Advancing the utility of community pharmacy quality measures

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Objectives
1) Examine consumers’ interpretation of pharmacy quality measures data.
2) Determine if pharmacy quality measures influence consumers’ choice of community pharmacy.
3) Identify and evaluate consumers’ perceived value of pharmacy quality measures.
4) Determine the characteristics of people who can interpret, use and value community pharmacy indicators.

Methods

Design
- The project design was semi-structured focus groups combined with the use of survey methodology.
- Adults diagnosed with a chronic illness, currently using a community pharmacy to fill prescriptions, and currently taking a prescription medication were included in the study.

Study endpoints
- Description of consumer’s interpretation of pharmacy quality measures data
- Description of how pharmacy quality measures data may influence consumer pharmacy choice
- An examination of consumer perceived value of pharmacy quality measures.

Results
- Overall, there were 34 patients in this study. The participants’ mean age was 62.85 (SD=16.05), number of pharmacies used was 1.44 (SD=0.71), number of daily medications was 4.18 (SD=3.53), and number of chronic illness was 3.09 (SD=2.09). Most participants were female (n=26, 76.5%) and white (n=31, 91.2%).
- Patient understanding and interpretation of pharmacy quality measures differed by the type of measure. The meaning of measures such as Helping Patients Get Needed Medications, Use of High Risk Medications in the Elderly, and Drug-Drug Interactions was understood while the meaning of measures such as Diabetes Medication Dosing, Suboptimal Treatment of Hypertension in Patients with Diabetes, and Absence of Controller Therapy for persons with Asthma was not clear.
- When patients were presented with different type of mock report cards, patients understood the Medicare star rating format better than the use of a bar graph system which was confusing and difficult to understand. Overall, most patients liked the star system more than the percentages, grade letter or numerical ways of rating. In the rural area, some patients did not care what grade system was used as long as the criteria was understood and the measures were clear.
- Patients’ opinion on whether they would use quality information to choose a pharmacy seemed to differ by the geographical location. In the urban area, most patients agreed that they would consider using pharmacy quality measures to choose their community pharmacies, whereas in the rural area, most patients agreed that they would not/ were not sure of whether they would use the quality information in their pharmacy decision making since they had limited pharmacy options, had personal relationships with pharmacy owners, and would not drive to another town to fill their prescriptions.
- In general, most patients thought all the measures were important. However, some patients seemed to value certain measures highly than others depending on whether they had the chronic condition or not.
- Most patients agreed that they would use the measures to choose their pharmacy. When patients were asked if they would use each specific measure to choose their pharmacy, majority agreed that they would use select measures. Lower percentages of participants indicating a likelihood of using the measure were found for Absence of Controller Therapy for Persons with Asthma (Yes responses, n=19, 55.9%) and Suboptimal Treatment of Hypertension in Patients with Diabetes (Yes responses, n=22, 64.7%).
• All patients agreed that they would use Drug-Drug interactions as a measure in evaluating whether to switch their pharmacy but a large number of patients would not use Suboptimal Treatment of Hypertension in Patients with Diabetes nor Asthma Controller Therapy for Persons with Asthma.
• There was no association between patient demographic and clinical characteristics and their interpretation of community pharmacy quality measures, use of the measures in their decision making of a pharmacy and the perceived value of the measures.

**Conclusion**

This study showed that patients with chronic illnesses are interested in community pharmacy quality measures but need simple easy to understand formats with visual ways of displaying the ratings. Community pharmacy quality measures, when publicly available may influence patients’ choice of community pharmacies and their likelihood of switching their pharmacies, depending on individual preferences, patient geographical location and the availability of pharmacies in the area. The results of this project showed that patients value all pharmacy quality measures but perceive medication safety measures to be more important than others.

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