

Evolution Through **Revolution**



Saskatchewan College of Pharmacists

Final Research Results

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Executive Summary

Six focus groups were conducted in March 2006, one in each of North Battleford and Prince Albert, and two in each of Saskatoon and Regina. Participants were recruited from adults in the regions selected. For the most part, the six focus groups showed a consistent set of public attitudes across the province, and between rural and urban regions.

The findings from these focus groups were used to develop a telephone survey that was approved by the College and which was administered to randomly selected members of the public in Saskatchewan. This report integrates the findings of the focus groups and the quantitative findings from the telephone survey. The survey results are aligned with the focus group findings.

The six focus groups showed a fairly consistent set of public attitudes across the province, and between rural and urban regions. The main area of differentiation was with respect to the receptivity to the concept of pharmacist practitioners. There appears to be more resistance to this in Regina, and a general acceptance and/or support in Saskatoon and the smaller communities that were visited.

The public wants pharmacists to be up-to-date and knowledgeable about drugs, their side effects and interactions. Both the focus group and the survey showed that the expertise and the courtesy/friendliness of the pharmacist are the top factors when selecting a pharmacy, and the survey shows these two factors to be equally important.

The public knows that pharmacists are regulated, but they generally don't know who does this or how it is done, as shown by both the focus groups and the telephone survey.

In general, the public does not seem to understand what primary health care is, and they currently see the pharmacist's role on this team as the person who dispenses medication according to the directions of a physician and who gives advice on medication.

There is a strong perception among the public that pharmacists only know about medication, and do not have the knowledge base or qualifications to diagnose. Doctors were placed on a platform by participants in the focus groups, somehow being the all-knowing, all-seeing directors of health care, and the pharmacists and other health care professionals being there to follow their lead.

Despite focus groups participants noting evidence to the contrary (ex: doctors looking up details about drugs vs. pharmacists knowing it), they saw physicians as being equally or more knowledgeable about drugs and medication, which matches the survey results.

While the focus groups were neutral or negative toward the concept of specialist pharmacists, the survey showed support for this concept. The public also supports the use of trained technicians, under the supervision of a pharmacist.

The public appears neutral to mildly supportive of the use of incentives such as reward programs or reduced dispensing fees. These are simply seen as ways of doing business in a competitive market. Reward programs, in particular, have little weight in the selection of a pharmacy. They are seen more as a bonus once the choice has been made, and having one has little to no impact on their perception of the pharmacist.

Whether a pharmacy sells tobacco or not has little impact on whether or not most participants use a particular pharmacy, and it has no bearing on their opinion of the pharmacist in that store. Most participants would support or be neutral to banning the sale of tobacco in small pharmacies. There were few participants in the focus groups who advocated for this, but most said that it's probably appropriate given the pharmacy's focus on health and they would support it if it happened. The survey showed relatively equal levels of support for this for both small pharmacies and large stores with pharmacies.

Information shared with pharmacists is seen to be as confidential as that shared with physicians. Interestingly, the public also would like any drug store to be able to access their records so that their prescription can be filled anywhere. Related to this, focus group participant and survey respondents both felt that pharmacists should take an active role in preventing the abuse and misuse of drugs.

In the focus groups there was strong support for having the *option* of a private alcove or counseling room where the patient could speak confidentially with the pharmacist for sensitive issues. The survey showed only mild support for this.

Table of Contents

<i>Executive Summary</i>	<i>i</i>
<i>Table of Contents</i>	<i>iii</i>
<i>Methodology</i>	<i>1</i>
Focus Groups	1
Telephone Survey	3
<i>Results and Discussion</i>	<i>4</i>
Perception of Pharmacists	4
Duties of a Pharmacist	4
Role of Technicians	6
Proper Use of Medication	6
Qualifications of a Pharmacist	7
Drug Therapy Experts	7
Perception of Nurse Practitioners	8
Perception of Pharmacist Practitioners	9
Specialist Pharmacists	11
Pharmacist Role in Primary Health Care	11
Factors Influencing Choice of Pharmacy	12
Loyalty Programs	13
Tobacco Sales	14
Confidentiality Expectations	15
<i>Conclusion</i>	<i>17</i>
<i>Exhibit A – Focus Group Questionnaire</i>	<i>19</i>
<i>Exhibit B – Telephone Survey</i>	<i>20</i>
<i>Exhibit C – Survey Results</i>	<i>22</i>
Part 1	22
Part 2	24
Part 3	25
Part 4	42
Part 5	43

Methodology

The primary objective of this research project was to understand the opinions and expectations of the general public in Saskatchewan for strategic planning. Other goals were to identify the public's perceptions of pharmacists, their competencies and their role as well as to explore opinions about additions to this role.

Focus Groups

To better understand the issues of concern to the public, focus groups were used to gather preliminary information. While providing very in-depth information, the focus group technique is not empirically sound since it does not use large random samples as part of the research process. This information was used to develop a telephone survey to a larger representative sample from across the province in the second phase of research. Focus groups allow a better understanding of how individuals develop opinions, and what factors contribute to these opinions, resulting in valuable qualitative information for the strategic planning process.

Names were selected from phone listings in four locations (North Battleford, Saskatoon, Prince Albert and Regina) using a systematic random sampling technique. Six focus groups were conducted in March, 2006, one in each of North Battleford and Prince Albert, and two in each of Saskatoon and Regina.

Participants for the focus groups were recruited during the week before the actual focus group was run. Those who agreed to participate were then phoned the day before their group to confirm their attendance. The recruitment and attendance at the focus groups is detailed as follows:

Focus Group	Participants Scheduled	Participants Confirmed	Participants Attending
North Battleford	10	10	2
Saskatoon (1)	8	7	4
Saskatoon (2)	9	7	3
Prince Albert	11	11	8
Regina (1)	12	12	8
Regina (2)	12	11	10
Total	62	58	35

These focus groups provided a fairly consistent illustration of the mind-set of the public. There was little variation in the opinions from group to group for the first four groups. The first Regina focus group was quite different with respect to opinions on pharmacist practitioners from all the other groups, although the second Regina group was closer to the findings from the other four focus groups.

This is the reason that a minimum of two focus groups are done in a particular area – to ensure that a single focus group, such as Regina (1), which may be a statistical outlier, or an anomaly, is not assumed to represent the entire population. While the responses of participants from Regina

are somewhat different from those in Saskatoon and in smaller centers, the second focus group in Regina suggests that residents of Regina may not be as polarized on some issues, such as Pharmacist Practitioners for example (compared to the other regions), as Regina (1) would suggest.

Only two participants showed up for the North Battleford focus group, and a total of seven participants for the two Saskatoon focus groups (the latter due to a miscommunication by the hotel staff to participants). However, the results of these focus groups were congruent with each other and with the Prince Albert focus group, so no additional research was conducted.

Participants were told that the meeting was to obtain their input on issues relating to pharmacists and pharmacies and were not told who Chrysalis' client was until the end of the session.

Attendees consented to complete an anonymous survey at the beginning of the focus groups which provided a breakdown on the issues of greatest concern to the respondent, the perception of pharmacists, and the role of pharmacists, and which captured their unaided responses to a number of questions discussed during the meeting.

The approach for each group was to identify the immediate perceptions of pharmacists and their duties. These perceptions were used as a basis to launch a discussion on the role of pharmacists, the expected competencies for pharmacists, and the public's expectations of pharmacists. Next, participants used their responses to the initial survey to launch a general discussion of the qualifications required to be a pharmacist.

At an appropriate point during this preceding discussion, attendees were asked to identify whether pharmacists or physicians were the drug therapy experts, and to give their reasons for their choice. They were also asked who among physicians, nurses and pharmacists could write or modify prescriptions. If they did not bring it up, they were asked their opinion on nurse practitioners and pharmacist practitioners.

Participants were also asked their opinions about confidentiality. Specifically, they were asked whether they felt that their information was more confidential with a pharmacist than a physician, equally confidential, or less confidential. They were also asked what their expectations were regarding drug stores sharing confidential information.

Next, participants were asked what factors influenced their choice of pharmacy. If they were not raised, the issues of loyalty programs and tobacco sales were brought up and discussed in greater depth to identify their impact in the purchase decision and on the public's opinion of the pharmacist.

As each issue was brought up it was opened to general discussion until all areas of concern for all those attending had been addressed. This is the general nature of the flow of the focus group. The actual discussion in each group varied slightly due to the diversity of the participants involved.

Telephone Survey

The information gathered from the focus groups was used to develop a telephone survey which was used to obtain further quantitative data from a broader representative proportion of the public. This survey was approved by the College and was administered by phone from April to early July 2006.

The telephone survey consisted of five parts. The first part was made up of 25 statements addressing issues identified in the focus groups and/or by the Registrars. Respondents rated each of these statements on a scale of 1 to 5, where 1 meant strongly disagree, and 5 meant strongly agree.

Part 2 of the survey identified eleven potential reasons for selecting a pharmacy. Respondents were asked to rate how important each factor was in deciding which pharmacy to use. This rating was on a scale of 1 to 5, where 1 meant 'not at all important', and 5 meant 'extremely important'.

Next, participants were asked two short answer questions to obtain their input on the perceived role of the pharmacist in the primary health care team and their role in preventing the abuse and misuse of drugs.

Part 4 of the survey listed 7 duties of a pharmacist, and each respondent was asked to identify the three most important duties. The total number of votes for each duty was added up, and the percentage of total votes for each duty calculated.

Finally, respondents were asked how much each of 5 factors influenced their opinion of the pharmacist.

Data for the survey was collected by contacting individuals by telephone to conduct the survey. Respondents were selected from the residential telephone listings using a systematic random sampling technique. 400 individuals completed the survey. These results are statistically accurate to $\pm 5\%$, 19 times out of 20.

Results and Discussion

Perception of Pharmacists

Overall, the opinions of pharmacists were quite positive. Focus group participants were asked to identify the first thoughts that came to mind when they thought of pharmacists. The dominant responses related to prescriptions and dispensing drugs, or to the knowledge, expertise and advice obtained from pharmacists, and to the friendliness and courtesy of the pharmacists.

Part 5 of the survey corroborated this, showing that both friendliness and expertise are equally important. How well the pharmacist knows you and your history is a close third. Whether or not the store has a loyalty program or sells tobacco had minimal impact on the perception of the pharmacist.

<i>On a scale of 1 to 5, where 1 is 'No Influence' and 5 is 'A lot of influence,' how much do each of the following influence your opinion of the pharmacist?</i>	Average	Standard Deviation	Count
3. The expertise of the pharmacist	4.6	0.7	388
1. Friendliness of the pharmacist	4.4	0.9	387
2. How well the pharmacist knows you and your history	4.1	1.0	388
4. Whether the store offers a reward program or not (ex: Optimum or Air Miles)	2.1	1.3	385
5. Whether the store sells tobacco products or not	1.5	1.0	387

Duties of a Pharmacist

In the focus groups, the main duties of a pharmacist were identified as dispensing medication, checking for side effects and interactions with other drugs, informing patients of how to use the drug (and of side effects and interactions), answering patients' questions, and making sure the prescription is correct. Other duties suggested included following the doctor's directions, and keeping the patient's history. Several individuals identified friendliness, courtesy and compassion as some of the pharmacist's duties. Many also spoke of how a pharmacist will take the time to help you get the information you need.

"That pharmacist will give you more time. And I've heard many, many times when you go into a doctor's office he'll listen to the first three seconds of your conversation, make up his mind and it's done. You can go into a pharmacist and he'll talk about just about anything you want to talk about."

When participants were asked about pharmacists' areas of competence and expertise, they identified knowledge of drugs and their side effects as the core competence of pharmacists. They said that pharmacists could only change prescriptions if they checked with a physician,

although some said that they could substitute a generic for a brand name unless a physician gave specific directions to the contrary.

On Part 4 of the survey, the three most dominant duties identified for a pharmacist are:

- advising or counseling patients about medication, side-effects and interactions with other medication
- talking with doctors to resolve drug-related problems
- dispensing the medication

Doing research on patients and checking or directing technicians came a distant third and fourth, and few people identified resolving insurance problems or running the business as core duties of the pharmacist.

<i>The following are some of the duties of a pharmacist. In your opinion, which THREE are the most important duties for a pharmacist?</i>	Total Votes
a) Advising or counseling patients about medication, side-effects, and interactions with other medication	360
g) Talking with doctors to resolve drug-related problems	271
c) Dispensing the medicine	231
d) Checking or directing their technicians (or assistants)	95
e) Doing research for patients	82
b) Resolving insurance problems	32
f) Running the business (ordering, managing staff, and so on)	30

Part 1 of the survey also identified that pharmacists' friendliness and trustworthiness was seen to be as important as their technical qualifications.

<i>On a scale of 1 to 5, where 1 is 'Strongly Disagree' and 5 is 'Strongly Agree,' how do you feel about the following statements:</i>	Average	Standard Deviation	Count
1. Pharmacists need to be experts in medication, side effects and conflicts between different drugs.	4.8	0.6	400
16. Pharmacists need to stay up-to-date on new drugs and new discoveries in their field.	4.7	0.6	400
13. Pharmacists need to be friendly, supportive and trustworthy.	4.7	0.6	399
4. My pharmacist's main job is to let me know how to use my medication and warn me of any possible side-effects	4.5	0.8	400
22. I want my pharmacist to know me and my history.	4.2	1.0	398

Role of Technicians

Most focus group participants were familiar with technicians, although most didn't know the term. Several participants mentioned that often there were many people in the back with white lab coats, and they didn't know who the pharmacist was and who the technicians were until they needed information only the pharmacist could give and had to speak to him or her. They weren't really clear of the role of the technicians.

Most participants in the focus groups were okay with the technician dispensing the medication as long as they were appropriately trained, under the supervision of a pharmacist, and as long as pharmacists checked to make sure that they had dispensed the right medication. Despite the fact that they realized that anyone could count out pills, they still seemed to want the pharmacist to check the technician's work to feel safe. This support for the supervised use of technicians was reflected in Part 1 of the survey:

<i>On a scale of 1 to 5, where 1 is 'Strongly Disagree' and 5 is 'Strongly Agree,' how do you feel about the following statements:</i>	Average	Standard Deviation	Count
3. A trained pharmacy technician or assistant can actually put my prescription together if they are being supervised by a pharmacist.	3.9	1.1	399

Proper Use of Medication

With respect to ensure the proper use of drugs, the main role of the pharmacist, as determined by the focus groups, was to give the appropriate directions to the individual receiving the prescription. Most felt that, if the pharmacist saw that someone was taking too much medication, or potentially mis-using or abusing medication (as shown by their records), that the pharmacist should do something. There was no clear consensus on what they should do. Some said that they should deny the prescription, while others said that was not in their scope. Some said that they should check with the physician, while others said they should call the authorities.

"I think they check the computer to see if this prescription was filled at this one place or if it's been double-filled at a different place and they make sure it's only been filled one time within a limited time period."

This links in with findings detailed later in this report showing that both focus group and survey respondents feel that all pharmacies should be able to access the medical records of all people in the province.

In Part 3 of the survey, as detailed in Appendix C, there was a very strong sense that the pharmacist should be monitoring for abuse or misuse and deal with or report any significant behaviour (to physicians or authorities).

Qualifications of a Pharmacist

Most focus group participants knew that pharmacists required some sort of university or college education, although few of the participants identified the qualification as a degree in pharmacy. A few thought that it was medical training.

For ongoing education, most focus group attendees felt that pharmacists required ongoing education to keep up with all the drugs that were coming out, and they felt that this was necessary. Few people know who licensed pharmacists and ensured that they were kept current. Several people thought it was the government, and a few identified the College.

Part 1 of the survey also showed that few people know of the College or understand its role.

<i>On a scale of 1 to 5, where 1 is 'Strongly Disagree' and 5 is 'Strongly Agree,' how do you feel about the following statements:</i>	Average	Standard Deviation	Count
8. I know who regulates pharmacists and makes sure they're qualified to do their job.	2.9	1.6	399
23. I know who to call if I have a complaint about a pharmacist or about the service a pharmacy gives me.	2.4	1.6	400

Drug Therapy Experts

When asked whether physicians or pharmacists were the drug therapy experts, almost all focus group participants identified the pharmacist as the drug therapy expert. However, in those groups where someone identified the physician, some of those who chose pharmacists admitted they were not sure and were tempted to sway their vote. This was despite the fact that in a couple of instances participants said that the physician looked up drug side effects in a book, while the pharmacist could cite them from memory.

“Actually, the doctor is the one that said ‘I don’t have the experience in the actual drug. You talk to the pharmacist. They’ll give you better advice.’”

There still seemed to be a general sense in the focus groups that the physician is all-knowing, even when evidence is to the contrary, such as frequent cited examples of physicians making a mistake in the prescription and the pharmacist catching it. Pharmacists can only follow the directions of the physicians, as reflected by both the focus groups and the survey findings.

“The doctor’s heavy on diagnosis, but I can’t really tell. I mean, he is the one prescribing the drugs, so I expect him to know just as much.”

When asked who could write or modify prescriptions, all focus group participants identified physicians. A few individuals also identified pharmacists, as in the case of substitution of generics or a drug that could not be taken with another medication, but in most of those cases they said the pharmacist could only modify the prescription if they checked with the doctor.

There was strong agreement in Part 1 of the survey that only physicians could write or modify prescriptions and that the pharmacist should follow only the directions of the physician. Respondents were unclear whose directions to follow if the physician and pharmacist gave different instructions, they were neutral about a pharmacist being able to select the appropriate medication, given a physician's diagnosis. There was only weak agreement that pharmacists know more about medications and side effects than physicians.

<i>On a scale of 1 to 5, where 1 is 'Strongly Disagree' and 5 is 'Strongly Agree,' how do you feel about the following statements:</i>	Average	Standard Deviation	Count
12. Only doctors can write or modify prescriptions.	4.3	1.1	398
7. It's a pharmacist's job to follow my doctor's directions.	4.2	1.0	400
10. My pharmacist knows more about my medicine, its side effects and how to use it than my doctor.	3.6	1.2	397
11. If my doctor and my pharmacist give me different instructions about my medicine, I listen to my pharmacist.	3.2	1.3	399
15. Once a diagnosis has been made by my doctor, a pharmacist who has some extra training should be able to select the medication I need.	3.2	1.4	399

Perception of Nurse Practitioners

Approximately 20% of focus group participants were familiar to some extent with nurse practitioners without any explanation from the facilitator, and a few others had heard of them, but weren't sure what set them apart from nurses. Some people said they were already going to nurse practitioners, while others in Saskatoon identified a new health center that was opening soon (in Union Center?) that would include physicians and nurse practitioners and other health practitioners.

Once their role and background (including additional training) were explained, most focus group participants said that they had heard of nurse practitioners. All participants were at least somewhat comfortable with the concept of nurse practitioners, as long as the limits of what they were allowed to diagnose and prescribe were clearly delineated and regulated. In particular, the focus groups in the smaller towns and in Saskatoon identified the need for resources such as nurse practitioners because of the shortage of physicians.

"It helps to alleviate some of the people who are always having to wait to go see physicians, and if some of the nurse practitioners are able to take some of the load off, I think that's very helpful."

Perception of Pharmacist Practitioners

This is an area where there was a difference in perception and opinion between the Regina focus groups and the groups run in Saskatoon, North Battleford and Prince Albert. Nobody had a clear understanding of pharmacist practitioners, and most had not heard of them.

When the concept was explained and participants were asked if they would be comfortable with them in Saskatoon and the smaller towns, there was generally a pause, and then generally some support for the idea, again because of the shortage of physicians, as identified by the participants. Some spoke of how their pharmacist was already helping them to diagnose simple maladies.

“I think that would be good for smaller communities that don’t have doctors, if they had a pharmacist who could specialize for smaller communities.”

Part 1 of the survey also showed that most people also go to their pharmacist for diagnoses and advice for minor illnesses.

On a scale of 1 to 5, where 1 is ‘Strongly Disagree’ and 5 is ‘Strongly Agree,’ how do you feel about the following statements:

	Average	Standard Deviation	Count
9. I regularly follow my pharmacist’s advice when selecting medication for minor illnesses (like a cough, rash or upset stomach).	4.2	1.0	399

In contrast to the other focus groups, the first focus group in Regina was quite opposed to the concept of pharmacist practitioners. This was mostly led by a vocal 3-4 people, and grew to be the dominant sentiment. The second group was more moderated with some people open to the concept, again citing the need for access to health care with few physicians. However, this issue was not raised by the participants as vocally in the Regina focus groups as in the other groups.

The opposition to pharmacist practitioners arose because those participants simply couldn’t understand how a pharmacist could diagnose anything. Their understanding was that pharmacists go to school to study drugs, but have no understanding of how the body works or of illnesses. Few participants identified that pharmacists need to understand physiology as part of their training, and this despite the fact that most go to pharmacists to diagnose and recommend treatment for minor illnesses.

“I would rather go to the nurse than the pharmacist because of the training. Pharmacy is drugs and chemistry and running a business in comparison to medicine.”

In addition, the fact that pharmacists are behind their counter and nurses and doctors interact with and examine you was stated as another reason that pharmacists could not prescribe. These participants felt that doctors were trained to diagnose, and pharmacists were simply to follow their instructions.

“I don’t like that because they are never in a clinical setting with patient touch. There’s a huge difference between the nurse practitioner training course which is hands-on as compared to the pharmacist practitioner which is just papers and pens on.”

Even when some of the focus group participants opposed to pharmacists prescribing admitted that they ask pharmacists to do some basic diagnosis of minor illnesses, or advice on medications, they would not admit that the pharmacist could diagnose.

One area of concern that arose with the first focus group in Regina was a potential conflict of interest that could arise since the pharmacists were dealing with pharmaceutical companies. There was a concern that they may prescribe something that was not the best choice for the patient because of commercial interests.

“The commercial aspect of it seeping its way in. What if they prescribed you a new drug rather than a nurse who isn’t dealing with any of that stuff.”

From the discussions with those who were open to pharmacist practitioners in the focus groups, it seems that they may have similar perceptions to those who are opposed to this practice. The difference is that they seem to perceive the need for some sort of support when they cannot access physicians, and some of them seem to use pharmacists in this way already, to some extent. While they may not be sure of whether or not the pharmacist has the appropriate training, the need for medical counseling may outweigh that concern.

“That would be wonderful. My seventy-some year-old father doesn’t need to make an appointment and go to the doctor every couple of months to adjust his blood pressure medication. The pharmacist could monitor that then consult with the doctor. Save an appointment. That would be cheaper and I think that would be a role the pharmacist could fulfill.”

Finally, there was some confusion in the focus groups as to how much of an examination you would need or receive from the pharmacist.

“You still would have to go the doctor for a swab, would you not?”

This identifies a significant perceptual and educational gap that needs to be addressed with the public. It needs to be identified whether this falls in the purview of the colleges, the provincial advocacy groups, or CPhA, or a combination thereof, but the public’s perception of pharmacists and their abilities is significantly different from the reality. This needs to be addressed if any refinement in their role in primary health care is to occur, whether this involves the introduction of pharmacist practitioners or some other change.

Note: Research into generational cohorts shows that veterans (born prior to 1947) and, to some degree baby boomers (born 1947-1964) put a great deal of weight on professional qualifications for professionals such as physicians. The younger generations, Generation X and Nexus (born after 1961) put far less weight on such credentials. There were virtually no Generation X or Nexus participants in these focus groups, which may contribute to the high esteem placed on

doctors. In the future, this may shift as the younger generations age. However, the veterans and baby boomers (represented in these focus groups) as *they* age will be the dominant customers for pharmacies for the foreseeable future.

Specialist Pharmacists

When asked about the potential for specialist pharmacists, some focus group participants were open to the concept. Generally these were individuals who might use such a service. One of the examples provided was a pharmacist who might specialize in diabetes, and a few people who had diabetes in different groups said that they would likely use such a service.

“I’m diabetic, so I would definitely go there for his advice.”

Most focus group participants, though, said that if they wanted a specialist, they’d go to a specialist physician, and that the pharmacist should know everything about all the drugs they might need. The pharmacist, once again, was expected to know about drugs, and should follow the physician’s instructions. Most participants could not understand the need for a specialist pharmacist, suggesting that this is an area that will require significant public education if it is pursued.

There was some concern in the focus groups about who would pay for these services, and a great deal of uncertainty about how the system would work. To some it sounded like going to a doctor, and they couldn’t understand why or how a pharmacist could provide this service, or what they would do differently.

In the survey there is fairly strong support for specialist pharmacists.

<i>On a scale of 1 to 5, where 1 is ‘Strongly Disagree’ and 5 is ‘Strongly Agree,’ how do you feel about the following statements:</i>	Average	Standard Deviation	Count
17. I would go out of my way to see a pharmacist who has taken extra training to specialize in something I am being treated for (like diabetes, asthma, etc.).	4.1	1.2	398

Pharmacist Role in Primary Health Care

Most focus group participants did not know what Primary Health Care was. Only a few, mostly those who were health care professionals themselves, had some idea. When provided with a general description of Primary Health Care, most participants said that the pharmacist’s role in the health care team came at the end of the process – to dispense what the doctor prescribed and to follow his or her directions.

“I think the pharmacist has his role in the team and I don’t see that in the diagnostic end of it.”

Some focus group participants saw pharmacists' involvement in the primary health care process as an added cost and did not see how shifting the roles in the health care team could lower the overall costs.

“A pharmacist for the most part traditionally has just been someone that dispenses drugs from behind the counter. To start providing advice on mental well-being, spiritual well-being, your physical health and so on is just one more person to add into the chain to add more cost to the health system.”

When the discussion of pharmacist practitioners came up in the focus groups, those who were supportive of this practice saw a potential role for the pharmacist as a first stop for minor issues instead of the emergency room.

Similarly, in Part 3 of the survey (detailed in Appendix C), there seemed to be little understanding of Primary Health Care, and the pharmacist's role was seen to be as the dispenser of drugs, following the instructions of the physicians.

Factors Influencing Choice of Pharmacy

The most dominant factors influencing the choice of pharmacy were location, the pharmacist's expertise, and the pharmacist's friendliness. Some participants would pay more and go farther for a friendly pharmacist who knew them – and who they trusted.

Individuals who were on a drug plan, or who had a set co-pay paid little attention to price, while those who paid for the full prescription, or for a significant part of it, or for the dispensing fee did take this into account.

“Whether you had a drug plan makes a total difference. Had I been here two years ago, price would have been one of my three because I didn't have a plan.”

In Part 2 of the survey, the top reasons for selecting a pharmacy are, in order:

- friendliness of the staff
- expertise of the pharmacist
- how the pharmacist and the other staff treat me
- how well the pharmacist knows me and my history
- location
- cost of the prescription
- cost of the dispensing fee
- free parking

Reward programs and whether or not the store sold tobacco products rated very low on this scale.

On a scale of 1 to 5, where 1 is 'Not at all important' and 5 is 'Extremely Important,' how important are each of the following when you decide which pharmacy you use?

	Average	Standard Deviation	Count
4. The expertise of the pharmacist	4.5	0.8	398
5. How the pharmacist and the other staff treat you	4.5	0.7	398
2. Friendliness of the staff	4.3	0.9	397
1. Location	4.2	1.1	397
3. How well the pharmacist knows you and your history	4.2	1.0	398
6. Hours of Operation	4.1	1.0	398
7. Cost of the prescription	4.0	1.2	397
8. Cost of the dispensing fee	3.7	1.3	396
11. Free parking	3.5	1.5	395
9. Reward programs (such as Air Miles, Optimum, HBC, etc.)	2.7	1.4	394
10. Availability of tobacco products	1.6	1.1	395

Loyalty Programs

Both the focus groups and survey showed that reward programs such as Air Miles and Optimum had little influence over the choice of pharmacy. In the focus groups they were generally identified as nice bonuses, but not the reason for most participants' choice of pharmacy. Only two participants in all the focus groups said that their choice of a pharmacy was influenced by these programs. They did not put it down in the reasons for selecting a pharmacy on the pre-questionnaire (ie: their un-aided response), but stated this when asked specifically the loyalty program had an influence on their choice of pharmacy.

Most participants felt that the use of incentives such as reward programs or lower dispensing fees was fine and the nature of competitive business. Several people said that there should be no variation allowed in dispensing fees – that nobody should charge a dispensing fee.

Whether or not a store with a pharmacy (large or small) had a loyalty program had no impact on the focus group participants' perception of pharmacists. It was seen as a totally separate thing, and not related in any way to the pharmacy or the quality or professionalism of services.

"The pharmacist is not the store. The pharmacist is there to dispense the drug"

In Part 1 of the survey, the respondents showed a neutral to mildly positive response the whether or not pharmacies should offer reward programs. From these findings, it does not seem to be a concern for them.

On a scale of 1 to 5, where 1 is 'Strongly Disagree' and 5 is 'Strongly Agree,' how do you feel about the following statements:

	Average	Standard Deviation	Count
2. It's okay for some pharmacies to discount their dispensing fees.	3.8	1.2	394

18. It's okay for some pharmacies to offer reward programs on prescriptions.	3.4	1.3	399
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Tobacco Sales

Only one person in all the focus groups said that whether or not a store with a pharmacy sold tobacco had a strong influence on their decision to shop there. Several people spoke up that it was ironic that a pharmacy, focused on health, would sell tobacco. It was not something most people had thought about, but once asked, they realized the irony. This was not an issue for larger (grocery, box, etc.) stores with pharmacies in them. They did not see a real connection in the latter case.

When asked (during the focus groups) if a pharmacy should be selling tobacco, only a couple of people immediately spoke up to say 'no'. Several others thought that it would probably be desirable – and they would probably support it – if they didn't, but weren't adamant about it. Others spoke of business being business or the fact that someone who has an addiction is going to buy tobacco anyway.

“It would be nice if they didn't (sell tobacco), but I don't know how you would – for a big chain – stop that. Some big chains may sell wine and alcohol. And if you're talking about health, do you stop selling sugar because it causes tooth decay?”

Generally, whether a pharmacy sold tobacco or not did not affect the opinion of the pharmacist, both among focus group participants and survey respondents, especially for the larger stores.

“Not of the pharmacist, no. Not even if he's an owner. It's a business.”

In Part 2 of the survey, as explained above, whether or not the store sold tobacco had little to no influence on the selection of the pharmacy. Part 1 of the survey also showed that, as with the focus groups, respondents were mildly supportive of pharmacies not selling tobacco, whether in a drug store or a larger store. This level of 'positive support', however, falls well within the margin of error, so care should be taken in interpreting these findings. These results do correlate, however, with the focus group findings, which suggest that, while people may support such a move, it is not something that most are strongly advocating.

<i>On a scale of 1 to 5, where 1 is 'Strongly Disagree' and 5 is 'Strongly Agree,' how do you feel about the following statements:</i>	Average	Standard Deviation	Count
25. Drug stores should not sell tobacco on their premises.	3.7	1.5	397
14. Large stores that have pharmacies (like Safeway and Wal-Mart) should not sell tobacco products.	3.6	1.5	395

Confidentiality Expectations

Most focus group participants felt that their information was equally confidential with their doctor as with their pharmacist. During the discussion, some people shifted their opinion as they brought up issues such as the number of technicians that could access their information through the pharmacy. In a couple of instances participants pointed out that nurses and receptionists saw the records in a doctor's office as well. A few people said that their information was more confidential with a physician, while a few said it was more confidential with their pharmacist.

Part 1 of the survey shows that, while participants disagree that their information is more confidential with pharmacists compared to physicians, they generally feel that the information is equally confidential with both parties.

<i>On a scale of 1 to 5, where 1 is 'Strongly Disagree' and 5 is 'Strongly Agree,' how do you feel about the following statements:</i>	Average	Standard Deviation	Count
19. My personal information is as confidential with my pharmacist as it is with my doctor.	4.4	0.9	399
5. My personal information is more confidential with my pharmacist than with my doctor.	2.8	1.2	398

Most focus group participants said that they would like to have the choice of speaking with their pharmacist in a counseling room, or at least in a private alcove where they couldn't be overheard by anyone else. They admitted that they wouldn't want to use this all the time, but would like to have the choice.

"I wouldn't want to do it every time I went to the pharmacist, but if I felt it was what I wanted to do, it would be definitely nice to be able to."

While it was pointed out by several people in the focus groups that many pharmacies had signs asking people to stay several feet behind the person being served, others said that nobody paid attention to those signs and they stood right behind you in the line.

Part 1 of the survey only showed mild support to a neutral response for having the option of speaking with the pharmacist confidentially in a private alcove or meeting room.

<i>On a scale of 1 to 5, where 1 is 'Strongly Disagree' and 5 is 'Strongly Agree,' how do you feel about the following statements:</i>	Average	Standard Deviation	Count
24. When picking up my prescription, I would like the choice of speaking with my pharmacist confidentially in a private consulting room or in a private alcove.	3.5	1.3	399

Some focus group participants thought that all drug stores in Saskatchewan already could access their prescription history, while some participants thought that different stores in a given chain (ex: Shopper's, Wal-Mart, etc.) could access their file and information if they regularly did business with another store in that same chain. The people who didn't believe this were those who had tried to do this and failed, or had problems and delays in getting the information transferred, and thus in receiving their prescription/refill.

All focus group participants felt that it was alright for all pharmacies to access their information, and that they should be able to do so. This would both be a convenience for the customer, and it would address misuse and abuse of drugs. There were some concerns about confidentiality, but overall the need for this access for information significantly dominated those concerns.

"I would like to be able to go to one center and say, you know what, I can't remember the name of the drug, but can you check in your system."

Part 1 of the survey shows support for all pharmacies to be able to access all patients' records.

<i>On a scale of 1 to 5, where 1 is 'Strongly Disagree' and 5 is 'Strongly Agree,' how do you feel about the following statements:</i>	Average	Standard Deviation	Count
21. Different stores in a chain of drug stores that I use (like Shoppers stores or Wal-Mart stores) should be able to access my file so I can get my prescriptions and refills at any store in that chain.	4.4	1.0	399
6. All drug stores should be able to immediately access my records so that I can get my prescriptions and refills anywhere.	4.0	1.2	398

Conclusion

The six focus groups showed a fairly consistent set of public attitudes across the province, and between rural and urban regions. The main area of differentiation was with respect to the receptivity to the concept of pharmacist practitioners. There appears to be more resistance to this in Regina, and a general acceptance and/or support in Saskatoon and the smaller communities that were visited.

The public wants pharmacists to be up-to-date and knowledgeable about drugs, their side effects and interactions. Both the focus group and the survey showed that the expertise and the courtesy/friendliness of the pharmacist are the top factors when selecting a pharmacy, and the survey shows these two factors to be equally important.

The public knows that pharmacists are regulated, but they generally don't know who does this or how it is done, as shown by both the focus groups and the telephone survey.

In general, the public does not seem to understand what primary health care is, and they currently see the pharmacist's role on this team as the person who dispenses medication according to the directions of a physician and who gives advice on medication.

There is a strong perception among the public that pharmacists only know about medication, and do not have the knowledge base or qualifications to diagnose. Doctors were placed on a platform by participants in the focus groups, somehow being the all-knowing, all-seeing directors of health care, and the pharmacists and other health care professionals being there to follow their lead.

Despite focus groups participants noting evidence to the contrary (ex: doctors looking up details about drugs vs. pharmacists knowing it), they saw physicians as being equally or more knowledgeable about drugs and medication, which matches the survey results.

While the focus groups were neutral or negative toward the concept of specialist pharmacists, the survey showed support for this concept. The public also supports the use of trained technicians, under the supervision of a pharmacist.

The public appears neutral to mildly supportive of the use of incentives such as reward programs or reduced dispensing fees. These are simply seen as ways of doing business in a competitive market. Reward programs, in particular, have little weight in the selection of a pharmacy. They are seen more as a bonus once the choice has been made, and having one has little to no impact on their perception of the pharmacist.

Whether a pharmacy sells tobacco or not has little impact on whether or not most participants use a particular pharmacy, and it has no bearing on their opinion of the pharmacist in that store. Most participants would support or be neutral to banning the sale of tobacco in small pharmacies. There were few participants in the focus groups who advocated for this, but most said that it's probably appropriate given the pharmacy's focus on health and they would support it if it

happened. The survey showed relatively equal levels of support for this for both small pharmacies and large stores with pharmacies.

Information shared with pharmacists is seen to be as confidential as that shared with physicians. Interestingly, the public also would like any drug store to be able to access their records so that their prescription can be filled anywhere. Related to this, focus group participant and survey respondents both felt that pharmacists should take an active role in preventing the abuse and misuse of drugs.

In the focus groups there was strong support for having the *option* of a private alcove or counseling room where the patient could speak confidentially with the pharmacist for sensitive issues. The survey showed only mild support for this.

Exhibit A – Focus Group Questionnaire

1. What are the first three (3) words that come to mind when you think of pharmacists?

2. What are the 3 main duties of a pharmacist?

3. What qualifications must a pharmacist have to work as a pharmacist? What do they need to study/learn?

4. What factors influence your choice of the pharmacy you use most often?

5. What is Primary Health Care?

6. Who are the drug therapy experts? (circle one): **Physicians** **Pharmacists**

7. Who is authorized to write or modify prescriptions? (circle all that apply):

 Physicians **Nurses** **Pharmacists**

8. How confidential is your information with a pharmacist compared to a physician?
(circle one)

 Less confidential (with physicians) **Same** **More confidential** (with physicians)

Exhibit B – Telephone Survey

Part 1

On a scale of 1 to 5, where 1 is ‘Strongly Disagree’ and 5 is ‘Strongly Agree,’ how do you feel about the following statements:

1. Pharmacists need to be experts in medication, side effects and conflicts between different drugs.
2. My pharmacist’s main job is to let me know how to use my medication and warn me of any possible side-effects.
3. A trained pharmacy technician or assistant can actually put my prescription together if they are being supervised by a pharmacist.
4. My personal information is more confidential with my pharmacist than with my doctor.
5. All drug stores should be able to immediately access my records so that I can get my prescriptions and refills anywhere.
6. It’s a pharmacist’s job to follow my doctor’s directions.
7. It’s okay for some pharmacies to discount their dispensing fees.
8. I know who regulates pharmacists and makes sure they’re qualified to do their job.
9. I regularly follow my pharmacist’s advice when selecting medication for minor illnesses (like a cough, rash or upset stomach).
10. My pharmacist knows more about my medicine, its side effects and how to use it than my doctor.
11. If my doctor and my pharmacist give me different instructions about my medicine, I listen to my pharmacist.
12. Only doctors can write or modify prescriptions.
13. Pharmacists need to be friendly, supportive and trustworthy.
14. Large stores that have pharmacies (like Safeway and Wal-Mart) should not sell tobacco products.
15. Once a diagnosis has been made by my doctor, a pharmacist who has some extra training should be able to select the medication I need.
16. Pharmacists need to stay up-to-date on new drugs and new discoveries in their field.
17. I would go out of my way to see a pharmacist who has taken extra training to specialize in something I am being treated for (like diabetes, asthma, etc.).
18. It’s okay for some pharmacies to offer reward programs on prescriptions.
19. My personal information is as confidential with my pharmacist as it is with my doctor.
20. My pharmacist can change my prescription if it conflicts with other medication I’m taking.
21. Different stores in a chain of drug stores that I use (like Shoppers stores or Wal-Mart stores) should be able to access my file so I can get my prescriptions and refills at any store in that chain.
22. I want my pharmacist to know me and my history.
23. I know who to call if I have a complaint about a pharmacist or about the service a pharmacy gives me.
24. When picking up my prescription, I would like the choice of speaking with my pharmacist confidentially in a private consulting room or in a private alcove.
25. Drug stores should not sell tobacco on their premises.

Part 2

On a scale of 1 to 5, where 1 is ‘Not at all important’, and 5 is ‘Extremely important’, how important are each of the following when you decide which pharmacy to use?

1. Location
2. Friendliness of the staff
3. How well the pharmacist knows you and your history
4. The expertise of the pharmacist
5. How the pharmacist and the other staff treat me
6. Hours of operation
7. Cost of the prescription
8. Cost of the dispensing fee
9. Reward programs (such as Air Miles, Optimum, etc.)
10. Availability of tobacco products
11. Free parking

Part 3

1. What is the role of the pharmacist in the primary health care team (which is made up of doctors, nurses, pharmacists and other health care professionals)?
2. What is the pharmacist’s role in preventing the abuse or misuse of drugs?

Part 4

The following are some of the duties of a pharmacist. In your opinion, which three are the most important duties for a pharmacist?

- a) Advising or counseling patients about drug therapy, side-effects, and interactions with other medication
- b) Resolving insurance problems with your drug plan (like Blue Cross, Great West Life, and so on)
- c) Dispensing the medicine
- d) Checking or directing their technicians (or assistants)
- e) Doing research for patients
- f) Running the business (ordering, managing staff, and so on)
- g) Talking with doctors to resolve drug-related problems

Part 5

On a scale of 1 to 5, where 1 is ‘No Influence’, and 5 is ‘A lot of influence’, how much do each of the following influence your opinion of a pharmacist?

1. Friendliness
2. How well the pharmacist knows you and your history
3. The expertise of the pharmacist
4. Whether the store offers a reward program or not (such as Air Miles, Optimum, etc.)
5. Whether the store sells tobacco products or not

Exhibit C – Survey Results

Part 1

On a scale of 1 to 5, where 1 is 'Strongly Disagree' and 5 is 'Strongly Agree,' how do you feel about the following statements:

	Average	Standard Deviation	Count
1. Pharmacists need to be experts in medication, side effects and conflicts between different drugs.	4.8	0.6	400
16. Pharmacists need to stay up-to-date on new drugs and new discoveries in their field.	4.7	0.6	400
13. Pharmacists need to be friendly, supportive and trustworthy.	4.7	0.6	399
4. My pharmacist's main job is to let me know how to use my medication and warn me of any possible side-effects	4.5	0.8	400
19. My personal information is as confidential with my pharmacist as it is with my doctor.	4.4	0.9	399
21. Different stores in a chain of drug stores that I use (like Shoppers stores or Wal-Mart stores) should be able to access my file so I can get my prescriptions and refills at any store in that chain.	4.4	1.0	399
12. Only doctors can write or modify prescriptions.	4.3	1.1	398
22. I want my pharmacist to know me and my history.	4.2	1.0	398
7. It's a pharmacist's job to follow my doctor's directions.	4.2	1.0	400
9. I regularly follow my pharmacist's advice when selecting medication for minor illnesses (like a cough, rash or upset stomach).	4.2	1.0	399
17. I would go out of my way to see a pharmacist who has taken extra training to specialize in something I am being treated for (like diabetes, asthma, etc.).	4.1	1.2	398
6. All drug stores should be able to immediately access my records so that I can get my prescriptions and refills anywhere.	4.0	1.2	398
3. A trained pharmacy technician or assistant can actually put my prescription together if they are being supervised by a pharmacist.	3.9	1.1	399
2. It's okay for some pharmacies to discount their dispensing fees.	3.8	1.2	394
25. Drug stores should not sell tobacco on their premises.	3.7	1.5	397
10. My pharmacist knows more about my medicine, its side effects and how to use it than my doctor.	3.6	1.2	397
14. Large stores that have pharmacies (like Safeway and Wal-Mart) should not sell tobacco products.	3.6	1.5	395

24. When picking up my prescription, I would like the choice of speaking with my pharmacist confidentially in a private consulting room or in a private alcove.	3.5	1.3	399
18. It's okay for some pharmacies to offer reward programs on prescriptions.	3.4	1.3	399
11. If my doctor and my pharmacist give me different instructions about my medicine, I listen to my pharmacist.	3.2	1.3	399
15. Once a diagnosis has been made by my doctor, a pharmacist who has some extra training should be able to select the medication I need.	3.2	1.4	399
8. I know who regulates pharmacists and makes sure they're qualified to do their job.	2.9	1.6	399
5. My personal information is more confidential with my pharmacist than with my doctor.	2.8	1.2	398
20. My pharmacist can change my prescription if it conflicts with other medication I'm taking.	2.8	1.4	400
23. I know who to call if I have a complaint about a pharmacist or about the service a pharmacy gives me.	2.4	1.6	400

Part 2

On a scale of 1 to 5, where 1 is 'Not at all important' and 5 is 'Extremely Important,' how important are each of the following when you decide which pharmacy you use?

	Average	Standard Deviation	Count
4. The expertise of the pharmacist	4.5	0.8	398
5. How the pharmacist and the other staff treat you	4.5	0.7	398
2. Friendliness of the staff	4.3	0.9	397
1. Location	4.2	1.1	397
3. How well the pharmacist knows you and your history	4.2	1.0	398
6. Hours of Operation	4.1	1.0	398
7. Cost of the prescription	4.0	1.2	397
8. Cost of the dispensing fee	3.7	1.3	396
11. Free parking	3.5	1.5	395
9. Reward programs (such as Air Miles, Optimum, HBC, etc.)	2.7	1.4	394
10. Availability of tobacco products	1.6	1.1	395

Part 3

1. What is the role of the pharmacist in the primary health care team (which is made up of doctors, nurses, pharmacists and other health care professionals)?

To give out the correct medication
Know more about medication than others on the team
To dispense drugs
To know about drugs
To dispense drugs
To hand out medication
To provide prescriptions
To sell drugs
To provide medication
It's a very important role
To inform you about the medication
Be part of a team
To be knowledgeable about drugs
To insure that the role of the doctor is fulfilled
To fill prescriptions
Educate the customer taking the medication
To know what the medication does
To dispense medication
To dispense medication
To dispense drugs
To make sure you get prescriptions that don't react with each other
To know the drugs and be friendly
To check the prescription and see if there are any side effects with the customer's current medication
To dispense drugs
To sell medication
It's very important
To know the medication
It's very important
To care about the customer
To supply medication
To make sure that prescriptions are filled out properly
To dispense drugs
To make sure medications are in order
To dispense medication
To make/keep everyone healthy
To inform you about your drugs
To provide drugs
To dispense drugs
To make sure you get the proper drugs
To help answer questions
To give out medication
To dispense the medicine
To support the staff

To assist the customers
To dispense drugs
To dispense drugs
To hand out drugs
To be supportive
To make sure the customer is taking the right medication
To safe guard the customer's health
To dispense drugs
To hand out drugs
To dispense drugs
To hand out drugs
To help customers
To give customers their drugs
It's very important
It's very important
To get the customer's prescription
To dispense drugs
To give out drugs
To answer all drug related questions
To get the customer their medicine
To know about medications and side effects
To know side effects with different combinations of drugs
To make sure the doctor's requests are followed
To be an expert on medication
To give you the right drugs
To work together with the team
It's important and to know about new drugs that doctors don't have time to learn about
To fill prescriptions and answer questions
To be a partner in customer conferences and assist doctors in picking proper treatments
To be able to help you with prescriptions and know about drugs
To know and dispense drugs for customers and also know customer's history and any conflicts with drugs they're taking now
To dispense drugs and know side effects; make sure one doesn't conflict with the other
To dispense drugs and give more information about side effects than the doctor has given
To dispense proper medication pertaining to customer's illness, according to doctor's orders
To dispense medication
To give prescriptions
To know medications and customer's history
It's secondary to the doctor
To fill prescriptions
To help customers with their drugs
To advise the customer on medication they're taking and tell you the side effects
To be an expert on drugs
To ensure that the customer is getting their proper drugs at the best price
To be aware of possible side effects with medication and let customer know what it will do
To dispense medication and know about the drug and side effects
To ensure the a variety of medication is available and give proper medication
To educate the customer on side effects and give information about medication
To be aware of what medications are available for different diseases
To help watch out that the customer is getting the proper dosage
To fill and check prescriptions to make sure they won't conflict

To fill prescriptions
It's very important
To dispense drugs be part of the health care team
To dispense prescriptions
To dispense the right medication
To prepare prescriptions, answer questions, and advise customers on what medication to take for minor illnesses
To dispense the drugs
To be an assistant coach to the doctor but specialize in knowledge the doctors lack
To consult with doctors about reactions to a prescription
To dispense medications and know what drugs can go together
To dispense medication and inform about it
To provide proper prescription that the doctor has prescribed
To be knowledgeable about drugs they are dispensing
To give helpful information about side effects
To dispense drugs
To stock up on medication and know the drug companies
To dispense medication
To explain to the customer what their medication does and how to take it
To explain how to use drugs properly
To dispense drugs and advise customers how to take it, and answer your questions about side effects
To deliver the prescription that doctors order
To dispense drugs and be an expert in the area of drugs
To respect the customers and be confidential
To know what they're dispensing and make customers aware of interactions with other drugs
To take care of the public in need of medication
To dispense prescriptions and make sure there are no conflicts with medications
To support the medical field
To make sure there are no interactions with other medications
To fill prescriptions and advise of any conflicts
To give out prescriptions
To prepare customer's prescriptions
To make sure that the medication prescribed doesn't conflict with anything else the customer is taking
To tell the customer about their prescription
To look after the customer's best interests and health
To fill prescriptions
To answer questions about medications and side effects, and dispense medication
To dispense drugs and knowingly give the proper drugs
To give customers the proper prescriptions and information
To fill prescription that the doctor has asked for and if something is conflicting, call the doctor. Also tell customer the side effects confidentially, delegate staff and stock up on supplies. Keep up to date on the PDR reference manual and take refresher courses on new medication
To give the customer the right prescription and information
To fill customer's prescriptions and answer questions
To dispense medication
To help customers out
To follow the prescription that is given and maintain the safety and health of other people
To inform the customer about medication, how to use it, and about side effects
To dispense medication and make sure there are no side effects, and if there are warn

customer of side effects and how long they will last
To make sure customers are getting the right medication for their diagnosis
To dispense prescriptions
To be able to give the correct prescriptions ordered by doctor unless there's doubt in the doctor's prescription
To give out prescriptions
To manage the customer's well being and health
To know how medications react together and what is a proper dosage
To dispense drugs appropriately
To fill the customer's prescription and tell them information about it
To dispense drugs, tell customers what they're taking, and any conflicts they could have
To follow prescriptions but be aware if there is something incorrect and then inform doctor and customer
To know the customer and what they take
To know the medication they're dispensing
To make sure the customer is getting the right medication that's prescribed
To supervise, make sure nothing is mistaken, and if there are any questions, answer them.
To dispense prescriptions
To be more up-to-date on medications and know more about conflictions between drugs
To provide information on medication
To supply the proper medications
To make sure the medication is adequate for the illness
To make sure they knows what drugs are for what and follow doctor's directions
To dispense medication that doctor prescribed and go over instructions
To read prescription and dispense
It is as important as others in the team; give the right doses and work together
To know medication and side effects
To understand the customer's history, make sure the customer understands how to take their medication, and know side effects
Make sure customer is getting the right medication that is prescribed
To provide good service and know their business well
To dispense medication for customers and make sure the customer is safe with no conflicts
To dispense drugs and follow up if the customer has trouble, explain side effects more than doctors do
To be part of the team that works with the doctor
To be on par with the doctor. The pharmacist manages the care of the problem while the doctor determines the problem
To provide service for customers
To be support for the doctor
It is equal importance as any one else
To tell what drugs are best for the customer and make sure the doctor didn't mess up the prescription
To make sure the medicine is dispersed properly, and be knowledgeable about drugs
To fill your prescription
It's very important with medication
To service the customer's needs and get what the doctor ordered
To dispense medication and make sure patient understands how to take it and side effects
To dispense medicine and tell the customer when to take it and how to take it
To provide drugs correctly and safely
To make sure the customer gets the proper drugs
To ensure that the drugs that are prescribed are current, legal, and effective and that there aren't any side effects a doctor wouldn't know about

To be knowledgeable in dispensing medication and making recommendations
It's very important
To give out prescriptions the doctor has prescribed and to explain the side effects
To give the customer their prescriptions
To be knowledgeable about medications, provide information to customer, and be able to dispense drugs that are prescribed
To look after the prescription needs of the customer and be aware of any side effects
To oversee what the prescriptions are being filled with
To provide the drugs a doctor orders
To carry out the doctor's orders
To be a member of the team, work with doctor and customer, and dispenses drugs
To look after the patient's health just like the doctor; to know history and catch conflicts
To dispense medication and give advice
To properly dispense the drugs and understand what they're for and tell the customer the side effects
To dispense drugs
To make sure that the customer gets proper medication with instructions, communicate with the doctor, and explain the medication to the customer
The pharmacist comes third after doctors and nurses in the team
To make sure the customer has no conflicting medications and offer advice and knowledge
To follow the doctor's advice
To fulfill prescriptions according to the doctor's orders
To fulfill the doctor's orders
To fill the customer's prescriptions and handle over the counter medication
To serve the customer with honesty and friendliness
To dispense medication
It's very important. They need a total understanding of the drugs in relationship to the customer. The doctor knows the ailment but pharmacists know the best drug for the ailment
To dispense proper drugs
To know medication
To dispense medication accurately, professionally and give customer all the information pertaining to medication
To be an advisor
It's very important, and they dispense the medication
To fill the customer's prescriptions
To check and make sure that whatever prescription the customer has doesn't conflict, and explain the use and the side effects
To give the customer their drugs
To know more about drug interactions with medications and possible reactions
To tell customers what prescription they are giving and inform about side effects
To explain prescriptions, dosages and any problems the customer might have. Also reconfirm the doctor's instructions
To assist customers with the use of prescribed drugs
To fulfill the prescription by the doctor
To properly fill out prescriptions
To accurately dispense prescriptions by the doctors
To answer questions and give advice
To fill prescriptions that the doctor gives them, catch any side effects the doctor didn't mention and maybe change prescription
To explain the medication and side effects
To provide help and know the drugs
To know all about the drugs and what they're dispensing, and know the customer's history

To explain the prescription to the customer
To be an expert on the chemicals they sell
To make sure the customer's medications aren't conflicting with others
To understand what's wrong with the customer and administer medication under doctor's guidance
To look after medications
To dispense drugs
It's very important
To work with the doctor, and if there is a conflict contact doctor
To fill prescriptions that the doctor orders
To dispense medication and ensure it's the proper dose and no conflicts with other medications
To follow doctor's orders and to become familiar with customer's health and background
To dispense drugs
To fill prescriptions
It's a large role
To fill out prescriptions correctly
To supply medicine that doctor prescribes
To provide knowledgeable information
To fill customer's needs
To take care of customers and make sure they take the proper medication
It's very important
To work in cooperation with the doctor in treatment of illness
To fill out prescriptions
To fill prescriptions and give advice on how to use the product
It's very important
It's very important
To give medication
To give customers their prescriptions
To provide medication
To provide customers with drugs
To work in a team
To explain to the customer the prescriptions, supply them and explain how to take them
To help and serve the customer
To dispense prescriptions and ensure there is no conflict
To supply medication and give information on side effects and what to expect while on the drug
To dispense drugs
To distribute medication
To make sure that the customer knows what drugs they're taking and what the side effects are
To make sure that the customer gets the right medication
To dispense medication
To direct the staff and making sure they do their job right
To dispense drugs
To dispense medicine that a doctor has prescribed
To assist the doctor
To inform the customer on how to use their medication
To dispense medicine, and warn of any side effects or conflicts with the doctor's message
It's important
To look after everything the doctor prescribes and if it conflicts with your medicine contact the doctor
To fill prescriptions
To put the proper medication together and check what the doctor does

It's very important

To make sure the customer gets the correct prescriptions

To help the customer

To give the customer their drugs and tell them the side effects

To properly dispense prescriptions

To see that the customer is getting the right medicine and the right dosage

To fill the prescription from the doctor

To dispense proper prescriptions that don't conflict with other things the customer is taking and offer suggestions

To be aware of the customer's history for drug interactions

To make sure that the customer's medications don't conflict with each other and know the history

To have a wide knowledge of drug interactions

To follow through with the doctor's orders and inform about side effects

They should be able to give the customer the proper medication that is needed and tell them how to use it

To dispense medication and have the proper credentials; it's equivalent to the whole medical practice

To partly follow the advice of the doctor and catch something the doctor misses

To make sure they are giving the right medication and give information

To make sure the customer is getting the drugs they need

To ensure that medication is being dispensed correctly and doesn't conflict

To fill the customer's prescription and let them know about side effects

To dispense prescriptions

To communicate with the doctor

To have drug knowledge

To follow the doctor's orders

To be an extension of the doctor; give the customer advice and help along the process

To know about the drugs and how they work and conflict

To provide prescriptions and to let customers know the side effects

To advise on possible effects of the drugs the customer is taking and other conflicts with medication they're taking

To know medicine and prescribe properly

It's very important

To know what they're doing

To make sure that drugs are dispensed safely, the doctor's prescriptions are followed, and no drug interactions

To give out the prescription that the doctor has given

To give the customer their prescription

To dispense medication and make sure that they don't contradict with other medications

To be honest with their customers and should be friendly and tell the customer how to use it

To be a back up for the doctor

To fill a prescription, advise the customer on medication and tell them if it conflicts with something

Get the prescription filled, tell how to take it and tell about side effects. Also be able to answer questions about things the customer hears in the media

It's very important

To ensure that the customer gets the proper prescription and no side effects are unknown. Also provide information

To be able to dispense the medication and help the customer if they have questions

To give the customer their prescriptions

To dispense drugs, explain interactions with what else the customer is taking and the side

effects of it

To ensure that the customer know enough about what they're taking

To distribute medications to people

To dispense medication

To fill the customer's prescriptions

To watch that the customer's medications don't interact with each other and keep an eye on what they're taking

To provide proper medication

To be there when the customer need you.

To understand the medication, know reactions with other medications and know how the drug will affect the customer

To support the doctor

To dispense drugs based on the doctor's prescription

To dispense prescriptions in accordance with the doctor's instructions and provide a safeguard over conflicts in medicines

To fill the customer's prescriptions

To dispense drugs and advise

To give out drugs

It's very important

To advise the customer on their prescriptions

To dispense drugs

To make sure that the customer's medication is accurate

To be up on new drugs and old drugs, know side effects and be able to consult doctors about what's new

To give the customer their medications and any advice they have

To look at the prescription and the history and make sure there won't be any problems and then discuss the prescription with the customer

To dispense medications directed by the doctor

To assist the customer so they get the proper medication and explain it

To give advice on medicine

To give the customer their prescription and check for allergies

To fill the prescription

To provide medication prescribed the doctor and give information on the drug

To keep customers informed, give the proper medication and don't make mistakes

To dispense accurately and inform the customer of side effects

To dispense drugs the doctor prescribed

To dispense drugs that the doctor orders and to be alert to what the customer is on

To make sure that the customer gets the proper drugs and learns how to use properly and of any side effects

To dispense drugs

To give the customer the proper prescription

To supply medication

To dispense drugs, advise the customer and notify the doctor if something conflicts

It's very important

Service

To give the customer their medication and give information about side effects

It's pretty high

It's very important

It's almost equal to the doctor; inform the customer about their medication

To be friendly

To be a consultant

To know that the customer's drugs don't conflict with others, know history, and make sure

they're getting the right medication
It's very important
To dispense medication

2. What is the pharmacist's role in preventing the abuse or misuse of drugs?

To keep an eye on what customers are getting
It's important
To keep records
To contact the appropriate people to stop customers from going store to store to get drugs
To prevent it
To report it
To stop customers from getting their drugs if there is abuse happening
To look at the records first
They can't control it
It's somewhat important
To report it
To alert the police
To tell customers how to use their drugs
To talk with the doctor
It's very high
To monitor the amount of drugs a person is buying
To warn the customer
To keep track of customer's history
To warn the customers about side effects
To pay attention if someone is getting too much of one drug and then question it
To bring it to the authority's attention
It's a big responsibility
To communicate with the customer's doctor
To not give out expired medication
To stop it
To make sure they aren't over medicating the customer
To know what drugs shouldn't be taken together
To be aware of the danger signs
It's their responsibility to report it
To check what customers are taking
To tell you about side effects
To tell the customer how often to take the medication
To make sure the medication gets to the right people
To keep track of patients
To warn people of side effects
They have nothing to do with it
To make sure there's no double doctoring happening
To stop it
To have an age limit on certain drugs
To report the abuse
To stop it
To be aware of what people are buying
To report it
To report it
To report it
To stop it
To stop it

To prevent it
It's very important
To check for double doctoring
It's very important
To be careful
To report it
To contact the authorities
To report it
To keep track of who is getting what
They can't be held accountable
To be careful and screen people
To keep drugs secure
To be a part of a community-wide effort at preventing abuse
To have everything on the computer and be aware of any abuse.
To know what you're taking
They need to do more than rely on computers to prevent this problem.
To be aware of double doctoring and watch out for ingredients of crystal meth
To stick to the oath for misuse of dispensing drugs
To keep track of customer's history and contact the doctor if there's abuse
To question if drugs are refilled more than necessary and report anything
To be aware of the amount being dispensed to a customer
To have history on computer and check that before giving out drugs
To be cautious who they give medication to
They can't prevent it; doctors are prescribing it and they follow their orders
To take leadership
To be very alert at who is getting what drugs
To inform customers what could happen
It's very important to keep records
It's a significant responsibility
To monitor who gets what and how often
To give a printout with the medication that warns customers of taking it with other medication
It's up to the doctor, not the pharmacist
To keep track of how much is dispensed
They don't have enough authority to do anything about that
To be aware if you are purchasing excess drugs
To watch out for it
To make sure people aren't refilling prescriptions too often
It's very important
To use an electronic system which is central and would prevent abuse
To give advice
To check if the customer is using too many refills
It's very important and they should keep a computerized system with customer's records
To be careful about mixing drugs
To be careful not to dispense drugs that are being abused
It's an important role, and they should keep computerized records between towns
To watch out for refills made too often
To have access to files in a computer system and know if the customer has already received a refill
It's very important, and they should notice if drugs are being misused or refilled too often
To keep drugs behind counter that people could abuse
To report any abuse of drugs

To clearly state what the directions are and giving a print out saying how to take it
It's not the pharmacist's responsibility; it's the doctor's problems
To report or refuse to sell drugs if they have evidence that a customer is misusing the drugs
To give directions on how to use the drugs
To look out for misuse and do something about it, like report it to authorities
To not sell drugs if they think a customer is misusing it
To monitor it
To have proper regulations keeping the wrong people from getting the wrong prescriptions, like check the proper documents
They should have access to doctors' records to check for double doctoring
To report it to the medical professionals
To monitor how often customers come in for refills
They have a high obligation to know if any abuse is happening
It's an important role, and watch how much of the medication people are getting
To make sure that they give the right prescription to the right people
To monitor the customer's history
To share records between pharmacies
To make sure the drugs are legal and will do the right thing
To monitor the amount of prescriptions on the computer
To not give the wrong medication out to the wrong people
To check their records and know how often a customer gets their refill
To give you a copy of how to properly take and use your medication
To link pharmacies with a computer database and monitor how often customers are getting their prescriptions refilled
To keep records to check frequency of refills
To pass out a pamphlet of directions but it's the doctor's responsibility for prescribing the drugs
To refuse drugs if they think it's necessary
To cut customers off
To check the history of the customer
To know what side effects there are after you misuse a drug
To make sure they're aware of the customer's history
To make sure the customer gets the proper drugs
To keep information about the customer and their prescriptions
To keep track of how much is getting dispensed to a customer
To link pharmacies so they have access to customers' records
To be aware if the customer is following the directions
To report any problems they see with drug abuse
If they suspect something, to contact doctor immediately
To make sure there is no abuse and be aware if a customer is abusing
To be aware of any abuse
If they feel someone is taking more drugs than they should, then contact the doctor and if both agree, notify the authorities
To be aware and not dispense if they know of a drug being abused
To catch if they're dispensing too often, keep everything online, pull some pharmaceuticals behind the counter and monitor it
It's minimal, they have no control over the medication after it leaves
To see that the customer gets the proper medication
To make sure it's not in the wrong hands, and stop double doctoring
To keep track of customer's history on computer
To verify that the prescription is by the doctor
To keep track of history

To keep all prescriptions on file so there is no double doctoring
To have records on the computer
To make sure a full cycle is taken, and not giving more than the doctor recommends
It's the doctor's responsibility
To be concerned with this problem
To be careful when dispensing in case of drug addiction, and keep up to date on computer records
To have records on a computer
It's critical
It's not up to the individual pharmacist; they use a computer network
To be regulated and report over use
To be hands on and use a front end approach
It's important
To know the history of the customer and make sure they need the drugs that are prescribed
To make people aware of side effects
To not sell the medication if they suspect abusive behaviour
It's very important
It's their responsibility to do background checks on who they hire so they are properly dispensing the medication
To monitor someone's history if the medication is highly addictive and make sure they don't come in for refills too often
To keep drugs behind counter
To keep track of customer's history on computers
To have an understanding of everything they dispense could lead to a burden to society
To make recommendations to a doctor
To know what's going out to the customer
To not double dose it and not to give more than the prescribed amount
To be knowledgeable about what the customer has taken for drugs, and if they see there's a problem, inform the customer
To report it to college of pharmacists or inform the family doctor
To be aware of what drugs the customer is taking
To be alert as to whether the customer is getting their prescription filled at more than one place
To help the people with the problems
To monitor and control the amount of medications the customer is given
To cross reference where possible with other medication
They don't have much say in that, they're just filling a prescription
It's out of their control. They follow the doctor's orders and explain to patient how not to abuse
To contact the authorities if there is someone abusing
To keep track of customer's history on computer
To obey the law
To use discretion in dispensing unreasonable amounts of drugs that can be easily abused
To monitor customers
To keep track of the people who are misusing drugs
To make sure everything is right with the prescription
It's very prominent. All drug stores should share files
To stick to the doctor's prescriptions

The pharmacist has no way to know if it's not a regular customer
Wasn't aware of this kind of drug abuse
To have computer networks that connects all drug stores with customer's history
To know the customer's history
It's important not to hand out medication freely
To use a tracking system and report double doctoring
To know what the customer needs and should get
To flag a customer's drug abuse, as well as with over the counter drugs too
To contact the association or medical board
To alert authorities if they suspect abuse
To follow the prescriptions that the doctor gives and pharmacists should know history and the reason customers are taking the drugs
To be aware if someone is getting something they shouldn't be
To use caution and be partners with the doctors
To be the regulator because they tell people how much to take and tells customers how to be responsible
To explain the drugs
To be responsible
To be aware if a customer is abusing
It's very important to be aware and they are usually the first person to pick up on a drug abuse and effects
They don't have much control
To be aware of the consumption of drugs they give out
To have a universal system to keep track of customer's history
To know what a customer is taking and their history
It's important
To be aware of what drugs a customer is taking
To tell a customer the side effects
It's very important they recognize who is abusing drugs
It's their professional duty to be responsible for that
To be aware if refills are being doubled
To tell a customer how to take their medication
To be the front runner
To instruct customers how to use their medications and what are the side effects
To keep behind the counter the drugs that can be abused
To be aware of the warning signs for abuse
To make sure that people aren't getting the prescription filled over and over
To not give a customer the wrong prescription
It's very important
To have a very organized accountable system
Is not sure if it's a pharmacist's role
It's very important

It's very important
To not leave the drugs alone
To be aware of people misusing drugs
To inform customers
To be a key part in identifying abuse
It's crucial
To tell the customer exactly how to take the medication
To have access to everyone's files
To keep an eye out for people who are on several prescriptions or come in with prescriptions from different doctors
To keep records of what people are using and give everyone has access to it
It's very strong
It's very high. It's their responsibility as well as the person taking the drugs
It's a big role
To not dispense drugs that are not suitable for the customer
To see that it doesn't happen
It's important
It's very strong
They are the front line
To keep a record of what medication a customer is taking
To be on the look out for misuse
Pharmacists don't have a role
It's pretty high
To report it if they suspect abuse
To know a customer's history and catch things the doctor misses
To notice abusive patterns
To provide information
It's a big role
To not give drugs out if they are too strong
To know how many times they give a customer the drug
To watch for double doctoring
To keep good surveillance
To alert the proper people when abuse happens
To have efficient records to check if a drug has already been given to the customer
To always tell the customer what drugs can conflict and directions on how to use it
To keep track of how often a customer comes in on a computer and be aware of double doctoring
It's very important
To be aware
To determine any signs of addiction to the drug
To make the prescription holder aware of it immediately and not to dispense something that would harm the customer

To check up that you're a customer isn't double doctoring
It's very important
To make sure that the customer is taking drugs on schedule and takes enough that the illness doesn't spread but not too many that he/she builds a resistance to it
To be responsible
To keep track of what medications the customer is getting and if they're double doctoring
To be aware
To keep track of what they dispensed to whom and not over dispense
To keep accurate records
To be aware and know what a customer is taking
To keep a database of what customers are taking
To monitor quantities going out to individuals and report it and make sure it's investigated
It's highly important
To know what he/she is doing
To alert the physician when multiple prescriptions are filled
To explain how to take it
Not to sell it if a customer is abusing it
To contact the physician if a customer has been double doctoring, so the doctor will stop it
To tell people what they're not supposed to use and not give something that conflicts with other medications they're on
To be very responsible
To do whatever they can to prevent it
To check a customer's history of refills and not give out anything if they've already had a refill
It's very important
To monitor how often prescriptions are filled
To stop giving out more refills than a customer is supposed to have
To catch abuse if they know what everyone's taking
To monitor what a customer buys
To not sell anything if the customer doesn't have a prescription
It's very important to keep track of what a customer is taking
It's very important
It's very important
To make sure that the abusive drugs aren't given out to the wrong people
To ensure that the prescription is legit
To be on the watch for over prescribing or over purchasing of medicines
To not sell drugs to a customer that doesn't need it
It's extremely important
To warn if a customer if they use a drug too much and prevent it from happening
To explain how much to take
It's very important, if they know it's being abused they should contact officials
To have records and know if a drug is being abused
It's big role. They should monitor for abuse.

- To be aware of it
- To not give drugs to minors unless they're supervised
- To look into the customer's background to see if they abuse medicine
- It's their top priority
- To work with other agencies to prevent abuse and have a system with access to who's buying what and how often, and then report it
- To check if there's something a customer is taking that could be lethal to them
- To make sure a customer is not going to multiple doctors
- To not let double doctoring happen
- To keep track on computers where a customer is getting prescriptions filled and how often
- To make sure that the customer knows how to take the drugs
- To have a computer system to check that customers are not double doctoring
- To follow prescriptions
- To have access to customer's drug history across Canada
- They have a good part in controlling abuse
- To make sure they don't make mistakes
- To make sure a customer is not filling the same prescription too often
- It's pretty high
- To be aware of abuse/misuse
- To be aware of abuse
- To take training on how to prevent abuse
- To provide guidance and watch out for abuse
- It's pretty important
- It's very important
- To not sell the drug if the customer is abusing it

Part 4

The following are some of the duties of a pharmacist. In your opinion, which THREE are the most important duties for a pharmacist?

	Total Number of Votes
a) Advising or counseling patients about medication, side-effects, and interactions with other medication	360
g) Talking with doctors to resolve drug-related problems	271
c) Dispensing the medicine	231
d) Checking or directing their technicians (or assistants)	95
e) Doing research for patients	82
b) Resolving insurance problems	32
f) Running the business (ordering, managing staff, and so on)	30

Part 5

On a scale of 1 to 5, where 1 is 'No Influence' and 5 is 'A lot of influence,' how much do each of the following influence your opinion of the pharmacist?

	Average	Standard Deviation	Count
3. The expertise of the pharmacist	4.6	0.7	388
1. Friendliness of the pharmacist	4.4	0.9	387
2. How well the pharmacist knows you and your history	4.1	1.0	388
4. Whether the store offers a reward program or not (ex: Optimum or Air Miles)	2.1	1.3	385
5. Whether the store sells tobacco products or not	1.5	1.0	387

Evolution THROUGH Revolution

CHRYSALIS' AREAS OF EXPERTISE:

Strategic Planning and Innovation

Go beyond traditional strategic planning to create breakthrough solutions with the commitment and support of all key stakeholders.



The Chrysalis Strategy

- research the needs of all key players (customers, employees, members, owners, etc.)
- ensure buy-in by involving and engaging key players
- produce breakthrough win-win-win results with our **Genesis** Breakthrough Facilitation Process
- use a balanced scorecard approach to produce a detailed timeline with clear accountabilities and responsibilities
- build in people systems to support the changes
- simplify/communicate strategy using a strategy map

Implementation

Building systems and people to operationalize your strategic plan.



Systems Consulting

Sculpting the people systems that drive behaviour and corporate culture to deliver the results you want

Personal Leadership

Only by mastering personal leadership can you realize your full potential as a leader



Growing Your Team

Producing high-performing teams through customized training, facilitation and coaching, and effective conflict-handling strategies.

Life-Work Balance

Proven results targetting both symptoms (stress) and root causes (corporate culture and leadership)



The Discovery Program

Get absolute clarity on your core values and purpose, and map your personal strategy and vision

Relevance Coaching

Unlocking your personal potential.

Stress Elimination Technology™

95% of participants reduce their stress levels, and absenteeism has been reduced by more than 27%

