Exploring the health consumers’ perspective on the burden of chronic illness and the role of community pharmacy in chronic illness management

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Key Findings

A mixed methods approach was used to explore consumer and carer perceptions of their chronic condition(s), and choices or preferences about how to engage pharmacy in their management. In total, 661 consumers and carers and 322 health professionals participated in one or more of the research stages from four regions of Australia.

1. Whole-of-pharmacy patient centred services are of prime importance to consumers and carers and influence pharmacy choice and loyalty, satisfaction, perceived quality of service and treatment burden. Consumers value and benefit from patient centred services that are holistic, individualised, respectful and empowering. All stages of the research confirmed the central importance of patient centred services, revealing that it can influence choice and loyalty of pharmacy. Pharmacy is a critical intervention point to reduce medication-related treatment burden through informative, respectful relationships, clear communication and consumer engagement. Education and training about the continuum of patient centred care and nature of treatment burden will be required to ensure a whole-of-pharmacy approach to service delivery.

2. A continuous and reliable supply of medication and high quality advice achieved through creative, personalised, responsive, flexible and proactive services is highly valued by consumers and carers. A primary need for consumers and carers was access to a continuous, safe and quality supply of medications. This was described from two perspectives: continued supply of prescription medications from the pharmacist (without visiting the doctor); and convenient medication supply from the pharmacy. There was a strong preference for pharmacists to continue supply of regular medications for a predefined period and for medications previously used to relieve symptom flare-ups. Other suggestions for convenient supply included expanding home deliveries and extending opening hours.

3. Pharmacy is a convenient, accessible and trusted location that can act as a health hub or central point for appropriate referral, access to other health professionals and timely multidisciplinary information. Consumers and carers were frequent pharmacy users, which was associated with treatment burden and highlighted the important role of pharmacy. Access to pharmacy services was a key priority, particularly in relation to pharmacy as a safe health space where consumers and carers could be connected to relevant information and services based on their needs. Pharmacy services acting as a central hub were seen as a strategy for directing people to the multitude of available community organisation resources and support programs that could assist them.

4. Pharmacy is well placed to prevent or limit burden for specific populations, particularly for younger people who are more willing to adopt new initiatives, for carers, frequent pharmacy users and individuals experiencing financial distress or high levels of burden. Several subgroups emerged as areas of opportunity where proactive pharmacy services could prevent or reduce treatment burden. These included younger people who were more likely to take up new services, middle-aged, low-income earners experiencing significant treatment burden, consumers with diabetes or an endocrine disorder and also carers, as recognition of their role and responsibilities was limited. Pharmacy is in a unique position to identify these groups and provide supportive and timely interventions if such initiatives are tailored to the specific needs of these populations.

5. Financial burden is inherently linked to medication use/non-use and in the absence of broader systemic changes can be identified and addressed by pharmacy. Affordability emerged as a key priority highlighting the need to decrease medication cost through low prices and prescription subsidies, maintain price consistency across pharmacies and develop responsive payment methods that alleviate financial stress. Financial burden was a key component of overall treatment burden with one-quarter of participants reporting that they delayed or neglected to purchase prescribed medication due to cost. Affordability influenced loyalty to a pharmacy, and cost was also a barrier to consumers and carers accessing new pharmacy services.

6. Pharmacy services need to be tailored to economic, personal, cultural and geographical circumstances of their customer base, as prevailing needs and values differ depending on the environment in which the pharmacy is accessed. No single model of pharmacy service will address the diverse needs of consumers and carers across Australia. Ideal pharmacy service did not reflect a particular model, but focused on timely and reliable coordination of relevant services within a patient centred and responsive relationship that was associated with pharmacy loyalty.

Overall, this research revealed opportunities for pharmacies to support chronic condition management if pharmacy staff prioritise patient centred care and tailor services to the individual needs of consumers and carers.