

# The Effect of Comprehensive Medication Management on Primary Care Providers' Clinical Work and Professional Satisfaction

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## Background

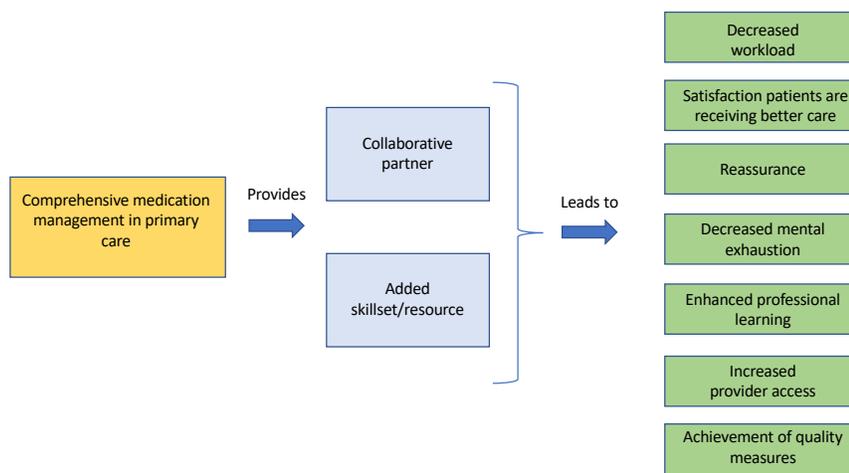
- CMM is often delivered by a pharmacist and defined as “the standard of care that ensures each patient’s medications (whether they are prescription, nonprescription, alternative, traditional, vitamins, or nutritional supplements) are individually assessed to determine that each medication is appropriate for the patient, effective for the medical condition, safe given the comorbidities and other medications being taken, and able to be taken by the patient as intended”<sup>1</sup>
- Burnout is particularly prevalent in primary care<sup>2</sup>
- Studies demonstrate team-based care can reduce burnout<sup>3</sup>
- The impact of CMM services on primary care providers’ clinical work and professional satisfaction has not been well documented

## Aim and Methods

**Aim:** To identify how primary care providers perceive CMM impacts their clinical work and professional wellbeing

- 16 primary care providers (nurse practitioners, physicians, and physician assistants) representing four health systems in Minnesota were interviewed
- Interviews were one-on-one or dyadic, semi-structured, and lasted approximately one hour
- Two investigators reviewed and coded the data
- Themes emerged from the data which were formed into a model to describe how CMM affects primary care providers’ clinical work and professional wellbeing

## Provider Perception of Comprehensive Medication Management Impact



Identified themes	Representative Quotation	Connection with Previously Identified Drivers of Burnout and Engagement <sup>4</sup>
Collaborative Partner	“And so having that help really, really, does help. And it’s not just helping the patients; it’s helping me, because part of what makes a provider burned out is you feel like you’re not able to provide the service that you should be providing to someone. The patient is frustrated, you’re frustrated, and then you feel like...and then you go on to the next one and it’s the same thing. You get to the end of your day and you think how can I keep going on this way... or what can I do to take better care of my patients, and it’s not necessarily that you’re going to spend an extra two or three hours in the office, it’s we’re just not always equipped to provide what these people need, so having that help has made a big difference, I think.”	• Social support and community at work
Added skillset/resource	“I’ll run things by [the CMM pharmacist], med interactions or different questions, so having that resource available makes my job easier and more fulfilling to be able to have someone to ask questions.”	• Efficiency and resources
Decreased Workload	“Job satisfaction goes down, in my opinion, exponentially with the amount of work that’s added. Just having somebody share the load is a huge improvement in a physician’s enjoyment of the work, of the practice, and the satisfaction of knowing our patients are actually getting better advice.”	• Workload and Job Demands • Work-life Integration
Satisfaction patients are receiving better care	“Just their expertise makes me feel satisfied, because I feel my patients are getting the highest quality [care]. I think it feels so unsatisfying when you don’t know something for a patient, so even if I’m not the one solving it for them, to be able to have a resource nearby makes me feel satisfied, because I feel like I can see that my patients are getting quality care even if it’s not a hundred percent from me.”	• Efficiency and resources • Meaning in work
Reassurance	“So I think as a provider, to know that there are some back-up experts, especially as a pharmacist, that you have access to right down the hall is, I think, very satisfying for me in a job.”	• Social support and community at work
Decreased mental exhaustion	“A lot of the patients that [the CMM service] sees are really complex and they need so much time, and they have so much information, and I think it’s just even if I could spend the extra time, it just feels like such a mental burden and sometimes an emotional burden, that it feels so nice to either know there’s another set of eyes on this patient or oh, this person can handle this one chunk for me.”	• Work-life Integration
Enhanced professional learning	“I’m constantly learning things from [the pharmacist]. Especially with the diabetes, they’re very knowledgeable with all the new things coming out, all the little tricks, or ways to help patients take meds (medications) easier, so I think it plays a lot into compliance. I think it makes me a better doctor, hearing those things as we work together.”	• Social support and community at work • Meaning in work
Increased patient access to providers	“I’m part-time, so my patients’ biggest complaint is that they can’t get in to see me, so being able to see [the pharmacist] and save some other appointments for myself for my more complicated patients is a huge help.”	• Efficiency and resources
Achievement of quality measures	“We’re constantly graded on quality, like are we meeting certain standards for diabetes, high blood pressure, all these things, and having [the CMM service] as another resource for our patients, another place, another person that can fine-tune some things for us indirectly, helps our quality numbers as a provider, but also our whole clinic when we look at it. To make sure people are reaching their goals that they need to be at number-wise.”	• Workload and Job Demands

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