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## Comparative Analysis of Rural Community Pharmacy Practice in Western Australia in 2002 and 2006

Yosi Wibowo, Constantine G Berbatis, Andrew Joyce, V Bruce Sunderland

### ABSTRACT

**Background:** Data are lacking on the characteristics of rural and remote community pharmacies in Western Australia (WA).

**Aim:** To analyse characteristics of community pharmacies and pharmacists in rural WA in 2006 and to compare these with the results of a national survey conducted in 2002.

**Method:** A survey was conducted in 2006 using a questionnaire similar to that used in a national survey conducted in 2002. The questionnaires were mailed to all 103 rural pharmacies in WA, of which 51 were returned (response rate 50%). Chi<sup>2</sup> tests were used to compare the 2002 (rural WA) and 2006 data.

**Results:** Pharmacist demographic characteristics were mostly unchanged. A trend towards increased employment of younger female pharmacists was found in 2006. 60% of respondents devoted less than 5 hours per month to continuing pharmacy education in both surveys. There were no significant differences in the characteristics of pharmacies in terms of PhARIA location, setting, banner group membership, inclusion of counselling areas, operations, trading hours and annual turnover. Pharmacies accredited by the Quality Care Pharmacy Program (QCCP) increased from 42% in 2002 to 86% in 2006.

**Conclusion:** Many characteristics of rural WA pharmacies and pharmacists in 2006 were similar to 2002. Increased QCCP accreditations indicated higher quality assurance of rural pharmacy practice. The low uptake of 'forward pharmacy' in rural pharmacies warrants further evaluation.

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### INTRODUCTION

People residing in rural and remote Australia constitute 32% of the population.<sup>1</sup> The socioeconomic status and health indicators of rural populations in Australia are poorer with less access to primary health professionals and services than their urban counterparts.<sup>1,2</sup> Access to primary care is essential to the function of health systems nationally.<sup>3</sup> Health services and rural studies in Australia have shown that community pharmacists rank second to doctors as the most frequently consulted health professionals and have high regard in rural communities.<sup>4</sup> The shortage of doctors in primary care, especially in rural areas, requires that efforts are made to retain pharmacists and enhance collaboration with doctors to ensure access to rural pharmacy services and to minimise inequities with urban populations.<sup>7,8</sup> To clarify decision-making for this process, it is important to identify characteristics of pharmacies and pharmacists and how

these have changed over time.<sup>9-11</sup> A UK national study found that increased turnover of National Health prescriptions, use of a private consultation area and small pharmacy groups were associated with the provision of medication reviews and compliance assessment.<sup>12</sup> A study in New Zealand found that pharmacies with high prescription numbers and in a banner group were more likely to have higher rates of extended service provision.<sup>13</sup>

Studies of community pharmacy practice in Australia have reported certain characteristics of pharmacists and pharmacies to be significantly associated with the time spent on patient consultation and a range of non-dispensing health-related services.<sup>9,10</sup> The Australian national pharmacy database survey conducted in 2002 which included urban and rural pharmacies reported that the inclusion of a 'forward dispensing' area was a significant predictor of consultation services.<sup>10</sup> 'Forward pharmacy' referred to a private unenclosed front-of-counter seated area in the pharmacy for prescription receipt, and counselling on medicines or health. Pharmacies that were large, owner or partner operated, with membership of a banner group and accredited by the national Quality Care Pharmacy Program (QCCP) were associated with providing consultation services.<sup>10,11,14</sup>

Rural populations rely on community pharmacies for many primary health services. A recent study highlighted that access to emergency and minor ailment medications was more difficult for residents in non-pharmacy rural towns.<sup>15</sup> There was under-utilisation of rural pharmacies to provide health promotion advice to their communities.<sup>16</sup> Rural pharmacies have reported a preference for written rather than verbal information compared with urban counterparts.<sup>17</sup> The availability of enhanced pharmacy services in rural community pharmacies in Western Australia (WA), with the exception of weight management, has not increased from 2002 to 2006. Barriers included time constraints, shortage of pharmacists and a lack of locum pharmacists.<sup>18</sup>

It is important that community pharmacies continue to play a key role in rural health service delivery and that their service provision is enhanced. This study aimed to analyse characteristics of community pharmacies and pharmacists in rural WA in 2006 and to compare these with the results of a national survey conducted in 2002.<sup>11</sup>

### METHOD

A questionnaire was developed in 2006 to collect data on the characteristics of pharmacies and pharmacists in rural WA. The 2002 data were extracted from the files of the Australian national pharmacy database.<sup>11</sup> This national study was a random sample of the Pharmacy Access/Remoteness Index of Australia (PhARIA) 1 and a census sample of community pharmacies classified PhARIA 2 to 6.<sup>19</sup> The PhARIA classifies pharmacies into 1 of 6 groups (1 = highly accessible to 6 = very remote).<sup>19</sup>

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