



Original Research

# Hospital pharmacists' perceptions of medication counseling: A focus group study

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## Abstract

**Background:** Medication counseling sessions are key times for a pharmacist to speak to patients about their medications and the changes made to their therapies during their hospital stay.

**Objectives:** To explore hospital pharmacists' perceptions of their roles and goals in patient medication counseling, and perceived barriers and facilitators to achieving their goals.

**Methods:** Hospital pharmacist focus groups were held in two tertiary referral hospitals. Eligible pharmacists had provided medication counseling within the previous six months in inpatient and/or outpatient settings. Interested pharmacists attended a focus group designed to elicit their opinions and perceptions of patient medication counseling. Focus groups were audio recorded and transcribed verbatim. Inductive thematic analysis was applied to the data to identify initial patterns (codes) which were then organized into common overarching themes using NVivo<sup>®</sup> software. The codes were reviewed for reliability by pharmacists independent of the focus groups.

**Results:** Six, 1-h focus groups were conducted with a total of 24 pharmacists participating. Saturation of information was determined after four focus groups. Greater than 80% consensus was achieved for reliability of the identified codes. A number of themes emerged from these codes around the goals, roles, and the barriers and facilitators to meeting these goals. Pharmacists' patient-centered goals in medication counseling were to build rapport, to empower patients and to improve patients' experience, health and safety. These goals would be accomplished through specific roles such as being an assessor, educator and problem-solver. Pharmacists frequently cited time pressures caused by systemic (hospital), and pharmacy specific processes as key challenges to achieving their goals. Factors that enabled pharmacists to meet their goals were those related to effective interprofessional collaboration and the quality of professional practice (such as training, expanded roles and advanced planning for discharge).

**Conclusions:** Hospital pharmacists emphasized patient-centered goals in medication counseling and outlined the challenges to meet those goals. The findings from this study will be used to develop

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strategies for effective communication and inform pharmacy practice changes to improve patient care.  
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*Keywords:* Hospital pharmacist; Focus group; Goal; Role; Communication

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## Introduction

Discharge from hospital to community or to other health care facilities marks an important transition in care for patients. Discharge and other transitions such as admission to hospital or transfers within a hospital have been identified as particular times when patients may be at risk of experiencing medication errors and adverse events.<sup>1–3</sup> Medication counseling opportunities are key times for pharmacists to speak to patients about their medications and the changes made to their therapies during their hospital stay.<sup>2,4–7</sup> Failure by a hospital pharmacist to communicate effectively with patients may negatively impact a patient's ability to understand medication issues contributing to medication non-adherence.<sup>8–11</sup>

The literature indicates patient benefits with hospital pharmacist involvement in discharge counseling and the practice has been incorporated into national pharmacy professional standards.<sup>12</sup> However, little has been published about hospital pharmacists' perceptions about their role in this process and how they believe their practice impacts patients.<sup>13–17</sup> The authors were interested in exploring how hospital pharmacists view their professional role and their individual goals in medication counseling as well as the factors that enable and prevent them from meeting these goals.

Learning more about how hospital pharmacists perceive their roles and goals in interacting with patients at discharge will provide a better understanding of the current practice followed by pharmacists working in Australian hospitals. This may also help identify gaps in professional practice on which to focus pharmacist education and training as well as some potential areas for expanded professional scope.

## Objectives

To explore hospital pharmacists' perceptions of their roles and goals in patient medication counseling, and perceived barriers and facilitators to achieving their goals.

## Methods

### *Study type, design and tools*

This was a qualitative study using a focus group approach to obtain rich detail and an in-depth understanding of how hospital pharmacists perceive their role and its value in counseling patients at discharge about their medications.

A focus group guide of questions and prompts was developed and piloted with input received from hospital pharmacists independent of the study.

Research ethics approval for the study was received from the Human Research Ethics Committee (HREC/14/QRBW/546), participating hospitals, and The University of Queensland.

### *Inclusion criteria*

Eligible participants were hospital pharmacists who had provided discharge or medication counseling in the previous 6 months in either an acute ward or ambulatory clinic.

### *Enrollment*

Interested pharmacists responded electronically to an expression of interest email, completed a demographic questionnaire and consent forms, and returned these to the first author (BC). Two reminder emails were sent out at two week intervals to recruit pharmacy staff.

### *Data collection*

Focus groups included pharmacists from two teaching hospitals in Brisbane. A purposive sampling of participants was utilized to ensure inclusion of pharmacists from different levels of training, experience and practice areas.

One-hour, audio recorded, focus group discussions were led by BC who followed the prepared guide of questions and prompts. At the conclusion of each focus group, a member check was conducted in which participants' discussion points were summarized and their feedback was requested to ensure appropriate interpretation. Participants were encouraged to contact BC electronically with any further input.

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