

Medical Directors Survey

Pharmacy Sites

May 2005

CLINIC CHARACTERISTICS

_____ Percentage of time in direct patient care

1. Please make any corrections to the label below.

NAME AND ADDRESS

2. What is your title within this organization?

3. What is your discipline?

MARK (X) ONE ANSWER

- 1 Physician (MD or DO)
- 2 Dentist (DDS/DMD)
- 3 Physician assistant
- 4 Nurse practitioner
- 5 Certified Nurse midwife
- 6 Registered nurse
- 7 Chiropractor
- 8 Pharmacist
- 9 Other (*Specify*)

4. When did you begin working for this organization?

Month: _____ Year: _____

5. Direct patient care includes face-to-face contact with patients, as well as patient record-keeping, travel time connected with seeing patients, and communication with other physicians, hospitals, pharmacies, and other places on a patient's behalf.

Do you currently provide direct patient care?

- 1 Yes
- 2 No → GO TO Q6

→ A. (If you provide direct patient care) During a typical week, approximately what percentage of your work time is spent in direct patient care activities?

6. Which of the following categories best describes the ownership of this clinic?

MARK (X) ONE ANSWER

- A group practice
- A nonprofit community-based care clinic (run by a nonprofit board of directors)
- A community-based primary care clinic run by the health department or other government agency
- A community-based primary care clinic run by a hospital
- A community-based primary care clinic run by a university medical center
- Other (*Specify*)

7. How many clinics are in your network?

_____ Number of clinics

8. If this is a multi-site network, please answer the remaining questions only for this site.

At this site, how many patient visits do you have in a typical week?

_____ Number of patient visits in a typical week

STAFFING

9. Please record (1) the number of full-time equivalent (FTE) staff and (2) the number of current job openings for each of the clinician categories in this site.

Please include MD's and DO's in each physician category. Include both NHSC and non-NHSC clinicians.

Clinician Type	(1) Number of Current FTE Staff	(2) Number of Job Openings
1. General and Family Practitioner	_____	_____
2. General Internist	_____	_____
3. Pediatrician	_____	_____
4. OB/GYN	_____	_____
5. Psychiatrist	_____	_____
6. Other physician specialists	_____	_____
7. Dentist	_____	_____
8. Dental hygienist	_____	_____
9. Physician Assistant	_____	_____
10. Nurse Practitioner	_____	_____
11. Certified Nurse Midwife	_____	_____
12. RN and LPN	_____	_____
13. Chiropractor	_____	_____
14. Physical Therapist	_____	_____
15. Registered Pharmacist	_____	_____
16. Pharmacy Technician	_____	_____
17. Mental Health Provider (other than psychiatrists)	_____	_____
18. Other clinical personnel (Specify) _____	_____	_____

10. Does this site have any NHSC clinical staff or job openings for NHSC clinicians at this time?

- 1 Yes
 0 No → IF NO, GO TO Q12, PAGE 5

11. For each of the clinician categories listed below, record the number of full-time equivalent (FTE) NHSC clinicians on your staff at this site.

Clinician Type	Current Number of NHSC Staff in FTEs
1. General and Family Practitioner.....	_____
2. General Internist.....	_____
3. Pediatrician.....	_____
4. OB/GYN.....	_____
5. Psychiatrist.....	_____
6. Dentist.....	_____
7. Dental hygienist.....	_____
8. Physician Assistant.....	_____
9. Nurse Practitioner.....	_____
10. Certified Nurse Midwife.....	_____
11. Chiropractor.....	_____
12. Registered Pharmacist.....	_____
13. Mental Health (other than psychiatrists).....	_____
14. Other clinical personnel (Specify)..... _____	_____

12. In the last three years, have you offered a position to a pharmacist to work at this site?

- 1 Yes
 0 No → IF NO, GO TO Q14

12a. Thinking about the last time you decided to offer a position to a pharmacist at this site, did you consult with any other clinicians?

- 1 Yes
 0 No → IF NO, GO TO Q14

13. Which of the following types of clinicians did you consult with before deciding to offer a position to the pharmacist?

MARK (X) ALL THAT APPLY

- 1 Physician (MD or DO)
- 2 Physician assistant
- 3 Nurse practitioner
- 4 Certified nurse midwife
- 5 Registered nurse
- 6 Other chiropractor already on staff
- 7 Pharmacist
- 8 Other _____

14. How are pharmacy services currently provided at this site?

MARK (X) YES OR NO FOR EACH ITEM

	Yes	No
On-site pharmacy.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Contracted pharmacy services.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Mail-order pharmacy.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Provider dispensing.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Rebate.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Other:..... _____	1 <input type="checkbox"/>	0 <input type="checkbox"/>

15. How many prescriptions have been dispensed to patients at this site? If you have this information for 2004 or for your last fiscal year, please record it. If not, estimate the number of prescriptions dispensed in a typical week or month.

MARK (X) FOR THE TIME PERIOD YOU SELECTED AND RECORD THE NUMBER DISPENSED.

- NUMBER DISPENSED IN 2004 _____
OR
- NUMBER DISPENSED IN LAST FISCAL YEAR _____
OR
- NUMBER DISPENSED IN A TYPICAL MONTH _____
OR
- NUMBER DISPENSED IN A TYPICAL WEEK _____

16. Does this site have a registered pharmacist on staff?

1 Yes

0 No → IF NO, GO TO Q24, PAGE 10

17. Which of the following services are provided by registered pharmacists employed at this site?

MARK (X) YES OR NO FOR EACH ITEM REVISED

	Yes	No
DISPENSING MEDICATIONS:		
Prepare the prescription orders.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Transfer the medications to patients.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
PATIENT COUNSELING:		
Providing written information with each new prescription.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Oral counseling with each filled prescription	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Individual counseling for specific conditions.	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Group counseling for specific conditions.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
DRUG UTILIZATION REVIEW:		
Checking patient records to ensure patient still needs medication.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Checking patient records to ensure dosage is appropriate.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Checking patient records for adverse drug reactions and interactions.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
CONSULTATIVE AND EDUCATIONAL SERVICES FOR PROVIDERS:		
Consulting with other health providers within the clinic.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Consulting with other health providers at other sites within your clinic's network.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Consulting with health providers outside the clinic.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Educating providers (in-service sessions, grand round sessions, sharing information	1 <input type="checkbox"/>	0 <input type="checkbox"/>

from drug representatives).....	<input type="checkbox"/>	
PHARMACY MANAGEMENT:		
Management of pharmacy operations.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Formulary management.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Drug utilization review.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>

18. Where do prescription orders to the pharmacy staff in this site come from most frequently?

MARK (X) ONE ANSWER

- 1 Other clinic staff at this site
- 2 Staff from other sites in the clinic network
- 3 Providers from outside the clinic network
- 4 Prescription orders are not filled at this clinic

19. At this site, who transfers prescription medications to patients?

MARK (X) ALL THAT APPLY

- 1 Registered pharmacist
- 2 Pharmacy technician
- 3 Other type of clinician (specify) _____

20. At this site, how often do registered pharmacists co-manage patient care with physicians?

- Always
- Usually
- Sometimes
- Rarely → GO TO Q.21
- Never → GO TO Q. 21

A. What types of patients are co-managed by pharmacists and physicians?
(Describe below)

21. An interdisciplinary care team is comprised of three or more professionals from different care disciplines dedicated to the ongoing and integrated care of one patient, set of patients, or clinical condition. Does this clinic have any interdisciplinary care teams?

- 1 Yes
0 No → IF NO, GO TO Q24, PAGE 10

→ a. How many interdisciplinary care teams does the clinic have?

_____ Number of teams

b. Do any of the clinic's interdisciplinary care teams include a pharmacist?

- 1 Yes
0 No → IF NO, GO TO Q24, PAGE 10

→ c. How frequently does the interdisciplinary care team that includes a pharmacist meet?

MARK (X) ONE ANSWER AND THEN GO TO Q19

- 1 Regularly, at least once a week
2 Regularly, at least once a month
3 Regularly, but less than once a month
4 On and ad hoc or as needed basis

22. What is the main objective of the interdisciplinary care team that includes a pharmacist?

MARK (X) ALL THAT APPLY

- 1 To manage the care of specific patients
2 To develop and implement process of care protocols
3 To monitor quality of care initiatives
4 To maintain a disease management program
5 Other (*describe*)

23. When this site has a job opening for a clinician who usually identifies the pool of candidates?

- 1 On-site clinic staff
2 Other staff within the organization

RECRUITMENT AND RETENTION

24. In the last 12 months, how much of a problem, if any, has it been to *recruit* each of the following types of clinicians at this site?

MARK (x) FOR EACH CATEGORY. IF YOU DID NOT ATTEMPT TO RECRUIT ANYONE FROM A CLINICAL GROUP IN THE LAST 12 MONTHS, CHECK THE BOX NEXT TO "NOT RECRUITED".

Clinician Type	Big Problem			Small Problem
1. Physicians (MD/DO).....	1	<input type="checkbox"/>	A big problem	2
2. Dentists.....	1	<input type="checkbox"/>	A big problem	2
3. Dental hygienists.....	1	<input type="checkbox"/>	A big problem	2
4. Physician assistants.....	1	<input type="checkbox"/>	A big problem	2
5. Nurse practitioners.....	1	<input type="checkbox"/>	A big problem	2
6. Certified nurse midwives.....	1	<input type="checkbox"/>	A big problem	2
7. RNs and LPNs.....	1	<input type="checkbox"/>	A big problem	2
8. Chiropractors.....	1	<input type="checkbox"/>	A big problem	2
9. Physical therapists.....	1	<input type="checkbox"/>	A big problem	2
10. Pharmacists.....	1	<input type="checkbox"/>	A big problem	2
11. Pharmacy technicians.....	1	<input type="checkbox"/>	A big problem	2
12. Mental health providers (other than psychiatrists).....	1	<input type="checkbox"/>	A big problem	2

25. In the last 12 months, how much of a problem, if any, has it been to *retain* each of the following types of clinicians at this site?

MARK (x) FOR EACH CATEGORY. IF YOU DID NOT EMPLOY ANYONE FROM A CLINICIAN GROUP AT THIS SITE IN THE LAST 12 MONTHS, CHECK THE BOX NEXT TO "NOT EMPLOYED".

Clinician Type	Big Problem			Small Problem
1. Physicians (MD/DO).....	1	<input type="checkbox"/>	A big problem	2
2. Dentists.....	1	<input type="checkbox"/>	A big problem	2

		problem		
3. Dental hygienists.....	1	<input type="checkbox"/> problem	A big	2
4. Physician assistants.....	1	<input type="checkbox"/> problem	A big	2
5. Nurse practitioners.....	1	<input type="checkbox"/> problem	A big	2
6. Certified nurse midwives.....	1	<input type="checkbox"/> problem	A big	2
7. RNs and LPNs.....	1	<input type="checkbox"/> problem	A big	2
8. Chiropractors.....	1	<input type="checkbox"/> problem	A big	2
9. Physical therapists.....	1	<input type="checkbox"/> problem	A big	2
10. Pharmacists.....	1	<input type="checkbox"/> problem	A big	2
11. Pharmacy technicians.....	1	<input type="checkbox"/> problem	A big	2
12. Mental health providers (other than psychiatrists).....	1	<input type="checkbox"/> problem	A big	2

26. If you could add a pharmacist to your clinic, do you think that would improve your ability to *retain* other clinicians or not?

- 1 Yes → IF YES, GO TO Q26a
- 0 No → IF NO, GO TO Q26b
- 2 Unsure → IF UNSURE, GO TO Q27, PAGE 13

A. (If yes) Which of the following types of clinicians would be easier to retain?

MARK (X) ALL THAT APPLY

- 1 Physicians
- 2 Dentists
- 3 Dental hygienists
- 4 Physician assistants
- 5 Nurse practitioners
- 6 Certified nurse midwives
- 7 RNs and LPNs
- 8 Chiropractors
- 9 Physical therapists
- 10 Pharmacists
- 11 Pharmacy technicians
- 12 Mental health providers (other than psychiatrists)

B. (If no) Why wouldn't adding a pharmacist to your clinic improve your ability to *retain* other clinicians?

UNMET NEED FOR CARE

27. During the past 12 months, how much of a problem, if any, was it to obtain primary care services for patients seen at this clinic when you or your staff thought they were medically necessary?

- 1 A big problem
- 2 A small problem
- 3 Not a problem → IF NOT A PROBLEM, GO TO Q28

→ (If a big or small problem) Please rate the importance of each of the following reasons why you might not be able to obtain primary care services.

A. There aren't enough qualified primary care providers in the area.

- 1 Very important
- 2 Moderately important
- 3 Not very important
- 4 Not at all important

B. Health plan networks and administrative barriers limit patient access.

- 1 Very important
- 2 Moderately important
- 3 Not very important
- 4 Not at all important

C. Patients lack health insurance or have inadequate insurance coverage.

- 1 Very important
- 2 Moderately important
- 3 Not very important
- 4 Not at all important

28. During the past 12 months, how much of a problem, if any, was it to obtain pharmacy services for patients seen at this clinic when you or your staff thought they were medically necessary?

- 1 A big problem
- 2 A small problem
- 3 Not a problem → IF NOT A PROBLEM, GO TO Q29, PAGE 14

→ (If a big or small problem) Please rate the importance of each of the following reasons why you might not be able to obtain pharmacy services.

A. There aren't enough qualified pharmacists in the area.

- 1 Very important
- 2 Moderately important
- 3 Not very important
- 4 Not at all important

B. Health plan networks and administrative barriers limit patient access.

- 1 Very important
- 2 Moderately important
- 3 Not very important
- 4 Not at all important

C. Patients lack health insurance or have inadequate insurance coverage.

- 1 Very important
- 2 Moderately important
- 3 Not very important
- 4 Not at all important

29. During the past 12 months, how much of a problem, if any, was it to obtain treatment for neck or back pain for patients seen at this clinic when you or your staff thought it was medically necessary?

- 1 A big problem
- 2 A small problem
- 3 Not a problem → IF NOT A PROBLEM, GO TO Q30

→ (If a big or small problem) Please rate the importance of each of the following reasons why you might not be able to obtain services to treat neck or back pain.

A. There aren't enough qualified providers in the area.

- 1 Very important
- 2 Moderately important
- 3 Not very important
- 4 Not at all important

B. Health plan networks and administrative barriers limit patient access.

- 1 Very important
- 2 Moderately important
- 3 Not very important
- 4 Not at all important

C. Patients lack health insurance or have inadequate insurance coverage.

- 1 Very important
- 2 Moderately important
- 3 Not very important
- 4 Not at all important

DEMONSTRATION SITES

30. Who pays the salary of the NHSC pharmacist at this site?

- The clinic
- The network
- Another entity (describe) _____

31. If the NHSC pharmacist left the clinic, would you replace him or her with another registered pharmacist?

- 1 Yes
- 0 No → Why not? _____

32. Please describe the impacts, if any, of the NHSC pharmacist on each of the following:

Access to care: _____

Patient satisfaction: _____

Quality of care: _____

Costs of care: _____

Utilization patterns: _____

Stability of clinical staff: _____

33. What is your age now?

MARK (X) ONE ANSWER

- 1 18 to 24
- 2 25 to 34
- 3 35 to 44
- 4 45 to 54
- 5 55 to 64
- 6 65 to 74
- 7 75 or older

34. Are you male or female?

MARK (X) ONE ANSWER

- 1 Male
- 2 Female

35. What is the highest degree that you have completed?

MARK (X) ONE ANSWER

- 1 Some college or 2-year degree
- 2 BA or BS Degree
- 3 MA or MS
- 4 MBA or MPH
- 5 DC
- 6 PhD
- 7 MD, DO
- 8 DMD
- 9 PharmD
- 10 Other (*Describe*):

36. Are you of Hispanic or Latino origin or descent?

MARK (X) ONE ANSWER

- 1 Yes, Hispanic or Latino
- 2 No, not Hispanic or Latino

37. What is your race?

MARK (X) ALL THAT APPLY

- 1 White
- 2 Black or African-American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander
- 5 American Indian or Alaska Native
- 6 Other: _____

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Jen revised for Richard Strouse