

Case Study

Evaluation of the implementation process and outcomes of a professional pharmacy service in a community pharmacy setting. A case report

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Abstract

Pharmacist-led medication review services are recognized as a key to medicines management. This case study describes the implementation process of a medication review with follow-up service in a community pharmacy setting and evaluates its initial outcomes. An implementation-effectiveness hybrid study was undertaken in a community pharmacy setting. The implementation process was divided into four different phases: Exploration and adoption, program installation, initial implementation, and full operation. A core set of implementation outcomes was measured, including penetration, implementation costs, feasibility, fidelity, acceptability, appropriateness and efficiency. The penetration rate of the service was nearly 62.5%, and the implementation costs were 57,359.67€. There was a high retention-participation rate of patients. For every month of service provision, there was a 1.27 increase in the number of patients requesting the service, compared to the number of patients being offered the service. The time spent on service provision was 171.7 min per patient. Average patient satisfaction with the service was 4.82 (SD: 0.39, scale 1–5), and the acceptance rate of care plans by patients and general medical practitioners were 96.99% and 96.46%, respectively. There were 408 negative outcomes associated with the use of medications were identified during the study (3.09 per patient), of which 96.3% were resolved. The average time per patient spent on service provision significantly decreased along the 18 months of service provision. This case report can assist

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individual pharmacists and professional organizations interested in implementing evidence-based services by offering an example on how to approach the implementation process in a systematic way.

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Introduction

Medicines are the most frequent and cost-effective resource for treating chronic conditions. They usually represent a high cost in national health care systems. Suboptimal use of medications is usually associated with negative clinical outcomes and drug-related problems.¹ These events are a significant public health problem, due to their prevalence and negative consequences. Community pharmacist-led medication review services have been proven to be a possible solution to address this problem. They are recognized as a key element of medicines management, as patient safety and health care costs are optimized.²

There is evidence that pharmacy-led medication review services are associated with positive clinical, economic, and humanistic outcomes.^{3–6} However these benefits cannot accrue unless there is effective implementation of the service. In the case of pharmacy, as in other parts of the health care system, there is a large gap between the development of new health innovations and their incorporation to routine practice, mainly due to lack of implementation programs and evidence-based strategies. Their implementation level is rarely defined or measured, and success appears to be limited, highlighting that further research is required to assist the process of professional services implementation in pharmacy.

The discipline of implementation science has developed theories, models and frameworks aimed at describing, understanding and evaluating the translation of evidence into practice. Implementation process models are used to describe and/or guide the process of implementation.⁷ They have been acknowledged as a key element to facilitate the implementation of health innovations into practice,⁷ overcoming the current research to service gap.⁸ Evaluation frameworks provide a structure for assessing implementation, through the measurement of implementation outcomes. They have been defined as “*the effects of deliberate and purposive actions to implement new*

treatments, practices, and services.”⁹ Implementation outcomes enable empirical assessment of the success of strategies used to implement new interventions or services and to compare their effectiveness. This allows optimization of the service benefits, stimulates dissemination of findings into other settings and promulgates sustainability. However, in most initiatives to translate evidence-based interventions into real practice, implementation success is assessed exclusively using data on clinical outcomes.⁹

In Spain, medication review with follow-up (MRF) has been identified as one of the main professional services to be provided by community pharmacists.¹⁰ However, its implementation appears to be limited. Although some studies have identified the elements that hinder and facilitate its implementation,¹¹ there is a paucity of evidence on implementation studies in a community pharmacy setting. This paper describes the implementation process of an MRF service in a community pharmacy setting and evaluates its implementation outcomes.

Methods

This paper describes part of a larger study that used an effectiveness-implementation hybrid research design intended to evaluate the effectiveness of both an intervention and an implementation strategy.¹² The full study methodology and the effectiveness outcomes of the medication review with follow-up service have been reported elsewhere.¹³ In this paper, only implementation processes and outcomes are described as a case report.

This service was undertaken in a community pharmacy of the province of Gipuzkoa, Spain. The pharmacy employing 4 pharmacists and 2 technicians was located next to a health care center.

Description of the innovation

A pharmacist-led medication review with follow-up (MRF) was the innovation

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