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RESEARCH NOTES

Managerial skills of new practitioner pharmacists within community practice

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ABSTRACT

Objectives: To identify managerial skills required in community pharmacy practice, explore new practitioners' previous exposure to these skills, and assess new practitioners' perceived preparedness to take on managerial responsibilities.

Methods: A survey was developed with the use of Qualtrics and distributed by state pharmacy associations using a convenience sample of pharmacists from Iowa, Kentucky, Michigan, Ohio, and Pennsylvania. Pharmacists not practicing in a community pharmacy setting at the time of the study were excluded. New practitioners were defined as pharmacists practicing for no more than 10 years.

Results: A total of 168 pharmacists completed the survey. More than one-half (56%) of respondents self-reported being in a managerial position, and 90% of respondents thought that managerial skills were always or very often necessary. At graduation, 15% of respondents rated their managerial skill proficiency to be high to very high, with this increasing to 57% at current point in their career. When comparing managers versus non-managers, 78% of skills assessed showed higher utilization in managers. Interestingly, only 44% of skills showed a higher proficiency in managers. Finally, 88% of respondents thought that their managerial skills could be improved.

Conclusion: New practitioners in community practice reported a high utilization of managerial skills, as well as improved proficiency throughout their careers. These skills are important in both community pharmacy training and practice. Managers reported higher utilization of managerial skills, but that utilization did not always correlate with proficiency. This highlights the need to further identify and improve managerial skills during pharmacy education and as part of ongoing continuing professional development.

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As of 2015, there were 60,730 community pharmacies in the United States, employing 60% of an estimated 297,100 pharmacists.^{1,2} Evaluating community pharmacy practice is relevant, because more pharmacists are employed in this area than in any other.³ Effective managerial skills, in addition to clinical knowledge, are imperative, because community practitioners must use a variety of skills to ensure success in

their practices. In addition, competing job functions often decrease the time available to focus on development and improvement of managerial skills throughout a pharmacist's career.⁴⁻⁶

Key differences in preferred skills when hiring new pharmacy graduates have been identified based on practice setting. Community pharmacy managers valued business sense and being methodical in their organized performance of a task with subsequent follow-through as the highest desired skills, whereas institutional managers valued these lowest.⁷ This highlights the potential for differences in desired managerial skills between community and hospital pharmacist practitioners and a rationale for evaluation of managerial skills on a setting-specific basis.

There is limited pharmacy-specific literature to identify which managerial skills are necessary to be an effective community pharmacy manager. This has left the profession of

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pharmacy to review business literature and apply it to community pharmacy practice.⁵ Although community pharmacy has not evaluated necessary managerial skills, health-system pharmacy research has identified which managerial skills are necessary for practice. The most important skills were foundational skills for practice such as managing change effectively, demonstrating ethical conduct, taking personal responsibility, and communicating effectively. However, it is unclear if these skill sets can be applied to other pharmacy practice settings.^{8,9} It is important to identify which managerial skills are used within community pharmacy practice, and subsequently if this requires different training and development than managerial skills for health-system pharmacy practice.

An evolving health care system makes effective use of managerial skills for new graduates imperative in all practice settings.^{5,9,10} Many pharmacists are promoted to managerial positions because of technical expertise in pharmacy distribution, a different skill set than that needed to be an effective manager.⁶ Even those in non-management positions may act as the shift manager, overseeing the staff and pharmacy workflow as the only pharmacist on duty.^{5,6} Recently, a community pharmacy chain revised their internship program to include managerial topics (human resources, law, and ethics) after noticing that many new graduates were not confident with these skills and could not operate the pharmacy at a high level.¹¹ Anecdotally, many new practitioners reflect on their lack of appreciation of the value of managerial skills during their management-related coursework, identifying this skill set as an area of challenge when entering practice.

In 2012, the Accreditation Council on Pharmacy Education (ACPE), the National Association of Chain Drug Stores Foundation, and the National Community Pharmacists Association (NCPA) determined entry-level competencies and skills needed for community pharmacists. A total of 7 competencies were identified, with 5 relating to management: communication skills, dispensing systems management, business management, legal considerations, and leadership abilities.³ Colleges and schools of pharmacy incorporate required curriculum that addresses the development of these skills, but business and management coursework are traditionally not a primary focus. In addition, student learning and experiences may not be consistent with the practical skills required in the community pharmacy setting.^{4,5,10,12} With a high proportion of graduates entering community practice, it is important to identify practitioners' comfort with managerial skills and potential opportunities for improvement.

Objectives

This study sought to identify managerial skills required in community pharmacy practice, explore new practitioners' previous exposure to these skills, and assess new practitioners' perceived preparedness to take on managerial responsibilities.

Methods

Survey design

The survey consisted of 3 sections: demographics, including practice site and position; assessment of managerial

skill utilization and proficiency; and assessment of exposure to and interest in further development of managerial skills. Managerial skills were selected by reviewing previously published survey instruments and were refined for community practice with the use of community pharmacy management references.^{4,5,8,9,14} The survey instrument is in [Appendix 1](#), available on japha.org as supplemental content.

Survey administration

The states that were surveyed were determined to have community practice environments similar to Ohio's by NCPA's 2012 Digest and included Iowa, Kentucky, Michigan, and Pennsylvania.¹³ Qualtrics was used to develop and deliver the survey sent via a link through state association e-mails. The survey was open for 6 weeks, with 3 e-mail communications including the initial survey launch and 2 reminders. A modified version of the Dillman Tailored Design was used owing to varying frequencies of communication. Pharmacists were excluded if they reported graduating before 2004 (new practitioner was defined as no more than 10 years since graduation, and the study was undertaken in 2014). Pharmacists were also excluded if they indicated practicing in a setting other than community pharmacy.

Data analysis

Within the survey, Likert-type scale questions were coded for data analysis as never = 1, rarely = 2, sometimes = 3, very often = 4, and always = 5 for skill utilization questions. For proficiency questions, the Likert-type scale questions were coded for data analysis as very low = 1, low = 2, medium = 3, high = 4, and very high = 5. Survey responses were summarized by reporting counts and percentages for each answer. Wilcoxon rank sum tests were used to compare utilization and proficiency responses between managers and non-managers. Statistical tests were performed at the $\alpha = 0.05$ significance level. Data were analyzed with the use of SAS version 9.3 (SAS Institute, Cary, NC) and biostatistician support through Ohio State University. This study was approved by the Ohio State University Institutional Review Board.

Results

A total of 352 pharmacists responded to the survey; 180 pharmacists met the inclusion criteria, and 168 of those fully completed the survey. A true response rate could not be determined, because the survey distribution via e-mail communication methods included pharmacy technicians, pharmacy students, and pharmacists from all practice settings; with the use of all as eligible ($n = 11,939$) the response rate was 3%. The majority (53%) of respondents were 30–39 years of age, and approximately two-thirds (68%) were women. Years of practice were well distributed: 12% practicing less than 1 year, 23% 1–3 years, 34% 4–6 years, and 31% 7–10 years. More than one-half of the pharmacists (56%) indicated they were currently holding a management position.

Pharmacists reported a high use of managerial skills as part of their job, with 90% reporting that they were very often or always a necessary component. The majority (88%) of respondents also indicated there was a high or very high

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