

PRACTISE Survey-PhaRmAcist-led CogniTive Services in Europe: First results

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Background In Europe, a change from product to services centred community pharmacy practice was reported, with a large variance in dissemination of different community pharmacy services. Cognitive services such as medication review (MR) emerged as an important topic and recently the official PCNE definition of MR was released. The aims are to map the remuneration models of different pharmacist-led cognitive services in primary care across Europe, with a special focus on MR and to update a survey by Bulajeva et al. (2014).

Purpose The project was initiated at the PCNE working symposium in Hillerød (2016) by an international project team of PCNE members from Portugal, Slovenia and Switzerland. This project team is supported by further PCNE members from The Netherlands, Denmark, Finland, and Belgium.

Method The study has a cross-sectional design with an online-survey covering two topics: Part A about 21 different pharmacist-led cognitive services (44 items) and Part B about the different types of MR (63 items). For the survey the online tool Findmind© was used. To collect representative data of the current situation in Europe, at least three participants per country/region with special background (community pharmacy, policy maker, and research) and with insight in community pharmacy practise are desired. Therefore, mainly members of PCNE and ESCP are invited. A key representative is approached for each country known to the project team who is invited to suggest two further participants from their country to fulfil the perspectives from all three backgrounds.

Findings On 3rd November 2016, key representatives from 26 different European countries were invited with a personalised link to the survey. After 14 days, 5 persons (5/26, 19.23%) had completed the survey and 2 (2/26, 7.69%) had started. Further 2 persons (2/26, 7.69%) suggested a substitute for their country, because they declared not to be qualified to answer the survey. Four weeks after the release, at the time of submission of this abstract, 10 (10/26, 38.46%) key representatives completed the survey. 5 of them (50%) had a background in research and 5 (50%) in community pharmacy. Furthermore, 5 persons had started, but had not yet completed the survey. The initially invited key representatives suggested further 25 representatives which were invited in the meantime.

Conclusion At the time of abstract submission, a satisfying response rate was achieved proving feasibility of the survey. We are looking forward to present first results from the two parts of the survey during the PCNE working conference 2017.