

Understanding patient experiences of pharmacist-led comprehensive medication assessments

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BACKGROUND

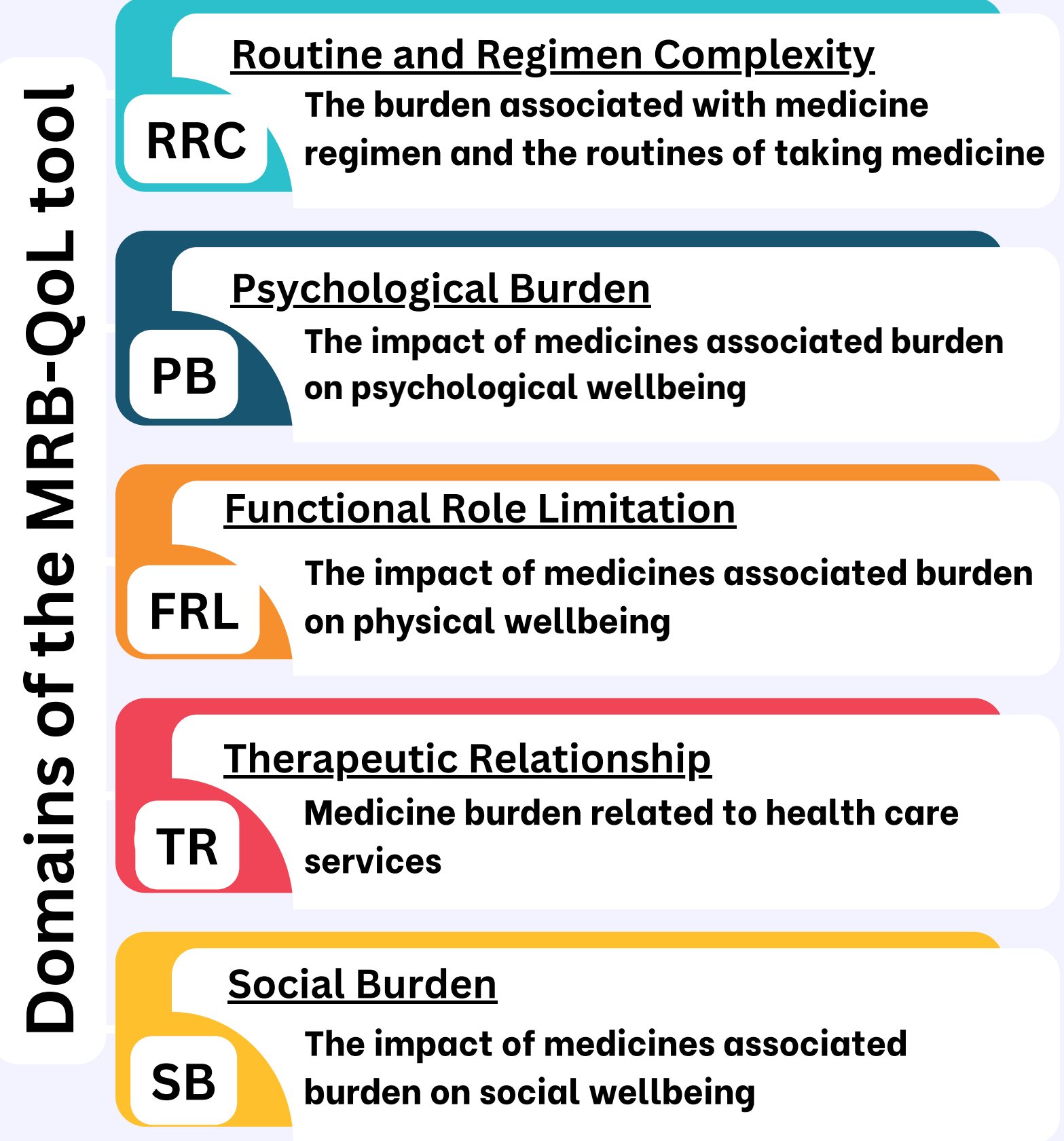
The Medication Therapy Services Clinic is a pharmacist-run clinic operated by the School of Pharmacy at Memorial University. Patients receive in-depth comprehensive medication assessments (CMA) to identify issues and optimize therapy; recommendations are sent to primary care providers and specialists. Between 2021 - 2023, we conducted a quantitative evaluation of CMAs performed at the MTS Clinic using the Medication Related Burden Quality of Life (MRB-QoL) questionnaire. The MRB-QoL is a validated tool used to measure the burden of medicine on functioning and well-being from the patient perspective.

PURPOSE

To assess the extent to which the MRB-QoL adequately reflected patient experiences with CMAs at the MTS Clinic.

METHODS

- Patients seen for CMA between Feb and April 2024 invited to participate in a semi-structured interview about their experience
- Eight interviews (four telephone, four in-person) conducted by a pharmacy student and the research coordinator
- Interviews recorded and transcribed, then manually analyzed by two pharmacy students
- Deductive content analysis used to identify codes related to the domains of the MRB-QoL questionnaire
- Codes combined into themes by the research coordinator

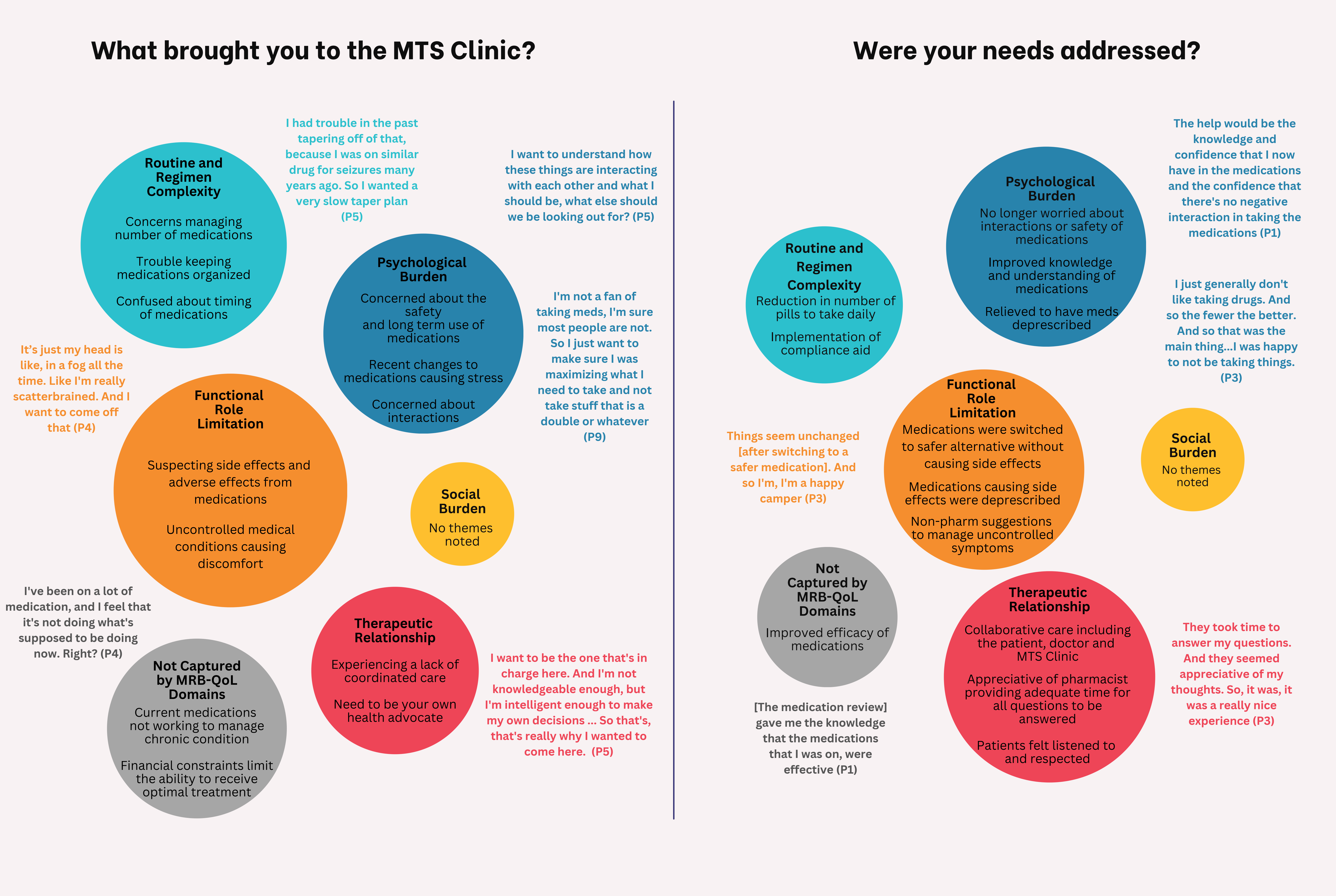


RESULTS

Participants: Interview participants (n=8) were representative of the overall clinic population. Median age was 70.5 years, five were female and five were urban dwelling. Five were self-referred and three were referred by their GP.

Reasons for Visit: Patients came to the MTS Clinic for reasons that aligned strongly with the domains of PB, FRL and RRC. Some additional concerns were noted in TR and themes that did not align with the MRB-QoL domains were identified.

Post-visit: After their CMA, patients expressed improvement in PB and FRL that aligned with reasons they initially came. Additional benefit was expressed in FRL and TR for reasons not expressed initially as a concern. Both positive and neutral overall change was reported.



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CONCLUSION

The MRB-QoL questionnaire provides a fair representation of most concerns expressed by patients. However, it does not completely capture all concerns or areas addressed through CMA. This suggests our quantitative evaluation may underrepresent the value ascribed to the services received by patients.

These qualitative findings complement our previously reported qualitative findings and help us better understand the needs and experiences of those who receive CMA through the MTS Clinic.