

Collaborative Working Relationship of Physician and Pharmacist: Reality and Expectation

by

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Institute of Chinese Medical Sciences

University of Macau

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Abstract

In Macau, physicians and pharmacists exercise to prescribe and dispense medications respectively along with their traditional roles with distinct administration. As the increasing amount of new medications and the enhancing complexity of medication therapy, physicians are facing the challenges from rapid advancements and high technology in medicine and pharmacotherapy. The increased utilization of medications scaled up with a greater probability of adverse drug events which caused by the inappropriate use of medications or the medicine itself. As for the better qualified health care outcome in Macau, physician-pharmacist collaboration working relationship (CWR) is a valid model to fulfill this goal, which is to fully utilize the professional knowledge of pharmacists involving in patient's medication therapy.

This study had divided into three components which were literature reviews for the concept of CWR and the development of clinical pharmacy over some developed countries, data collection from two self-administered surveys for physicians and pharmacists who work in the hospitals of Macau, discussion and suggestion according to the result for further development of CWR in Macau. Through the literature reviews, the discrepancy perception of pharmacist's roles in CWR would be the major barrier that impeded their collaboration.

Furthermore, the surveys developed in this study contained four parts. The first part was to understand the current collaboration status of hospitals in Macau. The second part was to measure the perception of pharmacist's roles between physicians and pharmacists, and identify pharmacist's roles through their expectation. The following part explored the barriers and opinions of developing CWR in Macau. Finally, Physician-Pharmacist Collaboration Index (PPCI) would be used in the study

for exploring the strength of their collaboration.

66 out of the 120 physician surveys and 18 out of the 30 pharmacist surveys were returned, giving a response rate of 55.00% and 60.00% respectively. 33.33% of physicians and 77.77% of pharmacists claimed they had collaboration with the other professional at least once a week. The result showed that collaboration working relationship was in an early stage at hospital settings in Macau. The discrepancy of pharmacist's roles was quite huge and the study identified 6 major roles of pharmacist for further development of pharmacy profession. Barriers in the process of CWR were increased workload, clear collaboration statement and that pharmacists were lack of clinical experience. The result of PPCI of physicians and pharmacists were 47.14 and 51.14 respectively. The suggestion contained three directions for further development of CWR in Macau. The first direction was to concern on the infrastructure, systems and support of CWR which included pharmacy law, hierarchical management system, accreditation and hospital bylaws of pharmacist's clinical practice. Secondly, communication and shared activities were required, which contained the accessibility of patient information for pharmacists, academic seminars and researches led by pharmacists, and establishing the coincident perception of pharmacist's roles. Building professional relationship were the final direction which mainly concluded the supports mentioned above, and then establishing trust between physicians and pharmacists should be the foundation of the development of CWR.

Keyword: Physician; Pharmacist; Collaboration working relationship; Pharmacist's role; Macau; Health care outcome; PPCI

摘要

澳門醫院目前仍舊按照傳統的醫療角色分工運作,醫生主要負責為病人診斷和開處方,而藥劑師則按照處方負責調配藥物。醫生與藥劑師之間的合作交流主要圍繞處方中所出現的問題而非藥物相關的問題。當全球新藥上市的數量不斷增加且不斷創新的醫療技術出現,醫生需要面對來自新技術和知識的挑戰及認知。對於需要服用多種藥物及多方長期監察身體變化的老人和長期病患,藥物治療的複雜性就會相對增大,而藥物的使用率增加會相對地帶來更多的藥物不良事件的發生。因此,為了澳門的醫院能獲得更高質量的醫療產出,醫生與藥劑師的合作關係(CWR)模式是通過更確切地運用藥劑師的專業知識參與病人的藥物治療過程,為病人提供更全面的醫療保障。CWR 的提出是基於原有的人力資源上通過合理運用從而達到更高質量的產出。

本文劃分為三個部分:第一部分為文獻綜述,瞭解 CWR 模型的概念,其合作形式及影響因素,此外還包含臨床藥學在發達國家及地區的發展;其次為,本文的研究方法及過程,包括問卷設計及數據收集等,而調查對象為澳門的醫院醫生及藥劑師;最後一部分則根據所收集的數據進行討論分析,並對 CWR 未來在澳門的發展提出建議。通過文獻綜述發現,醫生與藥劑師對醫院藥劑師的角色定位的差異是造成 CWR 發展的一大障礙。因此,問卷調查的內容分為四部分:首先,收集醫院醫生及藥劑師的合作現況資料;其次為醫生及藥劑師對醫院藥劑師的角色定位;第三部分為 CWR 在澳門發展可能遇到的障礙及影響的建議。最後則運用 PPCI 模型測量合作強度。

本文所得的調查結果獲得 66 份醫生及 18 份藥劑師的有效問卷,回收率分別為 55.00%及 60.00%。只有三分之一的醫生及超過四分之一的藥劑師會與對方合作至少一星期一次。澳門醫院目前的醫生與藥劑師合作關係十分薄弱。醫生與藥劑師對藥劑師的角色要求差異很大,而且普遍認為藥劑師缺乏臨床經驗。這都對

CWR 的發展產生很大的障礙。PPCI 模型測量的結果中，醫生表示他們和藥劑師的合作強度值為 47.14，而藥劑師則表示其合作值為 51.14。本文對此提出三個發展方向的建議：一，CWR 在澳門的發展基礎，包括澳門藥事法律及醫院制度對藥劑師的臨床實踐管理，藥劑師的分級制度及其資格審核；二，溝通及互動，包括藥劑師對病人資料的可獲得性，組織藥劑師投入更多的學術研究及一致的醫院藥劑師角色認知；三，建立專業穩定的合作關係，獲得對方的信任為推動 CWR 的重要基礎。

關鍵詞：醫生；藥劑師；合作關係；藥劑師角色；澳門；醫療產出；PPCI



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