

# Comparing Practitioner Perspectives in Rural versus Urban Settings

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## BACKGROUND

- Healthcare disparities are widespread throughout the United States (US)<sup>1</sup>
- Access to healthcare services is a major barrier in South Dakota<sup>2</sup>
- Quality issues and healthcare disparities are particularly apparent in preventative care; although where disparities exist, the most opportunity for improvement is seen<sup>3</sup>
- Practitioners may have differing views on healthcare barriers and facilitators
- Most recent studies on rural and urban health have been focused on work conditions, services provided, and access to care<sup>1</sup>

## OBJECTIVE

- The aim of this project was to compare practitioner perceptions of the barriers and facilitators to providing patient care as identified by rural versus urban practitioners in South Dakota

## METHODS

### Participants

- Strategic recruitment method
- Rural and urban practicing pharmacists

### Interview

- 1-1.5 hour individual elicitation interviews
- ~ 3 hour focus group sessions
- Semi-structured format with interview guide
  - Current services offered
  - Barriers and facilitators to care in patients with diabetes and cardiovascular disease
  - Key messages to other healthcare providers and third party payers

### Data Analysis

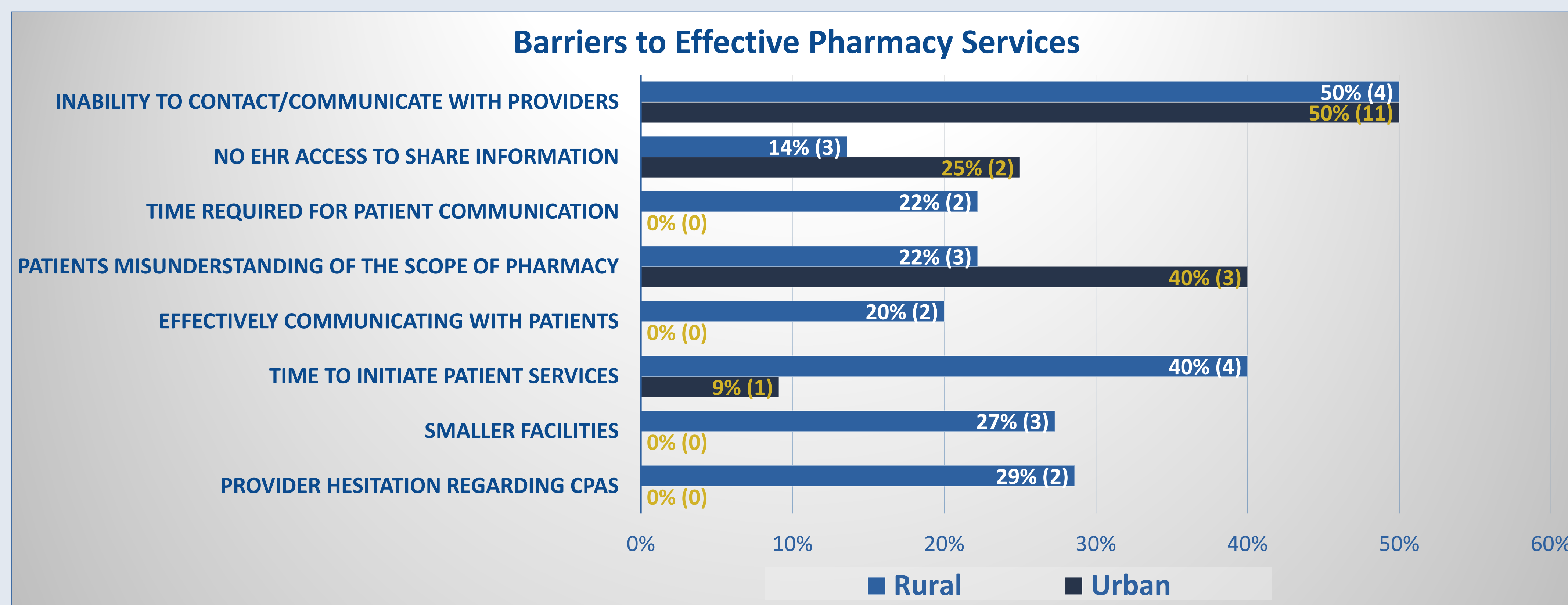
- Interview audio recorded and transcribed
- Transcripts coded and thematically analyzed and reviewed for key quotations
- Descriptive statistics were compared for urban and rural respondents using SPSS version 26
- Respondents that did not answer the question were excluded from comparison for the specified questions

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## RESULTS

Demographics	Urban (n=21)	Rural (n=12)
<b>Provider Type</b>		
Community Pharmacy (n = 30)	60% (18)	40% (12)
Hospital Pharmacy (n = 3)	100% (3)	0% (0)
<b>Medication Therapy Management (MTM)</b>		
<b>How and when services are offered</b>		
When prompted by third party programs	33.3% (2)	57.1% (4)
<b>Prevention from offering MTM services</b>		
Lack of time	20.0% (1)	44.4% (4)
<b>Medication Adherence</b>		
<b>Medication adherence monitoring</b>		
Yes	80.0% (8)	90.0% (9)
<b>Facilitators to Pharmacy Services</b>		
<b>Current and future facilitators of initiating pharmacy services</b>		
Good quality support staff	9.1% (3)	0.0% (0)
Frequent communication with other providers	6.1% (2)	0.0% (0)
<b>Motivation</b>		
<b>Patient motivation tactics</b>		
Forming close relationships with patients	0.0% (0)	28.6% (2)
Showing interest in helping them	0.0% (0)	28.6% (2)
<b>Services</b>		
<b>Services the patient population needs</b>		
Medication adherence	17.4% (3)	0.0% (0)

\* Respondents that did not answer the question were excluded from comparison for the specified question



## DISCUSSION

- The results indicated that time required to provide services was a key barrier to pharmacist provided care which is consistent with other recent studies<sup>4,5</sup>
- The profession of pharmacy is expanding its involvement in healthcare services but few studies have been done to analyze the facilitators and barriers for the access to such services<sup>6</sup>
- Key facilitators to be expanded upon
  - Good quality support staff in urban areas
  - Frequent communication with providers in urban areas
- Key barriers to be addressed
  - Effective and efficient communication
  - Time to initiate patient care services
  - Advocating for the pharmacy profession
- Pharmacists in both urban and rural settings reported patient misunderstanding of the scope of pharmacy. This difference was more pronounced in urban settings. This may be attributed to the reported close relationships between pharmacists and patients in rural settings
- The results indicated time was a key barrier in rural areas impacting patient communication, initiating patient services, and offering MTM services. Less urban pharmacists reported time as a barrier which may be due in part to access to good quality support staff
- Rural pharmacists reported experiencing more provider hesitation when attempting to implement CPAs. To date a difference between the reporting of resistance in rural and urban settings has not been studied

## NEXT STEPS

- Increase awareness of pharmacy-based patient care services already accessible to the public
- Further research to identify the extent to which facilitators and barriers influence the ability to initiate and sustain pharmacy services
- Provide support to pharmacies for overcoming barriers and leveraging facilitators to increase availability of pharmacist-provided services

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