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COMMUNITY PHARMACY FOUNDATION

COMPLETED GRANT SYNOPSIS

Enhancing Physician Referral and Recommendation of Pharmacist Provided Medication Therapy Management (MTM) Services

Michelle A. Chui, PharmD, PhD

University of Wisconsin – Madison, School of Pharmacy

Objectives

- 1) Explore facilitators and barriers of collaboration and develop strategies to overcome them
- 2) Discover physician and pharmacists projects in which providers have already actively problem-solved and addressed potential challenges and barriers
- 3) Evaluate whether the dyad interviews are an effective way to move pharmacists and physicians towards collaboration

Methods

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Design	 The project was conducted in three stages. The first stage consisted of identifying physicians and pharmacists to form into dyads based on willingness to collaborate and close geographic proximity to the other willing provider The second stage was a semi-structure interview with each member of the dyad. Content analysis of these interviews resulted in a list of issues that might be addressed in the dyad The third stage was a meeting with both the physician and pharmacists, facilitated by the principle investigator in order to promote communication, dispel preconceived ideas, and lay the groundwork for a mutually beneficial trusting working relationship
Study	Physician and Pharmacist identified "wish lists" of projects that are mutually beneficial
endpoints	Evidence that collaborative strategies were employed during the dyad interviews
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Results

- Eight dyads, each with one physician and one pharmacist located in close proximity, were identified and recruiting into the study.
- Individual interviews resulted in a description of each profession currently interacts with the other profession, barriers for increase collaboration, and suggestions for how they might work together more effectively.
- Dyad interviews results in a number of important mutually beneficial projects such as a plan communicate more effectively during urgent times, controlled substance monitoring, medication adherence, inhaler or device instruction, and collaborative practice agreements.

Conclusion

This project provides a clear and simple recipe to stronger collaborative relationships between physicians and pharmacists, by bringing the two into a face-to-face interaction that simulates the types of interactions that physicians and pharmacists have in hospitals and ambulatory clinics. This interaction appeared to dispel assumptions, build trust, and stimulated conversations that would probably have not taken place otherwise. The results of this project may provide pharmacists with the confidence to reach out to their physician colleagues. Small victories with processes such as communication during urgent situations and simple blanket agreements can pave the way for larger more complex collaborations to support medication therapy management, disease management, and patient safety initiatives.