Pharmacy, Pharmaceuticals and Public Policy: Solving the puzzle

Abstract

Increasing pressure on healthcare demand and delivery has resulted in the development of new roles and services for pharmacists. As current models of pharmacy practice continue to be evaluated, pharmacists must be involved in identifying new areas that may require research. In order to do so, the current vision of the future of pharmacy practice is discussed in this commentary. Issues such as adequate funding, professional competency and building strong interprofessional relationships are still identified as major barriers to change. These barriers have been grouped into the themes that form a conceptual model of the factors affecting the future of pharmacy practice, which have led to the development of key questions for the future.

Keywords

Future; pharmacy practice; pharmacy practice research; health policy; public policy; pharmaceutical policy

Introduction

Changing population demographics have resulted in an increasing pressure on healthcare demand and delivery worldwide. These changes have led to challenges in the management of people, especially those living with long term conditions. In order to adapt to these challenges, there have been changes in the healthcare workforce, resulting in the development of new roles and services for pharmacists. ¹

It is said that effective medicines management and the expanding roles of pharmacists need to be coupled with organized technology infrastructure, along with support from professional training and ethical, legal and regulatory frameworks. ²,³ Evidence-based policymaking determines the funding priorities within the healthcare system. In order to firmly establish the necessity of the pharmacy profession, it is vital to show evidence through research that the adapting roles of pharmacists add value to the healthcare system.² At present, pharmacy practice models are and will be continuously evaluated. For these evaluations to influence changes in policy, it is pertinent that practicing pharmacists actively participate in research to evaluate the relevancy of the services they deliver and to help identify new areas that may require research.² These new areas for example, could be novel mechanisms by which pharmacists could deliver patient care. However, in order to make these projections, the current vision for the future of pharmacy must first be discussed. Therefore, the aim of this commentary is to discuss the future of pharmacy and present a conceptual model leading to questions. Answering these questions could help in solving the puzzle of how the pharmacy profession operates in a broader public policy context and its future role in improving healthcare efficiency.

Future of pharmacy: current vision
In response to budget cuts and an increase in demand for medical attention in the population, evidence from the literature suggests that the pharmacy profession provides an accessible and supportive environment to consumers. As a result, pharmacy practice is moving away from a dispensing-based to a more service-based model for healthcare delivery. Increased collaboration between healthcare professionals in primary and secondary care is enhancing patient-centered care by redistributing the workload so it is more tailored to patients’ needs.

Given that healthcare provision is no longer predictable or immune from disruptive change, there are many factors that significantly increase the scope for the future. However, issues such as adequate funding, remuneration and time constraints are still bigger barriers that are difficult to change. In addition, this has led to some pharmacists believing that pharmacists themselves are ultimate barriers to change in pharmacy practice, whilst others believe that there needs to be a bigger emphasis on professional competency, enhanced leadership skills and a push towards organizational change. This shows that firstly, there is a need for there to be system-wide understanding of the scope of a pharmacist, followed by an overhaul in the support structure in place that can be used to define the role of the pharmacist within the healthcare system as a whole. Overall, studies on the future of pharmacy practice agree that the future of the pharmacist in practice is that of a service provider. However, in order to develop this future vision, there is a need for consistency in developing roles and strong interprofessional relationships between pharmacists, other healthcare professionals and key stakeholders.

The need for sustainable growth of pharmacists’ roles and skills is key to the development of the pharmacy profession. In this context, some studies have focused on workforce adaptation and mapping, whilst others have looked at service provision and evaluation. This highlights the need for a clear and concise definition of what is meant by the term ‘future of pharmacy practice’.

The need for a conceptual model

Although there are multiple visions for the future of pharmacy practice, they lack clarity due to individual interpretations of the term ‘future of pharmacy practice’. A clear and concise definition could be achieved and enhanced by the development of a conceptual model, based upon that of Scahill et al. (2017), but with a greater focus on the future.

Other factors such as the use of technology and migration patterns of the population must be considered when mapping for the future. Conceptualizing these barriers in the form of a model which provide points for discussion and ultimately embracing these advances could bring about change in the future.

The factors contributing to the future of pharmacy practice discussed can be viewed at in a narrow or broad manner, depending on the context in which they are required. Narrow concepts include those such as workforce patterns, funding, service provision and service evaluation. These concepts can be encompassed into broader themes that take these concepts into consideration when looking at the health system as a whole. This model is based on these broad themes, which have been categorized by the authors based upon
their insights and experiences. In this particular model, the emphasis remains on pharmacy practice as the central point through which key themes relate. The themes that have been identified are; pharmacy as a key stakeholder in the healthcare system, pharmacy practice and the role of pharmaceuticals, pharmacy and public policy.

Figure 1: A conceptual model of the factors influencing the future of pharmacy practice

**Pharmacy as a key stakeholder in the healthcare system**

Concerns about the sustainability of healthcare expenditures have fueled interest in the expanding roles of pharmacists in the healthcare system, a role which pharmacists are well-suited to with their extensive training and expertise. Quality improvement objectives that
provide remuneration based on the quality of services provided show that the quality of pharmacy services are improving. This could go one step further, as in the case of the Netherlands, where there are quality indicators for all sectors of healthcare, bringing pharmacy onto the same level of discussion in healthcare decision-making. In addition, use of the Accountable Care Organization (ACO) model in the United States suggests that greater integration of pharmacy services in the management of safe, effective use of medicines could lead to overall costs to patients and insurers being reduced.

Not only are strong relationships between commissioners and local pharmaceutical committees important, open dialogue with doctors, nurses and allied healthcare professionals are just as necessary to drive the future. Ultimately, shifting responsibilities and tasks from doctors to other healthcare professionals is dependent on the context in which they are implemented and on the reactions of all those involved in these changes. Therefore, this relationship between pharmacy and other healthcare professionals needs to be defined before it can be developed further.

Pharmacy practice, pharmaceuticals and economic efficiency

There is a need to balance expenditure between spending on pharmaceuticals and remuneration for the delivery of pharmacy services. On one hand, managing drug expenditures and costs could reduce financial access and distribution barriers, such as through drug pricing transparency and generic substitution mechanisms, therefore causing less of a financial burden. On the other hand, reducing the number of pharmacy-led services provided could further increase the strain on healthcare demand and contribute to the growth of parallel private sectors, with a long-term increase in cost to the system. As a result, it is key to strike a balance between these factors, which could be achieved by clear mapping of concepts for the future.

Pharmacy and public policy

Public policy could influence the way pharmacy operates and integrates with overall healthcare. The impact it could have on broader public and health agenda includes medicines optimization, medicines management, acting as an information provider for consumers, pharmacists and public health campaigns. According to Mossialos et al. (2015), policy documents highlight the increasing appetite for reconfiguring the responsibilities of the pharmacist profession. Furthermore, pharmacists need to prove that their skills and expertise add value, which in turn can underpin changes in practice, funding and ultimately, policy.

In addition, pharmacy already plays a key part in the public health needs of the population. In community pharmacy for example, there is emphasis on campaigns such as antimicrobial resistance, smoking cessation and alcohol awareness. However, community pharmacists are the only health professionals who are not primarily rewarded for delivering healthcare and are consequently under-utilized as public health professionals. Also, according to Babar et al. (2018), some pharmacists would like to see research into practice models that do not make a profit out of delivering pharmacy services, whilst others are more interested in research relating to patient outcomes. Furthermore, in the study by Mossialos et al. (2015), the authors also propose devising new remuneration and performance-based...
incentive mechanisms. Therefore, exploring how these possibilities can relate to and ultimately improve the healthcare needs of the population from the perspective of the pharmacy profession are vital.

Health policy, pharmaceutical policy and pricing policy

Globally, drug pricing varies from being government-led and managed to being set by pharmaceutical companies themselves. Regardless of how they are set, current policy initiatives such as drug pricing transparency has led to decreased monopoly of the market, improving patient accessibility to medication therapy. The importance of such transparency has been raised at the 72nd World Health Assembly, led by the World Health Organization, where member states have resolved to encourage public sharing of pricing and reimbursement information in order to ensure fair and affordable pricing around the world. Greater drug pricing transparency coupled with patient-centered, pharmacist-led services focused on medication therapy management could also play a role in lowering pharmaceutical spending. As a result, healthcare systems must respond to these changes in their models. This is to expand development into the future.

Re-defining and remodeling complex environments: Questions for the future of pharmacy

The themes discussed above have led to questions relating to future of pharmacy practice and for the further development of this concept. Re-defining and remodeling complex environments are not without their challenges. These challenges can be defined as from an individual, systemic and wider organizational point of view. For example, in England, there are many visions and new models of practice for the future of pharmacy that have been developed, little has been done to bind these together into a coherent narrative for the future roles of pharmacists within the National Health Service (NHS). In order to overcome the challenges discussed in this article, multi-collaborative research teams that have knowledge of organizational behavior and political sciences are necessary.

Key questions to explore based on the above themes could include:

- Other than the points mentioned above, what other contextual, intrinsic and extrinsic factors are needed to define the term ‘future of pharmacy practice’?
- How can the future relationship between pharmacy, healthcare and public policy be mapped out?
- Can a model for future pharmacy services to improve health-related outcomes be developed?

Conclusion

This article concludes that the pharmacy profession needs to invest in its future by answering key questions on the expanding relationship between pharmacy, pharmaceuticals and economic efficiency, healthcare and public policy. The answers to these questions can be found by overcoming current barriers to change, leading to the identification of further themes that can be used to develop a future model for pharmacy
practice. This model could then be used to inform challenging policy-making decisions within healthcare environments in order to improve health-related outcomes.

Funding

This research did not receive any specific grant from funding agencies in the public, commercial or not-for-profit sectors.

References


2. Babar, Zaheer-Ud-Din; Scahill, Shane; Nagaria, Raveena Amee; Curley LE. The future of pharmacy practice research – Perspectives of academics and practitioners from Australia, NZ, United Kingdom, Canada and USA. Res Social Adm Pharm. 2018. doi:10.1016/j.sapharm.2018.01.004


13. Mossialos E, Courtin E, Naci H, et al. From “retailers” to health care providers:
Transforming the role of community pharmacists in chronic disease management.


