

What Patients Want: Preferences Regarding Hospital Pharmacy Services

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Background

- Over the last 20 years the role of pharmacists has changed from preparation and distribution of medication to medication counseling and education (Hamameh et al., 2011). Patients have expressed interest in community pharmacists playing a larger role in their care (Gould et al., 2006). Pharmacists underestimate the role that patients expect them to play in their health care (Worley et al., 2007).
- As the role of pharmacists has expanded in the hospital, the Canadian Society of Hospital Pharmacists (CSHP) strive for at least 50% of patients to recall their pharmacist interactions in the hospital. Recently, Romonko-Slack and Ing (2009) reported 20.9% of patients recalled meeting a pharmacist during their hospital stay. In Horizon Health, a similar study revealed 46.1% of former inpatients were able to recall having met a hospital pharmacist (Doucette et al., 2012).
- Borgsteede et al. (2011) described four factors which should be addressed by pharmacists at hospital discharge: basic information, side effects, alternatives and possible problems. Customized information is needed since some patients preferred to not hear about side effects and others did not wish to see a pharmacist at discharge.
- Clearly, the transition from hospital to home can make medication management complex. MacAulay et al. (2008) found that tailored information from pharmacists in this transition is valued highly.

Data Collection

- From lists of discharged patients from eligible facilities in New Brunswick, 399 subjects were recruited for a phone survey about the CSHP 2015 objective regarding ability to recall interaction with a hospital pharmacist. Phone interviews lasted 10 to 15 minutes and were conducted by pharmacy students.
- The study was approved by Horizon Research Ethics Board and funded by Medbuy Inc.
- Questions asked related to:
 - Recall of interaction with hospital pharmacist during their recent stay;
 - Satisfaction with the interaction (if recalled past interaction), and
 - "What information would you have liked to have received from a pharmacist during your hospital stay?" Verbal, open-ended responses were recorded for analysis.

Content Analysis

- A preliminary set of response categories was established by having two scorers (P.B., O.G.) working together to review responses from a subsample of 10 participants. A second set of 20 responses was scored independently by the two coders using these categories, and inter-rater agreement was calculated. Discrepant ratings were resolved by consensus.
- Inter-rater agreement established for (a) agreement on how many items were present in a participant's response (i.e. segmentation), and (b) agreement on how to categorize each item identified (i.e. content categorization).
- This process was repeated for the entire set of over 700 responses.
- Total agreement rate for segmenting was 92.5%, and total agreement rate for coding items was 85.9%.

Categories

Item	Example	Frequency (%)
INFORMATION ABOUT MEDICATION		
General Information		224 (31.9)
List of Medications	<i>Explaining the basics</i>	105 (14.9)
Purpose	<i>Know why you take it</i>	83 (11.8)
New Medications	<i>Go over new prescriptions</i>	29 (4.1)
OTC / Home Medications	<i>Vitamins and supplements</i>	7 (1.0)
Adherence Information		73 (10.4)
Timing / Dosage	<i>How to take medications</i>	65 (9.2)
Compliance Aids	<i>Bubble packs</i>	8 (1.1)
Medication Dangers		148 (21.1)
Side Effects	<i>Side effects</i>	91 (12.9)
Allergies	<i>Drug allergies</i>	8 (1.1)
Interactions	<i>No conflicts between drugs</i>	49 (6.9)

SELF-DISCLOSURE		
Self-Disclosures		167 (23.7)
Regarding Medications and Lifestyle	<i>Daughter handles all meds; Can't communicate in English</i>	74 (10.5)
Hospital Experience (Non-Pharmacist)	<i>Had to make own bed because nurses wouldn't</i>	22 (3.1)
Positive Pharmacy Experience	<i>Treated very well</i>	45 (6.4)
Negative Pharmacy Experience	<i>Would have liked to meet with a pharmacist</i>	26 (3.7)
Information Source		37 (5.3)
Depend on Nurses/Doctors	<i>Went over everything with nurses</i>	4 (0.6)
Depend on Community Pharmacist	<i>Already familiar with her medications</i>	33 (4.7)

PHARMACY SERVICES		
Services		54 (7.7)
Accurate and Timely Provision of Medications	<i>Want the medications to be right; Delivery of medications</i>	16 (2.3)
Linkage / Costs	<i>Less conflict between home pharmacist and hospital care</i>	19 (2.7)
Continuity of Care during Stay	<i>Would love to see more pharmacy involvement</i>	19 (2.7)

Responses for Age Groups

Age Group, Range in years (n):	18-55 (63)	56-65 (76)	66-75 (85)	76-99 (101)	p	v
INFORMATION ABOUT MEDICATION						
General Information	29	49	47	31	<.001*	.26
Adherence Information	15	14	13	24	.44	.09
Medication Dangers	27	34	35	22	.004*	.20
PHARMACY SERVICES						
Services	12	10	11	11	.52	.08
SELF-DISCLOSURE						
Self-Disclosures	18	32	26	53	.004*	.20
Information Source	8	6	6	16	.20	.12

*x² value significant, p<.05

Note: Analyses done for responses by gender or by hospital type were not statistically significant (results not shown)

Discussion

- Few differences were found in responses analysed by age, gender, or hospital type (teaching versus community). However, as suggested by Borgsteede et al. (2011), given the diversity of responses received tailoring to individuals is advisable to best meet their specific needs.
- Two age groups (56-65, 66-75) were more likely than the two extreme age groups to want to receive general information and advised of potential adverse effects of their medications. The most elderly group was more likely than younger patient groups to self-disclose information about medications or their hospital experience.
- Few patients suggested that they would like information about adherence aids, possible interactions with OTC medications, and help with linkages to community pharmacies. This may be due to patients being unaware that such helpful advice could be provided by the hospital pharmacists.

Conclusions

- Responses from a phone questionnaire of former inpatients revealed their need for information about medications most frequently were in categories of General Information, Potential Adverse Effects, and Self-Disclosures.
- Patients are mainly concerned about receiving a list of their current medications, why they need to take them, and side effects to be aware of. Due to variations in medications used, age groups, diagnoses and perceived need for assistance, the information provided to patients during their stay or at discharge should be individualized to some degree.
- A further study would be useful where patients would receive a guiding list of topics that could be addressed during hospital stay.



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