



Original Research

Consolidating innovative practice models: The case for obstructive sleep apnea services in Australian pharmacies

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Abstract

Background: Pharmacists in Australia have pioneered an innovative role in providing obstructive sleep apnea (OSA) services in community pharmacies. A professional practice framework is yet to be established for this novel service area.

Objectives: To explore the practices and experiences of Australian pharmacy staff providing OSA services.

Method: Semi-structured telephone interviews were conducted using an interview guide to explore *a priori* areas of interest. Interviews were audio recorded, transcribed verbatim and thematically analyzed using a framework approach.

Results: Interviews were completed with 22 practitioners from demographically diverse pharmacies. Key themes emerging from the interviews included motivation for providing the service, current practice frameworks, determinants for sustaining the service and future directions for the profession. Participants reflected on the professional satisfaction they derived from providing the service and being able to contribute to an important public health area. However, numerous impediments to service provision were discussed; these were broadly conceptualized as financial, professional, societal and geographical issues. Important practitioner needs were highlighted, including professional training opportunities and support. The need for a regulatory practice framework to ensure quality and uniformity of service provision within the profession was emphasized. Broader uptake of these services in the absence of such a framework was a key area of concern.

Conclusions: This study showcases a novel area of pharmacy service provision. Innovative services need to be explored and defined before being consolidated into professionally recognized areas of practice. For OSA services in Australia, the next key step for the profession is to establish a professional practice framework to support current and future implementers of the service and ensure a minimum standard of care.

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Introduction

Modern pharmacy practice has undergone significant change, evolving from a predominantly medication supply role to a focus on clinical services.¹ More recently, further diversified roles have been identified for pharmacists, recognizing their broad health knowledge beyond the domain of pharmacotherapy. Newer practice frameworks are taking into consideration not only the skill set of the pharmacist, but the accessibility of pharmacy premises themselves.²

Within this landscape, pharmacies worldwide are exploring novel territory, for example, as key players in public health. A notable case in point is the involvement of some Australian pharmacies in the management of obstructive sleep apnea (OSA). OSA is a chronic sleep disorder, with prevalence estimates (of at least mild disease severity) ranging from 3 to 28% of adults in Western countries.³ An estimated 80–90% of middle-aged adults with the condition remain undiagnosed.⁴ Given the multiple comorbidities, and increased cardiovascular and mortality risks associated with OSA, there are considerable public health implications for undiagnosed and untreated disease.^{5–8}

The management of OSA involves many interface points between the patient and the health care system. Community pharmacists are well placed to deliver aspects of OSA care, particularly screening and referral of ‘at risk’ patients. Their knowledge of medications, health conditions, and frequent interactions with the public provide ample opportunities for screening activities. There is also the potential for pharmacies to engage in a specialized capacity with aspects of care after diagnosis, such as the provision of continuous positive airway pressure (CPAP) devices. Nasal CPAP represents the mainstay of treatment for OSA.⁹ Its use involves several key components, requiring the assistance and skill of a trained practitioner. The correct fitting of the mask is a crucial skill required by the CPAP provider, as this process is critical to patient acceptability and ensuring delivery of pressurized air to maintain upper airway patency.¹⁰ While CPAP efficacy is high, patient adherence is problematic, and troubleshooting support, education, and counseling from providers are important factors in CPAP effectiveness.¹¹ Finally, ongoing adherence monitoring, equipment maintenance, and liaising with the referring physician are also aspects of CPAP provision. The authors previously surveyed Australian pharmacies involved in OSA care and found most practices centered

around CPAP services.¹² However, a spectrum of other roles was evident. Fig. 1 depicts the known areas of pharmacy involvement across stages of OSA management.

OSA services within the pharmacy setting are still in their relative infancy in Australia. The impetus for pharmacy involvement has stemmed from a need to improve patient access to sleep services, due to supply-demand imbalances within the health care system.¹³ Accessibility issues are further compounded by the increasing prevalence of OSA, which has paralleled the rise in obesity rates.^{14,15} In Australia, strategies for addressing the burden of disease have included shifting aspects of OSA management from tertiary to primary care settings, and expansion of the sleep health workforce.^{16–19} This has seen certain community pharmacies pioneer a role in providing OSA services. This represents an innovative area of pharmacy practice, from both a clinical and organizational perspective. Clinically, the service is unique in that it has a distinct public health emphasis and centers around a therapeutic device rather than a pharmaceutical product. Organizationally, the service model is novel in that it incorporates both the traditional supply role of pharmacists along with modern day practice concepts, such as forming a therapeutic alliance with the patient and accepting responsibility for patient health outcomes.^{20,21}

The Australian pharmacy profession has yet to formally recognize or consolidate OSA services with the establishment of a professional practice framework, as has occurred with other expanded practice areas.^{22,23} The diffusion of innovations model prescribes key factors for success in ‘spreading’ innovative practice: the need for understanding relative advantage, compatibility with existing values and practices, complexity, trialability, and evidence of outcomes.²⁴ In line with this, there is a need to explore current OSA services and establish a practice framework if they are to become a professionally recognized, sustainable area of pharmacy practice. It is also important to identify determinants for sustaining OSA programs, in order to support pharmacies providing, or contemplating providing, these services. To date, there has been little research investigating this novel area of practice, and there are no reports in the literature of pharmacists in other countries offering these services. While the authors have previously investigated OSA pharmacy services using survey format,^{12,25} in-depth, qualitative studies describing the experiences and

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