

Comparing Two Training Approaches to Engage Community Pharmacy Technicians in Brief Smoking Cessation Interventions

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Background

- In recent years, the scope of practice for community pharmacy technicians has expanded, and they are well positioned to assist with implementation of brief tobacco cessation interventions by: (1) Asking patients about tobacco use, (2) Advising tobacco users to quit, and (3) Referring patients to either the pharmacist or to a tobacco quitline (AAR).
- While technicians appear to be a key component in community pharmacy-based AAR models, their level of involvement in smoking cessation interventions and associated perceptions of this new role have yet to be characterized.

Objective

The objective of this study was to compare differences in pharmacy technicians' perceptions and delivery of brief smoking cessation interventions in grocery store community pharmacy settings using a minimal versus an intensive training approach.

Methods

- Community pharmacies (n=20) located in one major grocery store chain throughout California were randomized to receive either:
 - Written materials only training [minimal]
 - Written materials + 4-hour live training + active monitoring and coaching by pharmacy management [intensive]
- Written materials were distributed to all sites. Live training sessions were conducted for the intensive group pharmacies 3 to 4 weeks later.
- Smoking cessation interventions were documented for a period of 17 weeks. Interventions were documented and included in the analysis if smoking cessation was discussed during the patient interaction.
- To characterize the study population and technicians' perceived self-efficacy for implementing AAR, web-based surveys were administered at baseline, immediately following training, and at 6- and 12-weeks follow-up. Self-efficacy was assessed using a 10-item scale (response options range, 0=cannot do at all to 10=highly certain can do).
- The study was approved by the UCSF Institutional Review Board.

Results

- 55 technicians participated in the study (31 in the minimal group; 24 in the intensive group), and no statistically significant between-group differences existed at baseline for participant characteristics or perceived self-efficacy.
- Technicians were involved with 525 of 916 recorded interventions (57.3%); of these, 295 occurred in the minimal group (56.1%), and 230 occurred in the intensive group (43.8%; Table 1). Of 409 technician-only interventions (i.e., not involving a pharmacist), 219 (53.5%) were documented in the minimal group and 188 (46.5%) in the intensive group. Interventions by study week are depicted in Figure 1.

Table 1—Frequency of smoking cessation interventions (n=532).

Characteristic	Category	Minimal (%)	Intensive (%)
Total interventions	Total reported interventions in which a technician participated	295	230
Pharmacist + technician	Interventions in which the technician discussed smoking cessation	76 (25.8)	42 (18.3)
Technician-only	Interventions logged by technicians without a pharmacist's participation	219 (74.2)	188 (81.7)
Engagement	Technicians who reported at least one intervention	17 (54.8)	24 (100.0)

- The number of technicians who recorded at least one intervention was 17 in the minimal group (of 31 technicians; 54.8%) and 24 in the intensive group (of 24 technicians; 100%) (p=0.0001). The median number of interventions documented per reporting technician was 8 (range, 1-67) and 6 (range, 1-32) for the minimal and intensive groups, respectively.
- Mean perceived self-efficacy scores for the minimal group were 7.8, 7.9, 8.0, and 7.6 for each of the four administered surveys, respectively and in the intensive group, the scores were 7.7, 8.6, 9.0, and 9.0, respectively (Figure 2).
- The median number of times technicians reported having asked a patient about smoking in the past week were 0, 2, 4.5, and 16.5 in the minimal group and 0, 4, 40, and 20 in the intensive group for each of the four administered surveys, respectively (Figure 2).

Figure 1—Weekly smoking cessation interventions involving technicians

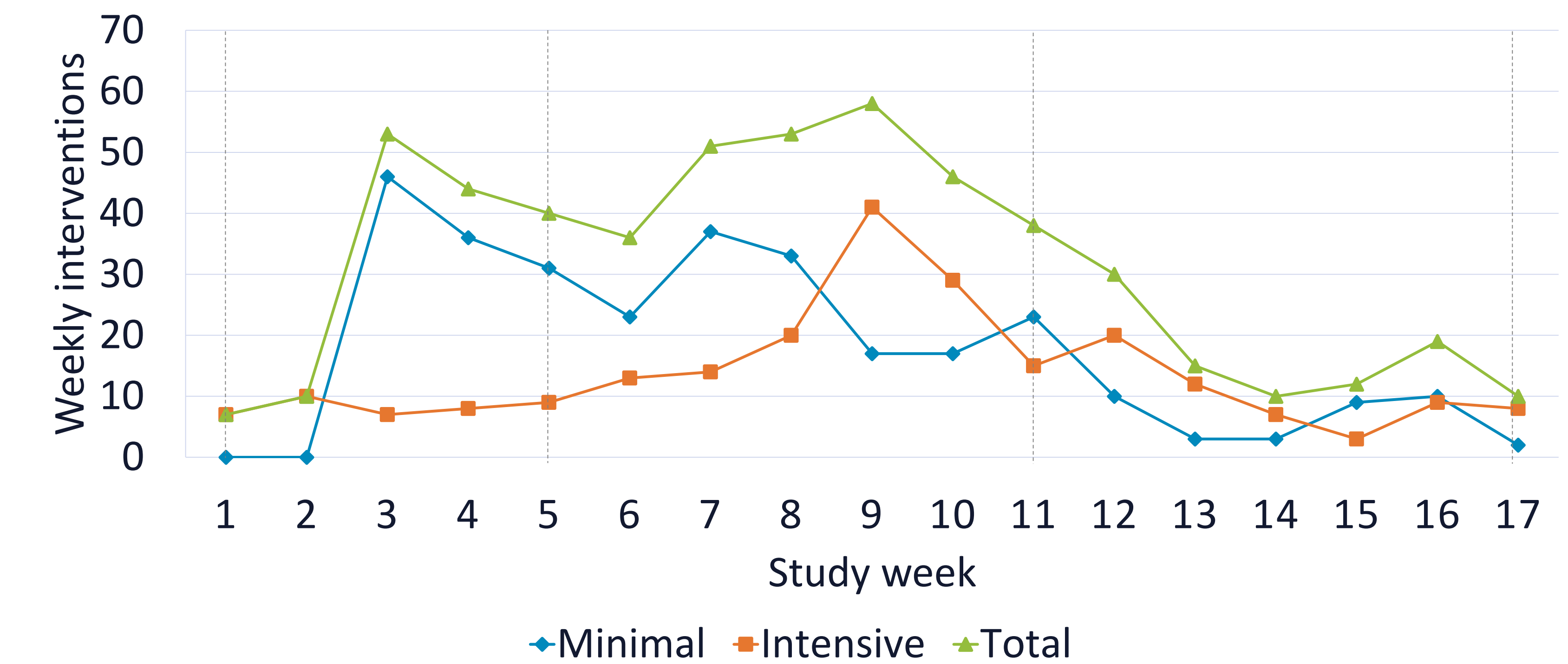
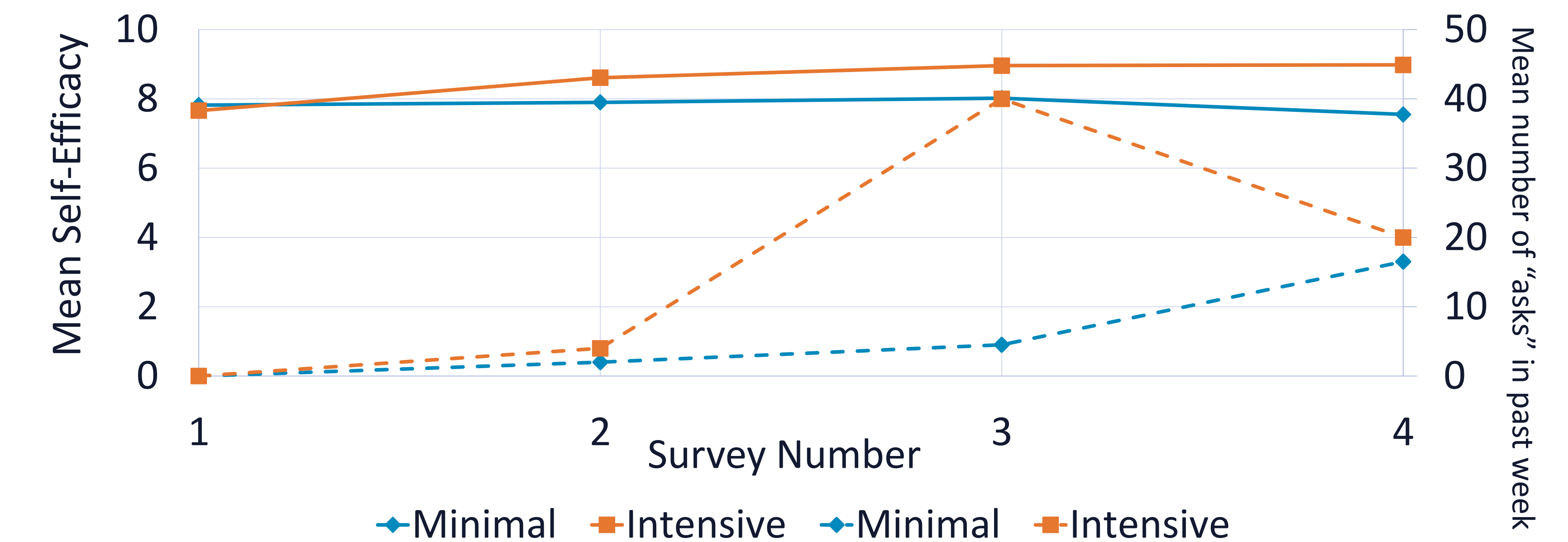


Figure 2—Survey results for self-efficacy and the number of times technicians asked patients about smoking in the past week



Conclusions

- Preliminary findings indicate no difference between minimal and intensive training approaches for enhancing the delivery of tobacco cessation interventions by community pharmacy technicians.
- The higher proportion of technicians providing one or more interventions in the intensive group suggests greater engagement in the process relative to those receiving only written training materials.
- The intensive group demonstrated a larger increase from baseline to post-training in self-efficacy, and reported a higher frequency of asking patients about smoking, suggesting greater engagement with intensive training.