

PRACTISE - PhaRmAcist-led CogniTive Services in Europe: survey protocol and pilot study

We are looking for interested researchers, who would like to participate in our survey!



Tamara L. Isenegger*¹, Maria I. Branco Soares², Filipa Alves da Costa², Kurt E. Hersberger¹

¹ Pharmaceutical Care Research Group, University of Basel, Switzerland

² Centre for Interdisciplinary Research Egas Moinz (CiiEM, ISCEM), Campus Universitário, Quinta da Granja Monte de Caparica, Portugal

Background and objectives

In 2015, the International Pharmaceutical Federation collected data on remuneration models for community and hospital pharmacy and identified large variations highlighting that the focus is largely put on products and not on cognitive services.¹ Nevertheless the number of **pharmacist-led cognitive services** around the world has increased in the last years.²

Definition of pharmacist-led cognitive service: Service provided or supervised by the pharmacist, based on a standardized and structured procedure, for the purpose of promoting optimal health and drug therapy and that is not necessarily drug or product related.³ (adapted)

Aims:

- To map the current remuneration models of pharmacist-led cognitive services in community pharmacies across Europe
- To focus on medication review and update a prior survey on medication review practice in Europe⁴

Methods

Development

- Selection of pharmacist-led cognitive services was based on:
 - a previous study by our group⁶ / search on official government websites, the PCNE wiki and arising links
- Definitions for the selected pharmacist-led cognitive services based on:
 - MeSH browser / MEDLINE / Google Scholar / grey literature / internet

Pilot study

The pilot aimed to assess face and content validity main indicators (Understanding and extensiveness) and was undertaken by a steering group composed by researchers focusing on pharmaceutical care

Study design main study

- Cross-sectional study design with an online survey
- At least two participants per country/region across Europe, meeting specific criteria (research, practice and policy representatives)

Results

Development

The survey consists of two parts.

- **Part A:** 21 different pharmacist-led cognitive services (Table 2)
- **Part B:** focus on medication review services (Table 1)

Table 1: The different types of medication reviews⁵

Characterisation:		Information available:		
Type	Level	Medication history	Patient interview	Clinical Data
Type 1	Simple	+		
Type 2a	Intermediate	+	+	
Type 2b	Intermediate	+		+
Type 3	Advanced	+	+	+

Pilot study

- **Participants:** Slovenia (n=3), Belgium (n=1), Denmark (n=1), Portugal (n=2), Finland (n=2), Netherlands (n=1), Switzerland (n=1)

Face and content validity main indicators:

- **Understanding:** the definition of the service “personalised medicine (precision medicine)” was adapted
- **Extensiveness:** Survey is very/too long → service “repeat dispensing” was removed in part A, 9 items were removed in part B
- the introductory part was very long / enough space for further explanations needed → reduced introductions

Table 2: 21 pharmacist-led cognitive services

<ul style="list-style-type: none"> ○ Medicines dispensing ○ Adherence support and monitoring ○ Administration of injectable medicines ○ Assessment of the inhalation technique ○ Generic substitution ○ Health screening ○ Home delivery of medicines ○ Immunisation ○ INR testing and/or management ○ Opioid substitution treatment ○ Needle exchange ○ New medicines service ○ Personalised medicine (Precision Medicine) 	<ul style="list-style-type: none"> ○ Pharmaceutical Care (Medication Therapy Management) ○ Point of care testing ○ Prescribing (Under specific protocol and/or for specific list of medicines) ○ Prescription renewal ○ Provision of emergency oral contraception / post-coital contraception ○ Provision of information on medicines ○ Smoking cessation counselling ○ Travel medicine
--	---

References

- 1 Fédération Internationale Pharmaceutique (FIP). Sustainability of pharmacy services: Advancing global health 2015. Available from: http://www.fip.org/files/fip/Sustainability-Pharmacy-Services_Executive_summary_2.pdf accessed 15.07.2016.
- 2 Houle SK, Grindrod KA, Chatterley T, et al. Paying pharmacists for patient care: A systematic review of remunerated pharmacy clinical care services. *Can Pharm J (Ott)* 2014;147(4):209-32. doi: 10.1177/1715163514536678
- 3 Nutescu EA, Klotz RS. Basic terminology in obtaining reimbursement for pharmacists' cognitive services. *American journal of health-system pharmacy* 2007;64(2):186-92.
- 4 Bulajeva A, Labberton L, Leikola S, et al. Medication review practices in European countries. *Res Social Adm Pharm* 2014;10(5):731-40. doi: 10.1016/j.sapharm.2014.02.005
- 5 <http://www.pcne.org/working-groups/1/medication-review> accessed 29.09.2016.
- 6 Martins SF, van Mil JW, da Costa FA. The organizational framework of community pharmacies in Europe. *Int J Clin Pharm* 2015;37(5):896-905. doi: 10.1007/s11096-015-0140-1
- 7 Pushkin DB. A comment on the need to use scientific terminology appropriately in conception studies. *Journal of Research in Science Teaching*

Discussion

Clear definitions of terms are pivotal for such an European wide survey to avoid results based on pseudoconceptions⁷, because the health care systems across Europe varying a lot and consequently the structure and content of the provided services in the different countries. The PRACTISE survey is an ongoing project and the final results shall be available for the next ESCP in 2017.



Corresponding author
Tamara.Isenegger@unibas.ch
Pharmaceutical Care Research Group, University of Basel
Klingelbergstrasse 50, 4056 Basel, Switzerland
www.pharmacare.unibas.ch