

D-1460 Validation and adaptation of The PCNE Classification V 6.2 for use in Slovenian community pharmacies

Background: There is no validated DRP classification available in Slovenian language or formally used in practice.

Purpose: To translate and validate The PCNE Classification V 6.2 for use in Slovenian community pharmacies.

Methods: Firstly, The PCNE classification v 6.2 was translated into the Slovenian language by a forward-backward procedure. The Slovenian version was then discussed in an expert panel of 9 community and hospital pharmacists and two researchers. A consensus was reached in the expert panel to adapt the classification. The adapted version was piloted and validated (VS1) by 31 community pharmacists based on the PCNE set of 20 scenarios. Problems, causes and interventions were coded. The coding inconsistencies were discussed by the expert panel. A consensus was reached on the final version of the classification. The adapted version was used in a validation study (VS2), where 33 community pharmacists allocated in two groups coded two sets of 20 DRP cases (all together 40 DRP cases) which were gathered during routine pharmacy practice in Slovenia. Coding inconsistencies were analyzed and the perceived difficulties with the classification were discussed in the expert panel. A final adapted version of the DRP classification was formed.

Findings: In VS1 the average coding consistency was 74% ($\pm 16\%$) for Problems, 75% ($\pm 20\%$) for Causes and 92% ($\pm 11\%$) for Interventions. In VS2 the average coding consistency was 83% ($\pm 16\%$) for Problems, 85% ($\pm 17\%$) for Causes and 80% ($\pm 20\%$) for Interventions. The following major adaptations of the classification were performed: - A "potential problem" was added as a primary domain to The Problem section. Namely, potential problems are predicted by risk factors. - The Causes section was renamed to Risk factors. The causality between exposure (risk factors) and problems is only predicted. - The primary domains in The Risk factors section were organized into prescribing, dispensing and use of drugs. This layout aids to the clarity. - Use of drugs was organized into intentional and unintentional use of drugs which emphasizes the difference in behavior of patients and subsequent interventions of pharmacist. - The primary domains in The Interventions section were divided according to the communication and agreement with the prescriber. Despite high consistency in the coding for interventions the expert panel believed that the Intervention section content depends on the actual services run in practice.

Conclusion: The results of the validation procedure offer a possibility to get an additional insight into the performance of the existing classification and possibilities for their optimisation.

Location of Primary Work: Slovenia

