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Research in Social and Administrative Pharmacy 11 (2015) 163–175

Original Research

The impact of patients' perceptions of the listening skills of the pharmacist on their willingness to re-use Home Medicines Reviews: A structural equation model

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Abstract

Background: Research has shown that consumers prefer a pharmacist who is skilled in communication and pays particular attention to friendliness, empathy and attentiveness. Medication management interviews tend to be more time consuming than other patient-pharmacist interactions. The extra time for these interviews provides patients with an opportunity to evaluate the quality of interpersonal care provided by the pharmacist. Patient evaluations of pharmacists may influence their intentions to use medication management services. In previous studies, a conceptual model based on information-seeking theory was developed and used to explain a significant amount of the variation in consumers' and caregivers' willingness to use Australia's Home Medicines Review (HMR) service.

Objective: The aim of this paper was to extend the conceptual model to include the influence of patients' evaluation of interpersonal care provided. We aimed to test the hypothesis that patients' perceptions of how well the pharmacist listened to them during their most recent HMR interview (Listening) would increase their willingness to re-use HMR (Willingness).

Methods: Patients (N = 595) who had experienced Australia's Home Medicines Review (HMR) within the previous 6 months completed questionnaires. Exploratory and confirmatory factor analyzes were used to validate the measurement scales. Structural equation modeling was used to test the model.

Results: The structural model provided a reasonable fit to the data and explained 53% of the variation in Willingness. The structural model revealed that Listening increased patients' perceptions that the HMR provided positive outcomes (Outcomes) ($\beta = 0.37$, P < 0.05) and directly and indirectly increased Willingness ($\beta = 0.61$, P < 0.05).

Conclusion: These results suggest that patients' willingness to use a medication management service in the future is strongly influenced by their perceptions of how well the pharmacist listened to them during their last medication review interview. Improving pharmacist listening skills may be explored as a strategy for improving patient engagement with pharmacy services.

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Keywords: Communication skills; Listening skills; Medication therapy management; Patient care management; Patient-centered care: Pharmacist

Introduction

A growing body of literature has emerged which highlights the importance of improving medication safety. This is particularly relevant considering the aging population and the growing number of persons who experience multiple morand consume multiple medicines.¹ Medication management services aim to prevent and resolve medication-related problems and improve health outcomes for those at greatest risk of medication-related problems.²⁻⁴ Within the Australian context, evidence is beginning to mount that the services can improve medication safety through, for example, enhanced interprofessional communication, goal setting, and optimized therapies.^{2,4,5}

Given the fact that patients with multiple morbidities tend to feel burdened by timeconsuming treatments, 6,7 and that participation in medication management services generally requires additional patient-pharmacist contact, it is important to understand more about the factors which influence patients' willingness to use these services. Conducting research on patients' experiences with an established medication management service could inform practitioners on how best to deliver the service - with a view to encouraging patient participation and perhaps driving consumer demand. Such research could also inform policymakers tasked with the design, delivery and audit of the suite of medication management services currently on offer now and those in the pipeline. Therefore this manuscript deals with patients' subjective evaluations of an Australian medication management service, Home Medicines Review (HMR), and how these evaluations may influence their willingness to re-use the service.

Home Medicines Review (HMR) – a description

HMR is a medication management service which is provided collaboratively by general practitioners (GPs) and pharmacists. An HMR is initiated with a request from the patient's GP to a pharmacist, who may be their preferred community pharmacist or a consultant pharmacist who works independently. Pharmacists who perform HMR must be accredited by an approved credentialing body. The pharmacist generally visits the patient

and caregiver(s) at their home, for an extended interview regarding medication management issues. The pharmacist produces a comprehensive medication history. Following the visit, the pharmacist sends a written report documenting medication review findings and recommendations to the GP, who then formulates a revised medication management plan with the patient. During the course of the study, the Australian government subsidized the full cost of the service once per year. In 2014, due to budgetary constraints, the program was changed to allow for one service every two years. It is possible for HMR to be performed more frequently in cases where it is deemed necessary by the GP, after for example a recent hospitalization.

In previous studies, a conceptual model of willingness to use HMR was developed and tested in eligible non-recipient patients, consumers and caregivers.11 The present study builds on that research by extending the conceptual model to deal with recipient patients. This study examines the impact of patients' subjective evaluations of the interpersonal care provided by the interviewing pharmacist on their willingness to re-use HMR. It is known that patients' subjective evaluations of the interpersonal communication skills of health providers can have a profound effect on their perceptions of health quality, satisfaction and behavioral intentions. 12 For patients, a highly salient aspect of the communication process with health providers is likely to be their perception of how much the health provider was listening to them. Therefore, this manuscript describes how our conceptual model was extended to examine the relationship between patients' perceptions of the listening skills of an interviewing pharmacist and their willingness to re-use HMR.

The aim of this paper was to extend our conceptual model to test the hypothesis that the higher patients' rated the listening skills of the pharmacist who interviewed them during their most recent HMR interview (*Listening*), the higher their willingness to re-use HMR (*Willingness*) would be. A deeper aim of the paper was to understand the mechanisms of how *Listening* influences *Willingness*. Therefore, the first section of the Methods section describes how the conceptual model was extended and proposes various

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