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The Community Pharmacy Healthy Hearts Intervention Project – Experiences of Participant Pharmacists

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Objective: The Healthy Hearts in Pharmacy Project investigated a model of lifestyle modification together with optimised medicine compliance in a population with existing cardiac disease. At the conclusion participant pharmacists were interviewed about their experiences with the project.

Methods: Nine pharmacists from 10 rural and metropolitan pharmacies in Victoria and Tasmania, who took part in this pilot project, were interviewed face-to-face using a semi-structured interview guide. The interviews were transcribed verbatim, and analysed for content and themes using NVivo.

Results: All pharmacists were enthusiastic to be part of the project but recruiting patients was difficult. Rural pharmacists were able to identify and recruit patients easily. All agreed that the two day training was essential but also gave suggestions for further training topics. Many were continuing to use the knowledge gained from this project and one has independently recruited a new cohort. The majority did not have any feedback from local medical practitioners. Despite the time required for this form of pharmacy practice the participants did not think they could charge for this service.

Discussion: Community pharmacists usually do not address primary prevention in a holistic manner. Community pharmacist's views are usually sought by written survey. Interviews enabled them to put forward informed feedback about this successful project and a provided view of the profession not usually seen in the literature.

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What constitutes an effective community pharmacy? – Development of a model of organisational effectiveness through Concept Mapping with multiple stakeholders.

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Objective. Community pharmacy is under pressure to change through health reform. Despite this, there is little understanding of what constitutes an effective community pharmacy. We report a model of organisational effectiveness for community pharmacy generated through multi-stakeholder input.

Methods. A concept mapping project included 14 stakeholders representing; community pharmacy and its professional bodies, general practitioners, Primary Health Organisations, Ministry of Health, District Health Boards and PHARMAC. Three stages included: (a) face to face brainstorming to generate statements describing an effective community pharmacy, (b) statement reduction and approval by participants, (c) sorting of the statements into themes by participants with rating of each statement for importance.

Results. A set of 104 statements were generated, clustered and labelled; safe and effective workflows, contributes to the safe use of medicines, leadership, staff management and financial viability, community focus, integrated within primary care, respected innovator, provides health promotion and preventative care, communicates and advocates. These clusters fit into a quadrant style model setting stakeholder focus against role development. The poles of stakeholder focus are 'internal capacity' and 'external social utility'. The poles of role development include 'traditional safety roles' and 'integration and innovation'.

Discussion. Our model provides a sound basis for the notion that community pharmacy must demonstrate internal efficiency and capacity as well as external social utility. Community pharmacy must have sound internal operational activities whilst generating external stakeholder value. There is a need to focus on innovation; new ways of doing things and integration within the primary care team, in addition to the traditional roles of pharmacy. This is required in order to satisfy policy-makers and other primary care providers. Our paper outlines a model of organisational effectiveness developed through concept mapping which has been effectively used in other healthcare sectors. Application to pharmacy is expected through use in future studies exploring the factors which influence organisational effectiveness within selected community pharmacies.