



AN OVERVIEW OF ENHANCING NURSE-PHARMACIST COLLABORATIONS, LEADING TO BETTER PATIENT CARE AND SAFETY

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Abstract:

Understanding the accumulated expertise across professions like pharmacists and nurses facilitates the implementation of reforms that promote enhanced collaboration and ultimately enhance the standard of patient care. The objective was to investigate the impact of Nurse-pharmacist partnerships on enhancing patient care and safety. Interprofessional teamwork in healthcare is a crucial factor in advancing patient safety. There is a scarcity of studies about the collaboration between nurses and pharmacists. In order to streamline operations, it is essential to foster a shared understanding, which may be achieved by analyzing the viewpoints of the many professional groups involved in the collaboration.

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Introduction:

Pharmaceutical care (PhC) refers to the direct and accountable delivery of medication-related care with the aim of attaining specific goals that enhance a patient's quality of life. The definition provided by Hepler and Strand in their 1990 paper "Opportunities and duties in PhC" is widely recognized as the most well-known definition for PhC [1]. Following the introduction of this idea, pharmacists have assumed a crucial position in global healthcare systems by delivering services and specialized guidance to patients in community pharmacies [2].

Enhancing the professional discourse among healthcare practitioners has led to tangible advantages for patients by improving their medication and preventing potential harmful drug responses. The collaboration between physicians and nurses is crucial in this context. In addition, a qualitative technique was employed to examine the interactions between physicians and pharmacists in the outpatient sector [3].

On the other hand, it may be inferred that inpatient treatment entails a notably high level of teamwork, particularly between pharmacists and nurses, in addition to pharmacists and physicians. This will result in a higher quantity of pharmacists present in the hospital wards, hence amplifying the importance of cooperation between pharmacists and nurses. Globally, the participation of pharmacists in the treatment team, working together with nurses, has previously been recognized and examined in several contexts [4].

Review:

In order to maximize the advantages for the patient resulting from the cooperation, it is important to examine the attitudes, obstacles, and possibilities for the interprofessional collaboration between nurses and pharmacists. It is important to maintain contact with the pharmacist. Being exclusively on the ward entails a partial loss of one's foundation or origins. Then, you may cease incorporating advice from your colleagues in the pharmacy and instead only collaborate with physicians. It is possible that you also accept their views, although this is not intended. However, it is advisable to approach the matter from a different perspective [5]. As a consequence, the pharmacy profession has experienced an increase in both its rank and reputation [2]. In Poland, similar to the majority of nations globally, community pharmacies are readily accessible in both urban and rural regions, and individuals are not required to schedule an

appointment in order to consult with a pharmacist [3]. Based on the data as of January 10, 2022, Poland has a total of 11,911 pharmacies and 26,162 pharmacists [4]. These practitioners are therefore part of the medical field with unlimited entry, and community pharmacies are frequently the initial destination for people seeking assistance with minor complaints or early signs of sickness. The public holds pharmacists in high regard due to their high level of trustworthiness. According to a survey conducted in 2019, a significant majority of 90.4% of Polish individuals expressed their faith in pharmacists [5]. The professional group operates around the clock, 365 days a year, offering expert guidance and vital life-saving medications to patients. Pharmacists not only distribute medicine but also offer guidance and knowledge on the prevention and treatment of certain illnesses. Hence, community pharmacies have served as the primary entry point to the Polish healthcare system for an extensive period [6]. The primary objective of the clinical-pharmaceutical actions highlighted by the participants in our study is the implementation of prescription reviews. Participation in critical admission and discharge processes, for instance, is less probable to be executed, consistent with findings from prior investigations [7]. This might be attributed to the efficient execution of medication reviews, which can be conducted by the pharmacist independently of ward processes at more convenient times, particularly with the integration of digital patient information. The primary goal is to tackle the prescription level by working along with the physician, akin to pharmacists accompanying physicians during ward rounds, a point that was frequently addressed. Conversely, the provision of counseling and training for nursing personnel is commonly identified as a broad responsibility. However, the data obtained indicates that this activity is more commonly performed as a secondary task in daily life. There is a need for more comprehensive understanding of the collaboration between pharmaceutical and nursing fields, particularly in relation to medication information and personalized patient care. Given the close closeness of nursing personnel to the patient, the treatment of adverse medication events presents potential opportunities in this particular setting, as highlighted in our interviews. The purpose should be for the pharmacist to examine the patient situation from a theoretical standpoint, as described by the interviewers, and incorporate the pharmacological viewpoint as an extra one. However, the absence of patient-centeredness among pharmacists in their daily

clinical practice, as reported by both professional groups in our study, should not be overlooked. The pharmacist should acknowledge the nursing staff as partners and enhance collaboration to evaluate the therapeutic significance of his pharmacological activities in each patient's situation. Nevertheless, our study highlighted the need of hospital managements and resources as prerequisites for the successful implementation of interprofessional initiatives involving nurses and pharmacists. In addition, limitations such as the absence of rewards and limited opportunities for ward attendance were mentioned [5,7]. Multiple studies have demonstrated that collaboration between pharmacists and nurses has a substantial positive impact on clinical outcomes and enhances the quality of patient care [4,5,7]. Historically, there has been a strong emphasis on examining the connection between these two occupational categories, but the partnership between pharmacists and the nursing community has been overlooked [6]. It is noteworthy that the credentials of this professional group in Poland have greatly grown in recent years. Starting from 2016, nurses have been authorized to provide prescriptions for medications that include certain active ingredients. Additionally, as of 2020, nursing advice has been added to the list of guaranteed benefits. The nursing community's role was expanded in conjunction with the enactment of the Pharmaceutical Profession Act, which presented a chance to introduce Pharmaceutical Care (PhC) in Poland. Due to the acquisition of new skills, these two professional groups will have a growing significance in the Polish healthcare system and will exert a stronger influence on the patient's medication than previously. The collaboration between nurses and pharmacists is increasingly garnering notice. Multiple investigations conducted worldwide have proven the therapeutic advantages of collaboration between these two professional groups [8]. Poland is gradually moving away from the conventional gender norms that restrict the responsibilities of pharmacists and nurses to narrow and predefined activities.

As a result of the growing need for healthcare services, several nations have encountered a mounting array of difficult conditions including scarce resources, escalating healthcare expenses, and lofty patient expectations [8]. Interdisciplinary teamwork is essential for the effective functioning of any healthcare system. Empirical evidence from several nations has demonstrated that collaboration between pharmacists and the nursing community may substantially enhance the standard of patient

care [9].

Pharmacists, in conjunction with nurses, can effectively enhance the work of physicians, resulting in improved patient outcomes. Primary healthcare consultations including a nurse or a combination of a nurse and pharmacist led to a notable improvement in patients' adherence to medication [10]. A research conducted in Australia demonstrated the efficacy of fostering collaboration between community pharmacy personnel and those with nursing education in providing care for patients with mental problems. Within this pioneering initiative, their primary responsibility was the administration of patient medical records, overseeing their maintenance, and facilitating referrals. Meanwhile, the pharmacist's main task entailed the supervision and control of pharmaceutical substances. The collaboration between pharmacists and the nursing community, facilitated by effective communication, has proven to be advantageous and lucrative. This partnership enables the resolution of treatment discrepancies, thereby minimizing the likelihood of potential adverse effects and enhancing medication safety [11]. Furthermore, it was shown that collaborative participation decreased the occurrence of treatment mistakes and enhanced the precision of medicine administration. Research has demonstrated that collaboration within primary healthcare may enhance pain treatment, decrease resource utilization, and attain a high degree of satisfaction [11]. In their study, Schellack et al. found that the inclusion of nursing educators and pharmacists in antibiotic management programs leads to enhanced treatment outcomes and decreased antimicrobial resistance [12].

Toivo et al. (2019) observed that a collaborative approach using shared consultation failed because the team members lacked cohesion. In this partnership, nurses performed medication reconciliation and medication risk assessment, while the community pharmacist provided recommendations for prescription modifications based on medication review and tracked the resulting results. Regrettably, the physicians failed to carry out the pharmacist's instructions that had been explicitly agreed upon. The success or failure of a nurse-pharmacist partnership might be influenced by the absence of recommendations from physicians. It is observed that in community settings, nurses and pharmacists are strategically positioned to carry out multifactorial treatments that help streamline drug regimes and encourage clients to make changes in

their lifestyle. The dyads contribute diverse experience and talents to the team. Nevertheless, the absence of clearly defined roles and tasks within the team might negatively impact client care and professional identities, leading to interpersonal problems [13]. A separate research found that there was a deficiency in the coordination between nurses and pharmacists when it came to referring and counter-referring patients, particularly when nurses were involved in prescription medication. This phenomenon arises due to a lack of reciprocal interactions, insufficient community networking, and a low frequency of contact between nurses and pharmacists [14].

Conclusion:

Nurses, pharmacists, and hospital administration should acknowledge the enhanced significance of expanding their cooperation in relation to patient-centered services. Collaboration between logistical and clinical-pharmaceutical operations should be implemented during the drug application process, as recommended by the interviewees. Prior to addressing current obstacles, it is necessary to foresee a systematic approach that involves redefining some professional responsibilities. Collaborations between nurses and pharmacists in community settings enhanced illness care, mitigated adverse medication events, and decreased hospitalizations. The outcomes included prompt detection and resolution of pharmaceutical safety concerns, decreased waiting times for consultations with primary care physicians, and improved self-management abilities for chronic diseases in persons residing in the community. Research is necessary to enhance current processes and policies in order to continue cooperation, particularly in community settings.

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