

## COMMENTARY

# Is It so Difficult to Implement Cognitive Services in Spanish Community Pharmacies?

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The answer is yes.

In the same way that the concept of primary care has been modernised, changes have been made to the concept of pharmaceutical care. This “new” concept widens the activity of dispensing treatment, to following these up, the performing of disease prevention tasks and the development of activities that will have an effect on the maintenance of the health of the population. The cognitive services referred to in the study by Gastelurrutia et al<sup>1</sup> are included in the field of pharmaceutical care in community pharmacies.

The development of cognitive services in community pharmacies has been difficult due to several problems which are not exclusive to Spain, as they also arise in other countries. It has to be taken into account that the majority of publications on the subject of cognitive services have been in scientific journals in the field of pharmacology, which are not read by doctors. For this reason, it is important to note the study by Gastelurrutia et al<sup>1</sup> in the area of primary care, since changes in pharmacy services also affect the work of the doctors.

It is worth taking the time to evaluate the situation of cognitive services in community pharmacies at an international level.

One example is in Sweden<sup>2</sup> where pharmacy is organised using a governmental public model. Westerlund et al<sup>2</sup> identified the lack of human resources, budget cuts and the need for organisation changes, as major problems in the implementation of cognitive services in pharmacies, as well as the adjustment the universities would have to make to the teaching aspects.

Also, similar difficulties were encountered in Canada,<sup>3</sup> associated with the lack of human resources and financial payments for activities required for cognitive services in pharmacies.

As regards the United States, where the organisational model is predominantly private and where it is possible to obtain prescribed drugs in places other than pharmacies themselves, it seems that there is an increasing interest in the development of pharmacy cognitive services. In this

## Key Points

- Qualitative investigation methodology enables complex phenomena that occur in the health setting to be looked at in depth.
- Cognitive services in the community pharmacy could lead to a change in the collaboration with the doctors, which could affect patient care.
- Knowledge of the barriers to implementing cognitive services in community pharmacies allows possible solutions to be identified, which must be approached from different fronts.
- Research studies need to be carried out that will report not only the barriers that affect the implementation of cognitive services in community pharmacies, but also on their performance.

context, it is an activity that is almost always financially reimbursed by private or public insurance.<sup>4</sup>

Before implementing services, it is necessary to establish if it is really worth the trouble, and what might be its clinical and economic impact.

While attempting to study the effect of cognitive services associated with diabetic patient education, the Ashville<sup>5</sup> study demonstrated that the development of cognitive services by pharmacists in patients with diabetes mellitus improved the clinical results of these patients.

On the other hand, there are economic studies that predict that the balance of the effect of cognitive services in the pharmacy could be positive, the savings exceeding the investment required for them.<sup>6</sup>

The study by Gastelurrutia MA et al<sup>1</sup> reflects the difficulties in providing cognitive services in the context of community pharmacies in Spain, from the perspective of the pharmacist. Reading this article enables us to reflect on the

possibility that these services could offer, by achieving a closer collaboration between doctors and pharmacists.

As regards the methodology used, it has to be understood that the qualitative investigation allows the how and why of the phenomena to be studied in the actual context in which they occur. The use of qualitative investigation methodology is adequate for the objectives that the study by Gastelurrutia et al<sup>1</sup> try to achieve, and it offers the possibility of looking in depth at the real barriers, which, once known, are the first steps in trying to improve the current situation. This study provides us with a concrete perspective, which is required to broaden the perspective of the other players involved, which are the users and other health professionals. It is also essential to develop further studies that will allow the impact of cognitive services in pharmacies to be evaluated in order to advise on the most worthwhile options in our context. It will continue being a challenge for pharmacists to establish the value of the services they can offer.<sup>4</sup>

## References

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**TABLA  
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Subjects	Development of Different Aspects	Evidence	Response Clarifications	Results Expected on This Subject
Professional functions and objectives	Current function (activity), and that desired in the future, of the community pharmacist, whether a pharmacy office (PO), owner, a member of staff of a PO or a "strategist" (opinion leader). Current function (activity) and that desired in the future, in the community pharmacy. Objectives that must be included/are present in projects associated with CSCP (or not). Objectives of the projects in themselves. Pressure to make changes (internal and external)	Expectations and directions for the change. Do the objectives of the project coincide with particular professional objectives or with the personal objectives of the participants?	How these objectives and expectations affect the attitudes to change and the success or failure of the change in the role of the pharmacist and in the community pharmacy practice	To identify whether the objectives of the different interviewees are in agreement amongst themselves or whether there are contradictions. To analyse the impact that this could have on the change process. To identify if the informants felt the need to change, either (by, due to) external forces, internal forces or both of those together
Experiences with dissemination and implementation	Experiences where it has been tried to implement (and disseminate by the strategists) programmes or services with CSCP	Factors which affected this process and influenced whether this was a success or a failure	How these programmes/CSCP services should be established differently in the future (maintenance or perpetuation in time of this new practice)	This subject provides the variables required for the future development of a model for a change in practice, incorporation the aspects of the following 2 subjects
Strategies of/for change	Experiences associated with change in daily practice as regards the provision of a new service or be part of a project	Which type of behaviour or practice will the project attempt to change? Who leads the change and what processes should take place in this?	The different aspects that might lead to success and those that might lead to failure of the change strategies used previously. How could they have been done differently?	To identify change strategies that have been used in the past, using the Borum classification. Is any particular strategy, supported by any group of interviewees? This could be used to develop future strategies
Structure networks	Which people are involved in the implementation and dissemination of new services or programmes? A description of the relationships between these people	With whom to the pharmacists interact and how. How, and in what sense each agent is important in the pharmacy practice change process	Description of the "structure" or organisational aspects of the profession. To establish the rules of the game (their field of activity) for the key agents and describe their relationships (inter-relationships)	Understanding who are important in CP, how to interact with them, and the implication of these aspects in the change process in pharmacy practice
Financial aspect	Description of the feelings on the financial aspects of the pharmacy. Description of the impact that the provision of CSCP or the participation in different projects have on the economy of the pharmacy.	How can the professional aspects be aspects	The attitude of the interviewees on the financial aspects that might affect their involvement in CSCP	The understanding of the perceptions, of the interviewees, of pharmacy as a business (it is an entity separated from the professional side: how do they interact?). To identify the perceptions, of the interviewees on the impact of CSCP on the economy of the pharmacy

CSCP indicates pharmacist cognitive services in the community pharmacy.