

From Patient Involvement to Practice: Developing a Person-Centred Medication Consultation in Community Pharmacy

Tamara Kudusova^{1,2,3}, Malin J. Östbring^{4,5}, Sara Bremer⁶, Karine W. Ruud⁶, Helene Devold², Elin Bergene^{3,7}, Nils Espen Lilleheim⁸, Hege Sletvold^{*1}

¹ Faculty of Nursing and Health Sciences, Nord University, Namsos, Norway.

² Central Norway Pharmaceutical Trust, Ålesund, Norway.

³ Faculty of Medicine and Health Sciences, Norwegian University of Science and Technology, NTNU, Trondheim, Norway.

⁴ Pharmaceutical Department, Kalmar County Council, Kalmar, Sweden.

⁵ Department of Medicine and Optometry, Linnaeus University, Kalmar, Sweden.

⁶ Apokus, National Centre for Development of Pharmacy Practice, Oslo, Norway.

⁷ Central Norway Pharmaceutical Trust, Trondheim, Norway.

⁸ Patient Research Partner, Ålesund, Norway.

*Hege Sletvold

Background: Community pharmacists contribute to the management of long-term conditions through services such as medicines use reviews, adherence support, and patient consultations. Evidence indicates that such interventions can improve clinical outcomes and healthcare utilisation (1, 2). However, their impact may be limited by the nature of consultations, which are often brief and involve limited engagement with patients and their health concerns (2).

Objectives 1) To explore how patients can be actively engaged in communication about medication adherence, 2) to develop and pilot a course in person-centred communication for pharmacists, and 3) to develop and evaluate a person-centred medication consultation service.

Methods: This multi-phase study forms an ongoing PhD project and comprised three stages: 1) exploration of stakeholders' perspectives on involvement in medication-related communication; 2) development and piloting of a training programme in person-centred communication based on Motivational Interviewing (MI) (n=10 pharmacists); and 3) development and piloting of a medication consultation service delivered by three pharmacists with documented MI competence to 15 patients with cardiovascular disease using long-term medication (≥6 months). Outcomes included MI Treatment Integrity (MITI) scores, beliefs about medicines (Beliefs about Medicines Questionnaire, BMQ), adherence (Medication Adherence Report Scale, MARS-5), and qualitative interviews.

Results: The project identified the need for reassurance, confirmation, and a more holistic dialogue to support patient engagement in adherence communication (3). The blended work-integrated MI course enabled pharmacists to demonstrate person-centred communication skills. In the consultation service pilot, BMQ concern scores decreased, while adherence remained stable. Qualitative findings indicated increased reassurance, improved understanding of medication use, and patient-initiated follow-up and treatment adjustments.

Conclusions: Person-centred medicines consultations are feasible in community pharmacy when supported by targeted communication training. This project demonstrates a pathway from patient-informed needs to implementation and highlights the potential for expanding the role of community pharmacists in primary care.

Keywords: Community pharmacy; Person-centred care; Pharmaceutical care; Motivational interviewing; Medication adherence

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