

fokus°PDCA: Development of an implementation tool for professional pharmacy services

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Background The importance of community pharmacists in the provision of primary health care is constantly growing and involves more than dispensing medications. Professional pharmacy services are to become a crucial new cornerstone of modern community pharmacies. In recent years, many professional pharmacy services have been developed, piloted, and implemented, but few were implemented sustainably.

Purpose To develop and pilot-test an implementation tool for professional pharmacy services based on the Deming Cycle (PDCA-Cycle) and the six stages of the Framework for the Implementation of Services in Pharmacy (FISpH).

Method We conducted a literature search to find variations of the Deming Cycle. They were evaluated according to four previously defined criteria to determine the variation most suitable to become the core structure of an implementation tool. The selected variation was adapted according to the six stages of the FISpH and compared with the activities of the FISpH for comprehensiveness. The resulting implementation tool was evaluated for usability and comprehensibility by Pharmacy Master Students in March 2020 in a theoretical scenario of vaccination. Answers were given with a four-point Likert scale, with a maximum of 4 denoting best attribute. The final version of the tool was evaluated for acceptability, feasibility, and appropriateness by community pharmacists with the same scenario.

Findings We found five variations of the Deming Cycle in literature. The most suitable variation was adapted and resulted in a two-steps implementation tool that we named fokus°PDCA. Our tool covers all 31 activities of the FISpH either explicitly (n = 14) or implicitly (n = 17) and is a four-page working sheet consisting of nine sections. The fokus part is filled in once at the start of the implementation. The PDCA part is filled in after each completed cycle. Usability and comprehensibility were rated with an overall score of 3.7 (± 0.2 ; n = 14). Acceptability was graded with 3.6 (± 0.4 ; n = 14), feasibility with 3.4 (± 0.3 ; n = 14), and appropriateness with 3.6 (± 0.3 ; n = 14).

Conclusion We successfully developed a two-steps implementation tool for professional pharmacy services, the fokus°PDCA. First evaluations indicate good usability, comprehensibility, acceptability, feasibility, and appropriateness. In the next step, the fokus°PDCA will be used to implement a professional pharmacy service targeting medication non-adherence in Switzerland.