

Practice Environment Survey Results

Community Practice Environment Initiative

The [Community Practice Environment Initiative](#) is aimed at understanding confirmed and potential barriers to patient safety and professional autonomy in community pharmacy through thoughtful, respectful and meaningful collaboration and engagement with pharmacy stakeholders.

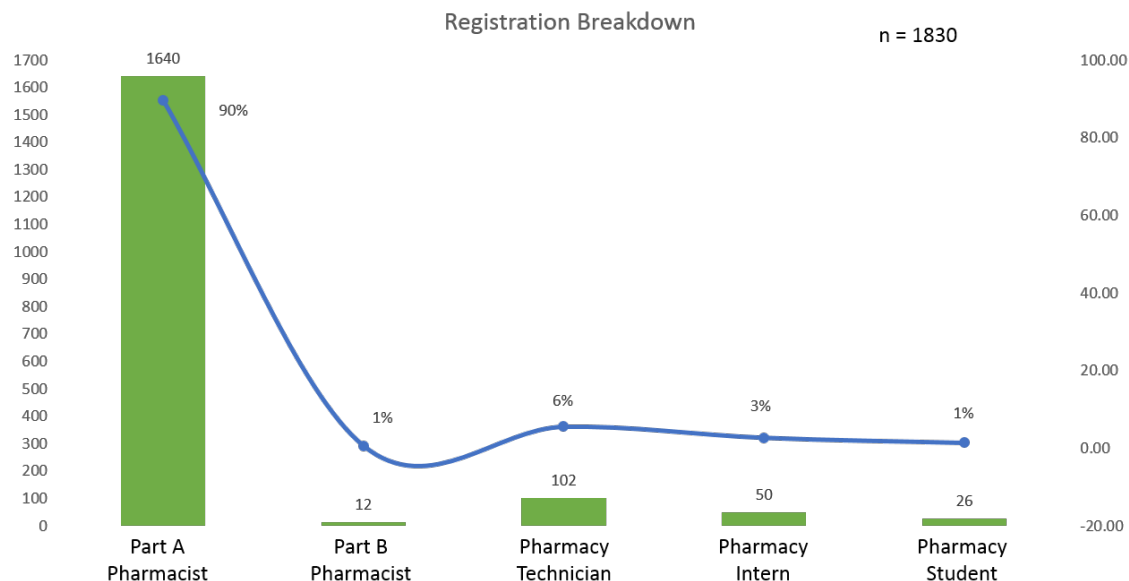
Hearing from pharmacy professionals is an important component of this initiative. Throughout the summer of 2020, the College engaged four focus groups of registrants to explore practice environment related concerns that have been previously expressed through prior engagement activities. A review of the information gathered noted the following:

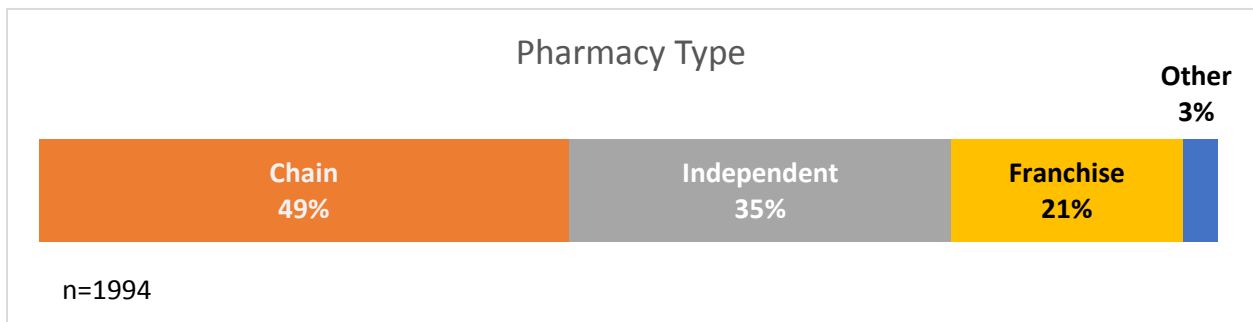
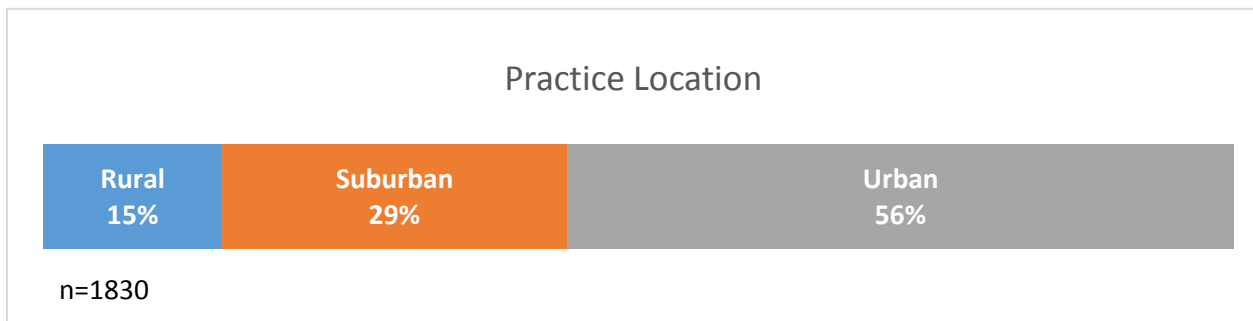
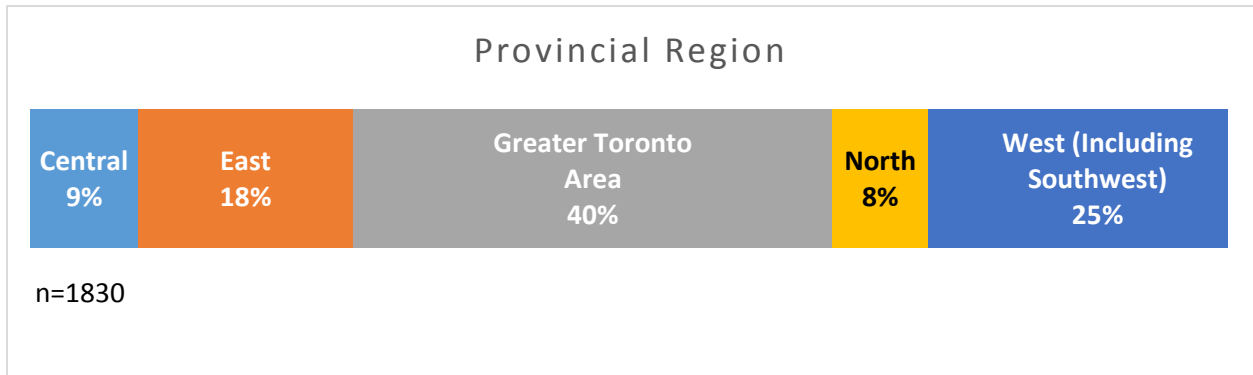
- The day-to-day experience of providing patient care can lead to stress and burnout
- Concerns are being expressed about the ability of community pharmacy professionals to adapt to clinical practice changes, and to provide safe, quality patient care in an increasingly challenging practice environment
- An overall impression that workload and operational demands are having an impact on the ability to meet the standards of practice
- Concerns are being expressed about the risk of medication errors and less time to provide patient-centered pharmacy care

The College launched [a survey](#) to confirm whether these observations resonated with registrants, and asked them to indicate the level of impact specific factors within the practice environment have on their ability to provide safe, quality patient care in the pharmacies where they practice.

Respondent Demographics

After removing duplicates and non-respondents, a total of 1830 submissions were included for analysis. Ninety percent (90%) of respondents indicated they were registered with the College as Part A pharmacists practising primarily in community pharmacy settings. Of the 1640 respondents who were Part A Pharmacists, 34% (561) were Designated Managers and 21% (345) owned a pharmacy in the province.

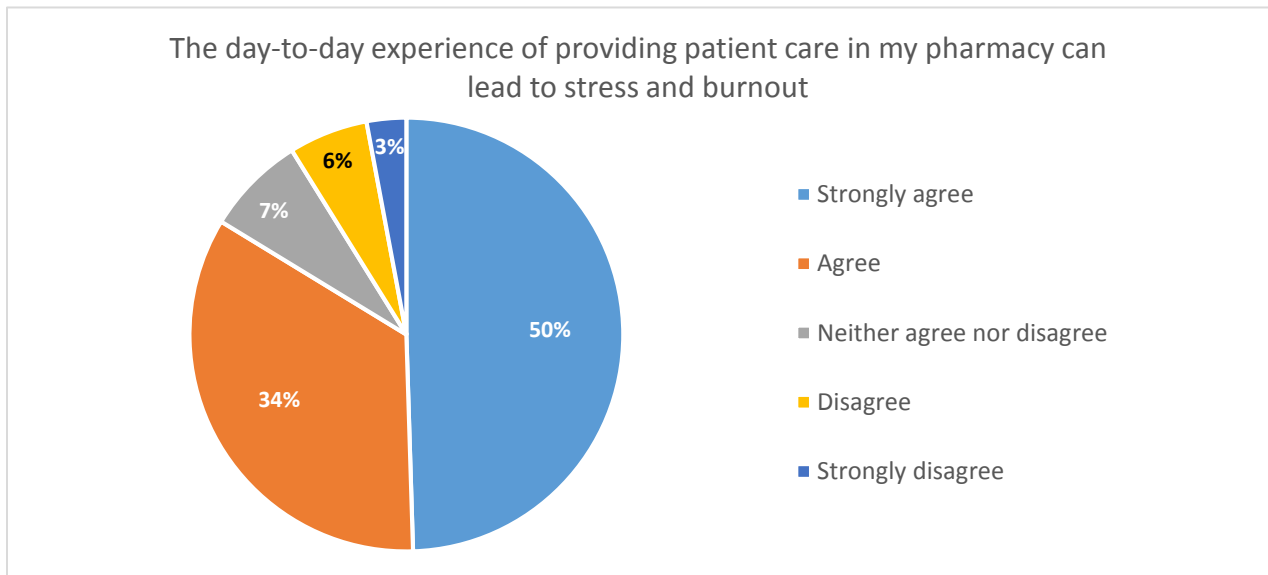
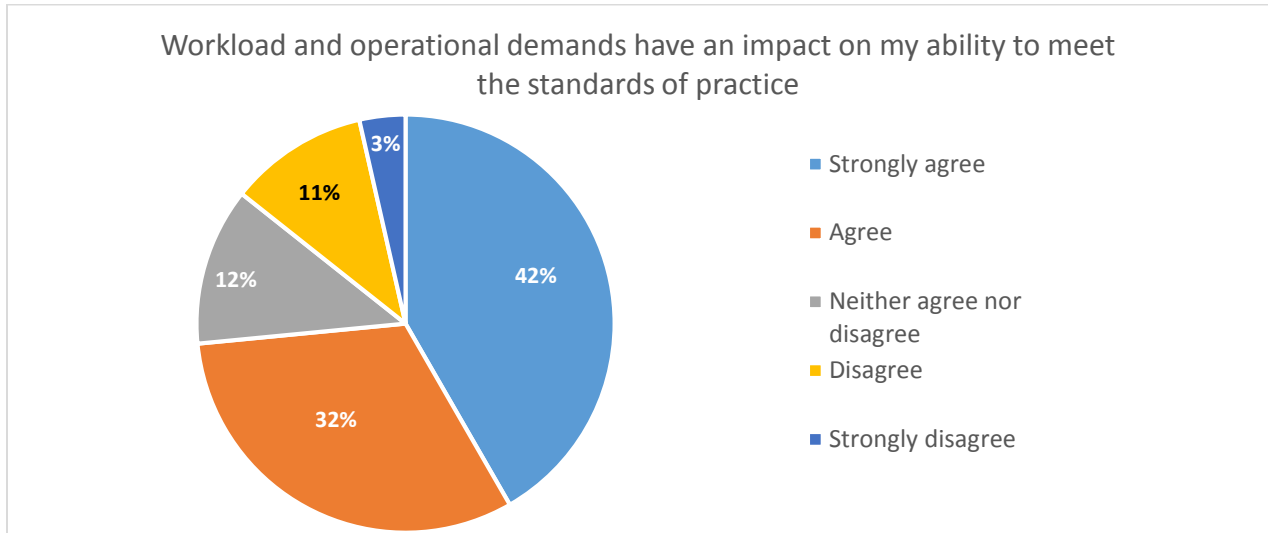




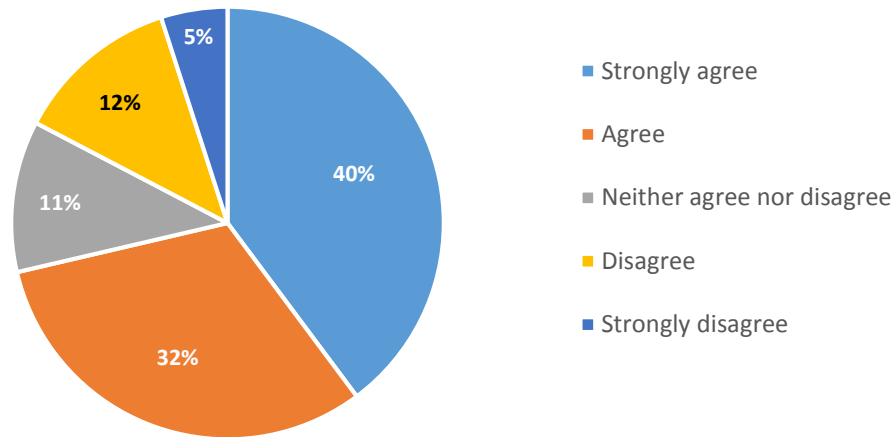
*Some respondents practiced in more than 1 pharmacy type, so the total number is higher than the number of respondents. Other pharmacy types included retail pharmacies in a hospital, remote dispensing locations, and pharmacies specializing in certain drugs (e.g. biologics).

Practice Environment Observations

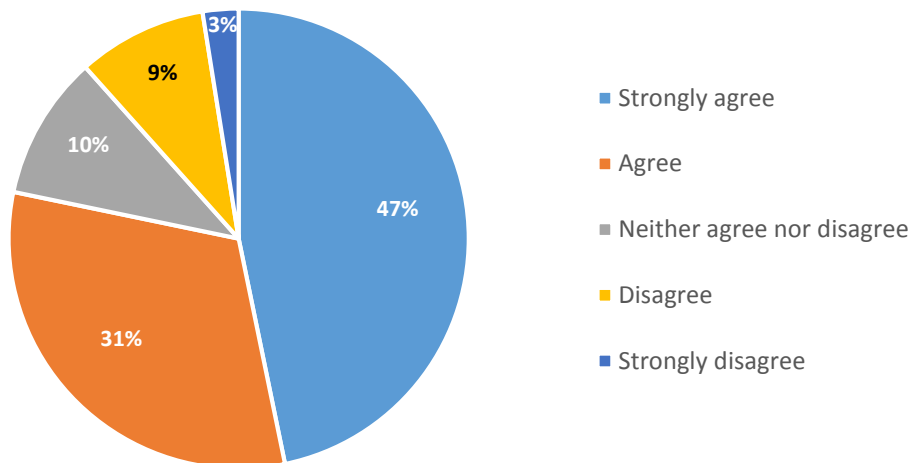
Registrants were asked to reflect on their experience in community pharmacy and indicate their level of agreement or disagreement with six observations that had been made from previous engagement activities.



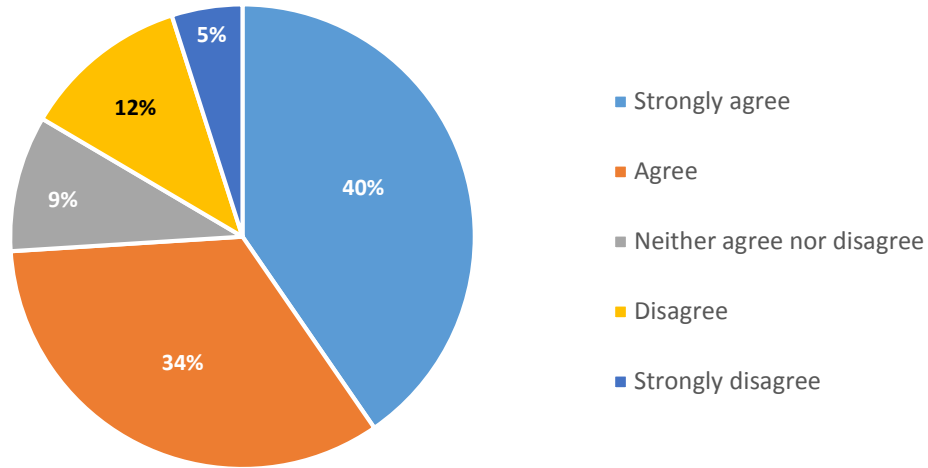
I am concerned about my ability to adapt to clinical practice changes



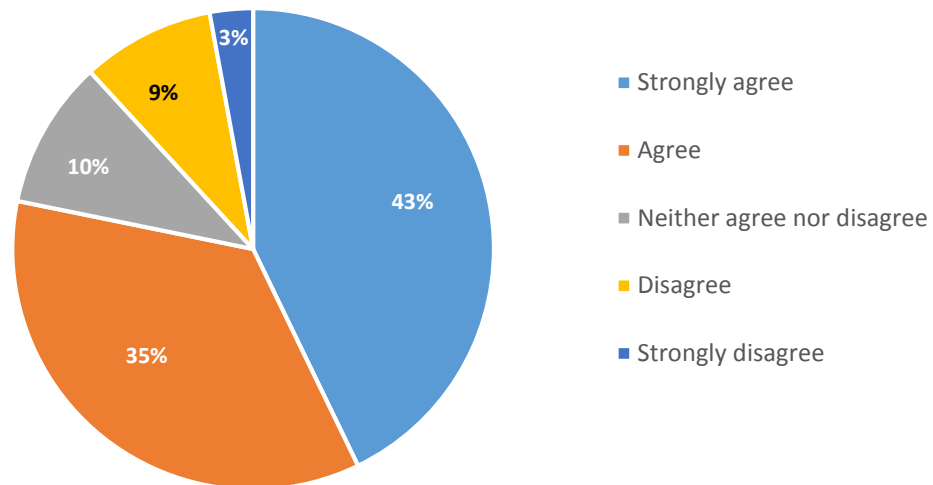
I have less time than I need to provide patient-centered pharmacy care



I am concerned about my ability to provide safe, quality patient care at all times in an increasingly challenging practice environment



I am concerned about the risk of medication errors while practicing in an increasingly challenging practice environment



Impact Scores

Specific statements have been made throughout registrant engagement activities about contributing factors that affect the practice environment and the ability of community pharmacy professionals to provide the level of patient care that is required according to the [Standards of Practice](#). Respondents reviewed 26 statements and indicated the level of impact each has on their ability to provide safe, quality care at all times using a 3-point scale.

- 0 – No negative impact on my ability to provide safe, quality care at all times
- 1 – Some/Infrequent negative impact on my ability to provide safe, quality care at all times
- 2 – High/Regular negative impact on my ability to provide safe, quality care at all times

Mean scores were calculated, with each statement having an impact score ranging between 0-2. These are presented as impact scores, and the higher the number in the scale, the greater the impact on the pharmacy professional's ability to practice to standard.

Rank	Statement	Impact Score
1	Members of the public do not know what pharmacy professionals do behind the counter	1.56
2	Patients expect a level of customer service that includes being immediately available to respond to questions, provide information, or perform a service	1.54
3	Patients expect to receive their medications shortly after the prescription is received by the pharmacy	1.52
4	Feeling an obligation to manage the workload over personal biological needs (e.g. eating, hydrating, using the washroom)	1.47
5	Feeling an obligation to the patient over personal biological needs (e.g. eating, hydrating, using the washroom)	1.43
6	Inability to reach other healthcare professionals for continuity of care purposes	1.42
7	No consistent access to information in a patient's medical record beyond the pharmacy's patient profile	1.40
8	Public perception that pharmacy professionals are only medication dispensers	1.37
9	Sub-optimal staffing levels that do not enable pharmacy team members to practice to their full scope	1.36
10	Insufficient time available for pharmacists to provide optimal patient care	1.31
11	Workflow that is solely optimized for dispensing medications (rather than to include the provision of patient care services alongside dispensing medications)	1.30
12	Pressure to meet operational performance targets that do not clearly support the provision of appropriate patient care based on individual patient needs	1.29
13	Increasing need to focus on efficiency in pharmacy service delivery	1.29
14	Not feeling supported to take breaks to eat/use washroom	1.28
15	No ability to add clinical information to a patient's medical record beyond the pharmacy's patient profile	1.25
16	Public perception that pharmacists are outside of their health care team	1.23
17	Adapting to public health measures that require physical barriers and physical distance to be maintained	1.08

Rank	Statement	Impact Score
18	Pharmacy team members not practising to their full scope (based on their professional competence and with consideration to the services provided by your pharmacy)	1.04
19	Allocating resources to hire Pharmacy Assistants rather than Registered Pharmacy Technicians	1.03
20	Maintaining privacy while conducting patient assessments at the counter	0.96
21	Not integrating appropriate technology into the workflow	0.91
22	The time it takes to use technology for continuous quality improvement	0.89
23	Managing resistance from other health professionals when asking for patient information	0.86
24	Transitioning to new technology	0.83
25	No access to a private counselling room	0.62
26	Ability to provide patients with the option to use a private counselling room for assessments, questions, or when providing clinical pharmacy services	0.61

Best Practices

The College and the Community Practice Environment Advisory Group asked for registrants to provide best practices related to optimizing professionalism and positive patient outcomes, and 445 responses were received. The majority of the responses were further comment about practice environment challenges. Below is a summary of the best practices registrants provided.

- Establish relationships with local physicians/nurse practitioners
- Seek and remove barriers to collaborative practice approaches
- Physical space that is conducive to workflow
- Try to establish long-term professional relationship with patients
- Separate professional services from dispensing services, with pharmacist overlap to cover both.
- Have enough staff for the patient volume, and clear roles amongst the pharmacy team
- Triage prescriptions, implement 24hr refill policy (permit exceptions)
- Utilize ePrescribing
- Normalize breaks/closing for lunch
- Use pharmacy technicians to full scope
- Access to clinical information through a clinical viewer or integrated records system
- Establish boundaries with patients when they push or attempt to rush pharmacy staff
- Support from management to care for patients first, knowing this may slow workflow, helps to meet the Standards of Practice