

Workshop 3:

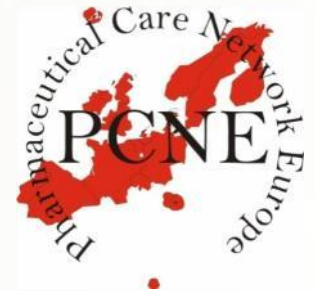
Implementation strategies and their indicators.

From research to practice

Facilitators:

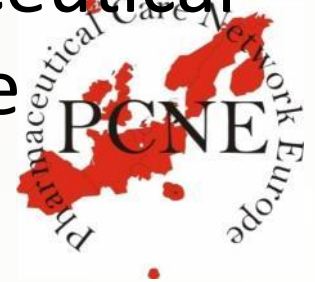
Alison Roberts, Australia

Charlotte Rossing, Denmark



Aims of the workshop

- To explore the **various strategies used for implementing pharmaceutical care** services, gaining an understanding of those that increase the chances of sustainable change
- To **design indicators that can be applied in practice and used in research**, to measure the successful implementation of pharmaceutical care services and collaborative practice



Workshop activities

WEDNESDAY – Getting started

Meeting each other

Workshop goals

Short lecture on pharmaceutical care service implementation (Alison Roberts)

Sharing experiences – good and bad – about implementation

THURSDAY – Designing Implementation strategies

Short lecture on implementation science models and measures (Joanna Moullin)

Working in small groups to design implementation strategies at the systems level and pharmacy level

Short lecture on working with indicators at a pharmacy (Dick Tromp)

FRIDAY– Developing indicators of implementation

Short lecture on working with indicators at the systems level (Martin Henman)

Working in small groups to develop indicators for use at the systems level and pharmacy level

Sharing knowledge



Participant goals

Find solutions for the lack of implementation

Validating implementation

Driving patient demand

How to keep pharmacists focused and sustain PC

Controlling and managing change

Driving demand from doctors

Payment or reimbursement for PC already implemented

Scientific and rational approach - from patient perspective

Different strategies for different settings

Bridge from facilitators to indicators to reality for pharmacists

Focus on collaboration no more working in isolation

Addressing barriers to implementation

Strategy and measures to go across settings and countries

Finding indicators for drivers or motivators

Monitoring the quality of PC service

Identifying funding systems and collaborators

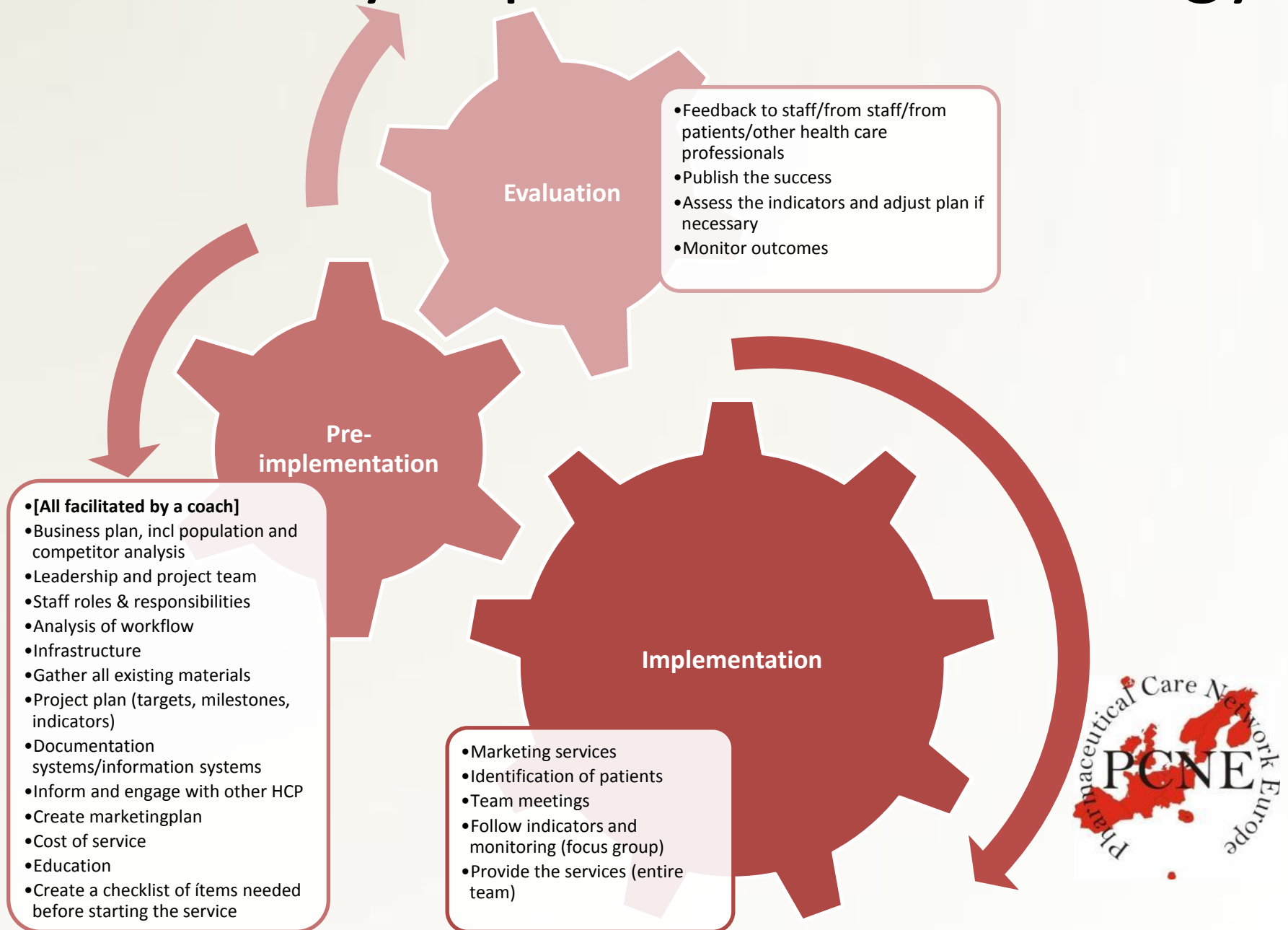
Indicators for change



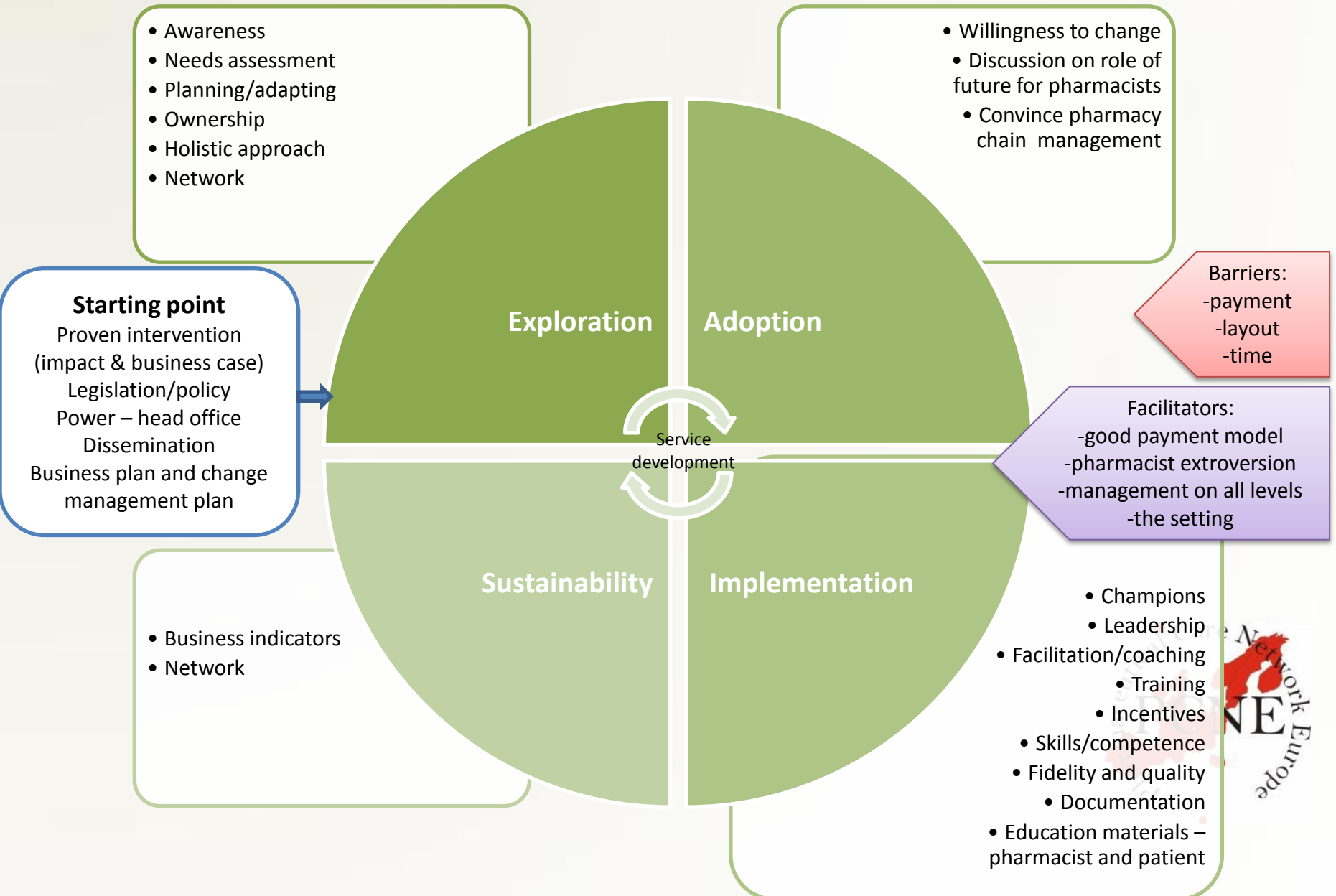
Collaboration in action



Pharmacy implementation strategy



System-level implementation strategy



Pharmacy-level indicators

Structure

- Policies
- Documentation (IT system, person assigned to do this task)
- Space/infrastructure
- Number of pharmacists
- Competence of pharmacists
- Staff changes
- Level of education of the staff
 - No. Of educational programs completed
 - Results of exams

Process

- No. Of pharmacists providing the service
- Service time
- Marketing effectiveness
- Cost
 - Education
 - Infrastructure
 - Personnel
 - Material
- No. Of meetings with other health care workers
- Type of health care worker attending meetings
- Frequency of meetings with OHW
- Goals to be reached by staff for incentives

Outcome

- No. Of patient requests for the service
- No. Of services provided
- No. Of prescriptions
- Amount of direct payments
- Staff satisfaction
- Health related outcomes
 - BP, adherence, hospital stays, GP visits
- No. of referrals
- Publications submitted
- Patient satisfaction
- No. of patients refusing and accepting service
- Total profit

System-level indicators

Structure

- Exploration phase
 - System/political support
 - Business plan at system level
 - Business plans in place at pharmacies
 - Change management plans in place at pharmacies
 - Suitable layout/infrastructure
 - Manager responsible, ensuring services delivered appropriately
 - Organisational capacity

Process

- Dissemination of information provided with feedback
- Feasibility assessment
- Using facilitators/coaches
- Champions identified and used
- Quality of services/interventions (by sampling patients who have received services)
- Mystery shoppers to check fidelity
- Using business plans effectively – checking milestones and updating targets
- Quality of completion of documentation
- Check CPD records
- Reporting indicators to head office on a regular basis
- Sticking to organisational routines
- Quality of service assessed on a regular basis (using IT-enabled continuous monitoring by patients)

Outcome

- No. of pharmacists aware of the service
- No. of pharmacists (decision maker) interested in providing the service
- No. of people eligible for the service (within subgroups)
- No. of pharmacists and pharmacies enrolled to deliver the service
- No. of patients enrolled
- No. of services delivered
- Right patients receiving services
- Health benefits
 - Quality outcomes framework
 - ECHO – measure at pharmacy level and then aggregate at system level
- Benchmarking against other pharmacies

Readings and references

- Slide presentations:
 - J Moullin
 - A Roberts
 - D Tromp
- Papers/guidelines
 - Kaae et al. *Sustained delivery of cognitive services*
 - EDQM Policies and practices
 - Rabin et al. *Glossary for dissemination and implementation research in health*
 - Trap et al. *A new indicator based tool for assessing and reporting on good pharmacy practice*

