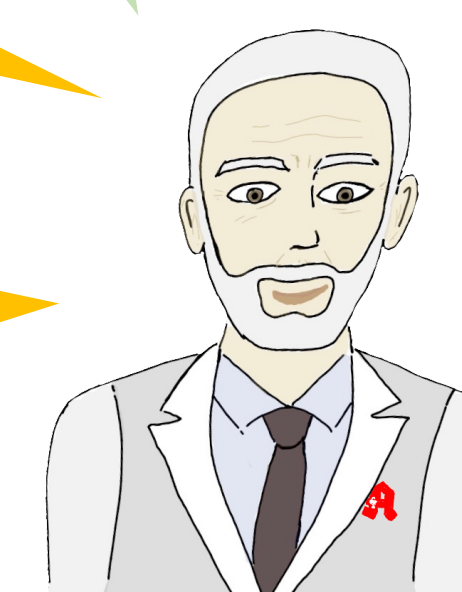
- Organisational benefits (image gain in the community)
- Professional benefits (job satisfaction, welcome change in the workday)
- Patient benefits (deprescribing; better therapeutic outcomes)

Values & motivation
„I prefer doing the proper job, proper pharmacy, to reading and dispensing prescriptions.” [P5]

Self-efficacy
„I think that we pharmacists can do it, that we also have the heart to do it, it certainly needs a firm will to help the patients. Having the data is not enough, you need the willingness.” [P15]

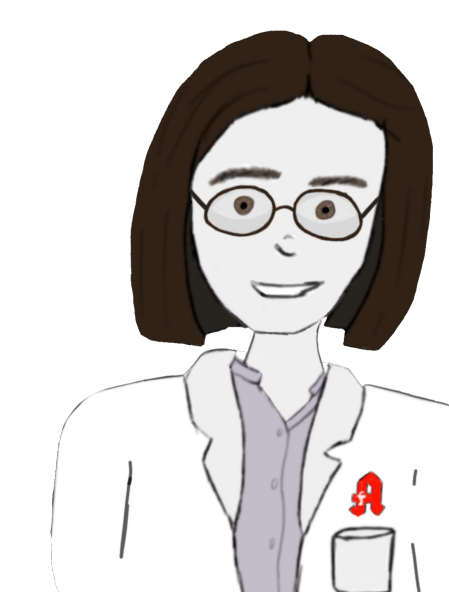
Staff
„The staff shortage we're facing [...] can turn [implementation of MRs] in a damp squib. That's quite a danger.” [P24]

Tension for change
„We can only survive if we offer exactly this [pharmaceutical service]. Otherwise, amazon will deliver, will fling meds onto the balconies.. And then we're out.” [P7]



Professional benefit
„We are really keen on it [...] and all in all, I believe we're just rediscovering our profession afresh.” [P22]

Patient benefit
„Well, we always find [problems]. Be it an interaction, expired stuff, duplicates. The error rate increases with every medicine.” [P21]



CONCLUSIONS

Despite very heterogeneous knowledge about MRs, most interviewees endorsed implementation of MRs. However, participants highlighted the need for training in pharmacotherapy and external implementation support. Various strategies such as raising awareness of the service and continuous support require action from stakeholders on several socioecological levels [4] to advance implementation of MRs, ensuring patients get access to adequate pharmaceutical care.

REFERENCES

[1] Michel et al. Res. Soc. Admin. Pharm. 2021 [2] Moullin et al. Res. Soc. Admin. Pharm. 2016 [3] EPIS framework <https://episframework.com/what-is-epis> [4] Bronfenbrenner Amer. Psych. 1977 (*microsystem: individual, personal level; mesosystem: interrelations in workplace, peer group; macrosystem: general culture, laws, regulations etc. both formal and informal in a given society*) **ACKNOWLEDGMENT** Drawings are a courtesy by Ida Marleen Michel

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