Exploring pharmacists’ expectations of competent family physicians

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Purpose: Interprofessional collaboration is an integral part of the practice of medicine, including family medicine, and has been included in both the CanMEDS and College of Family Physicians of Canada (CFPC) competency frameworks. Defining one’s own professional competencies is an important first step in effective interprofessional teamwork. The CFPC asked their members for input when developing the competency-based objectives now used as the standard to define competence for the purpose of certification in family medicine. Effective collaboration requires that a profession not only clearly describe its own roles and responsibilities to other professionals but also have an awareness of other professions’ competencies in relation to their own. Pharmacists, like family physicians, have developed their own set of competencies and are one of the professions family physicians are most likely to collaborate with on a regular basis. To date, there has been little work undertaken on pharmacists’ or other professions’ expectations or knowledge of family physicians’ competencies and how this may inform the interprofessional collaborative relationship. The purpose of this research project is (1) to develop a definition of family medicine competencies (set of knowledge and skills) from the viewpoint of collaborating pharmacists and (2) to compare this definition to that already defined by the CFPC. Methods: A Delphi survey method will be employed. A list of pan-Canadian pharmacists will be identified through purposeful sampling. A web-based Delphi survey has been developed in an iterative manner using the CFPC framework of core competencies in family medicine, an extensive literature review was undertaken, and input from experienced family physicians at Memorial University was obtained. Questions focus on the disease states, problems and clinical situations, important areas of clinical decision making and judgment, and problems or situations requiring improved collaboration to improve patient care. The survey will be administered online, and the first round Delphi survey results will be analyzed using thematic and descriptive analysis and rank ordering of competencies. This will be followed by semi-structured telephone interviews and a revised second Delphi survey questionnaire. This process will continue until consensus is achieved. Results: Preliminary results of the process completed to date will be presented.