

PHARMACY ADAPTATION SERVICES IN BC: THE PHYSICIANS PERSPECTIVE

Authors: Carlo Marra, Larry Lynd, Natalie Henrich, Pamela Joshi & Kelly Grindrod

This evaluation was completed by the Collaboration for Outcomes Research and Evaluation at the Faculty of Pharmaceutical Sciences, University of British Columbia (www.core.ubc.ca).

ABSTRACT

Objective

In a previous study on pharmacy adaptation services in BC, pharmacists suggested that physician attitudes and practices were a critical component for facilitating or impeding prescription adaptation. The purpose of this study was to examine the perceptions, attitudes and practices of family physicians as they related to pharmacy adaptation services.

Methods

Family physicians registered in the College of Physicians and Surgeons of BC who were currently writing prescriptions were recruited by a market research firm to participate in focus groups. Focus group questions addressed physicians' familiarity and knowledge about adaptation, perceptions of strengths and weaknesses, physician practices around adaptation and dissemination of information on the initiative. Focus groups were located in four of five BC regions.

Results

Forty physicians participated in four focus groups and four physicians participated in semi-structured interviews to augment focus group results. Few physicians reported receiving high volumes of adapted prescriptions. Physicians were unaware of the intended benefits of the initiative and were able to suggest very few possible benefits. Physicians perceived six key concerns arising from the initiative including: compromised patient monitoring; physician liability; physician burden; pharmacist's abilities to make appropriate adaptation; conflict of interest; and impact on physician-pharmacist relationships. Physicians also felt that communications about the initiative were not adequate.

Discussion

In general, the physician experience with adapted prescriptions was limited. Overall, physicians were not positive regarding adaptation services; however, there appeared to be a lack of accurate information regarding adaptations. Suggestions and alternatives were provided by the physicians about the initiative.

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EXECUTIVE SUMMARY

Introduction

- In 2008, the BC provincial government introduced legislation that enabled pharmacists to adapt prescriptions.
- As a result a framework of Professional Development Policy (PPP-58) was developed by the College of Pharmacists of BC to guide pharmacists in providing safe and effective adaptations.
- Research evaluating pharmacy adaptation services in BC among pharmacists suggested that physicians' attitudes and practices were a critical component in facilitating or impeding pharmacy adaptation services.
- The purpose of this study was to examine the perceptions, attitudes and practices of physicians as they related to pharmacy adaptation services.

Methods

- Physicians were recruited in partnership with Ipsos Reid. Forty-six participants were scheduled to attend four focus groups at community facilities (of whom 40 attended), as well as 4 individuals recruited to participate in supplementary interviews.
- Focus groups (lasting 90 minutes in duration) were conducted in four of five regions of BC (Fraser, Interior, Vancouver Coastal, and Vancouver Island).
- Questions were asked about the initiative on the following topics: 1) physicians' familiarity and knowledge; 2) perceptions of strengths and benefits; 3) perceptions of weaknesses or problems; 4) physicians' practices around adaptation; and 5) dissemination of information about the initiative.

Results

- Forty physicians participated in the four focus groups and four physicians participated in supplementary interviews.
- Most physician concerns and opinions about the impact of adaptations were speculative as physicians reported receiving fairly low numbers of notifications of adaptations and some had not received any.
- Physicians were unaware of the intended benefits of the initiative and were able to suggest few possible benefits.
- Physicians **perceived** six key concerns arising from the initiative including: compromised patient monitoring; physician liability; physician burden; pharmacists' abilities to make appropriate adaptations; conflict of interest; and impact on physician-pharmacist relationships.
- Physicians lacked information or were misinformed on the details of the initiative including the remuneration structure for prescription adaptation; the use of "do not adapt" statements; clinical background and training of pharmacists and how physicians were consulted during the development of the initiative.
- Physicians felt that communications about the initiative were not adequate.
- Physicians provided some suggestions and alternatives to the initiative.

Discussion

- Physicians provided a different perspective on adaptations from other stakeholders.
- However, some of their concerns are premised on misinformation or lack of information about the initiative.
- Physicians expressed needs for accurate information about the adaptation initiative and some clear preferences for communication.

Evaluation of Pharmacy Adaptation Services in BC: The Physician Perspective

Carlo Marra

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Collaboration for
Outcomes
Research and
Evaluation



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Study Team

- Dr. Carlo Marra
- Dr. Larry Lynd
- Dr. Natalie Henrich
- Pamela Joshi
- Dr. Kelly Grindrod



Evaluation Study: 3 Phases

- Phase I: Labour Costs, Facilitators and Barriers
- **Phase Ia: Physician attitudes and perspectives**
- Phase II: Patient perspectives and health services use



Pharmacists Perspectives

- This study was developed from the results of structured interviews with pharmacists
- Pharmacists perceived the initiative as benefiting physicians
- Pharmacists indicated that some of their concerns involving physicians and adaptation included:
 - Physicians lack of awareness about the initiative
 - Physicians resistance around adaptation



Methods

- Qualitative methods
 - 4 focus groups
 - 4 regions (Fraser Valley, Interior, Vancouver Coastal, Vancouver Island)
 - 2 urban, 2 urban-rural mix
 - One focus group was augmented with 4 semi-structured interviews



Participant Profile

- 44 physicians
 - 27 males, 17 females
 - 68% were age 35-54 years
 - 43% had been practicing for 20-29 years and 36% had been practicing for 10-19 years
 - 64% self reported as somewhat familiar with the adaptation initiative

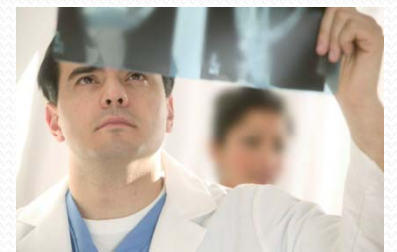


Focus Group Content

- Explored physicians attitudes and practices towards pharmacy adaptation services
- Questions about the initiative were asked on:
 - Physicians' familiarity and knowledge;
 - Perceptions of strengths and benefits;
 - Perceptions of weaknesses or problems;
 - Physicians' practices around adaptation; and
 - Dissemination of information about the initiative

Results

- Some variability existed in the number of adaptations that physicians were seeing in practice
- Many physicians reported seeing no adaptations at all
- Very few physicians reported seeing high volumes of adapted prescriptions (e.g. 10 per week)





Three Dominant Themes

- Lack of physician awareness of intended benefits
- Perceived concerns with the initiative
- Perceptions regarding initiative communication



Perceived Benefits

- In general, physicians expressed a lack of clarity on the intended benefits
- Physician suggested benefits included:
 - Convenience for patients
 - Saving the government money
 - Alleviating some difficulties associated with patient access to physicians



Concerns About the Initiative

1. Compromised patient monitoring
2. Physician liability
3. Physician burden
4. Ability of pharmacists to make appropriate adaptation
5. Conflict of interest
6. Physician – pharmacist relationships



Initiative Communications

- A major criticism about communications was that the physicians perceived that they were left out of the development process
- Physician preferences to receive information included:
 - Being specifically addressed in the notification
 - Notification by fax or email from the BCMA or College of Physicians and Surgeons
 - Receiving concise, bulleted information with links to a website
 - Advance notifications of any changes prior to the general public



Consultation Processes

- However there were consultation processes that took place involving both the BC Medical Association and the College of Physicians and Surgeons of BC
- Some of the consultations led to changes to the initiative including:
 - Limitations of the time frame for adaptations
 - Addition of the notification fax stage for physicians
 - Limitations on the types of drugs that could be adapted



Suggestions and Alternatives

1. Pay physicians to discuss adaptations with pharmacists by phone and make modifications in collaboration
2. Pay physicians a small fee to do short-term renewals by telephone
3. Allow pharmacists to adapt only when they work in interdisciplinary setting (e.g. collaborative care setting)
4. Give pharmacists a fixed salary to remove financial incentive for adaptations
5. Limit adaptations to Doctors of pharmacy (PharmD's)
6. Limit the time frame for adapted renewals to 30 days



Conclusions

- Physicians provided a different perspective on adaptations from other stakeholders
- However, many of their concerns are premised on misinformation or lack of information about the initiative
- Physicians expressed needs for accurate information about the adaptation initiative and some clear preferences for communication