

# Today's Research Is Tomorrow's Practice: Promoting a Culture of Research

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As I stand back and look at pharmacy practice in all settings around me, and I dare compare it with our practice of 10 years ago, what differences do I see? Not enough—despite the fact that most provinces have embarked on approving new professional activities for pharmacists, with the goal of improving patient care. Legally, we now have additional tools to optimize patients' pharmacotherapy, from renewing prescriptions for chronic conditions, through authorizing laboratory tests to enable monitoring and follow-up, to treating minor ailments. Individually and collectively, we are all committed to the well-being of our patients, trying to achieve optimal outcomes through patient-centred cognitive services and through interprofessional collaboration, regardless of our practice site.<sup>1</sup> Yet much of the potential represented by these opportunities and goals remains unrealized.

Although pharmacists have not yet embraced the full scope of clinical practice available to effectively manage patients' medications, future development of evidence-based, patient-centred services will depend on our research capability. So, if we want to grow as a profession and indeed strive to provide the best care, we need more—and more robust—practice-based research.<sup>2</sup> While some great practices have emerged from research in Canada and elsewhere,<sup>3,4</sup> widespread acceptance of these types of practice has not occurred, nor has a research agenda for pharmacy practice been established. I would urge our profession to move toward the adoption of proven practices and the investment of significant research money, time, and efforts to develop new ones.

To accomplish these goals, academia, employers, and practitioners need to be collectively engaged in pharmacy practice research. Personally, I believe we have a long way to go.

I submit that we do not have enough pharmacists oriented toward pharmacy practice research. We have not been able to reach the critical mass of researchers needed to demonstrate the substantial impact that our own practice advancement has on our patients. Faculties of pharmacy can play a significant role in this regard. How many faculty positions are there in the areas of

pharmacy practice development and assessment within each province? I would suggest there are not enough. Generating the evidence for services provided by pharmacists requires adequate clinical and research training, lots of motivated leadership, and dedicated time and resources. Academia has a vested interest in this endeavour and can provide the conditions required to develop research networks, networks that will connect pharmacists to their practice sites, bring research into the real world, expand pharmacists' roles, and ultimately have a positive effect on patient outcomes.

Employers such as public and private health care organizations play a role in the adoption of newly created evidence-based practices but also in the generation of new evidence. However, from the organizations' perspective, participation in practice-based research is often considered as an add-on to a job description, something nice to have, something that looks good in an annual report. We need stronger administrative support and leadership from these organizations in the promotion of practice-based research, such that research is valued and becomes a core component of the pharmacist role.

Perhaps there is not enough buy-in from practitioners to participate in research, which is often viewed as the work of academia and is felt to be unrelated to patient care services—although survey studies have shown that Canadian pharmacists, whether in community or hospital practice, do have a positive attitude toward research.<sup>5,6</sup> When questioned as to whether they would join a research network, survey respondents overwhelmingly answered “yes”, because of the potential benefits to be gained by joining such a group.<sup>5,6</sup> These benefits include direct



access to continuing education programs, the opportunity to participate in development and testing of clinical tools, access to a variety of tools once a research project is completed, knowledge gained from the results of the study, and lastly but most importantly, benefits for patients. However, these same studies identified the lack of dedicated time for research participation as the most significant and consistent barrier to research,<sup>5-7</sup> irrespective of individual respondents' interest in research. Although lack of dedicated time may be a true limitation (depending on the extent of data collection required for a given research project), Cvijovic and others,<sup>7</sup> through semistructured interviews, identified lack of time as a socially acceptable limitation that was masking fears associated with the challenges of modifying work routines.

Practitioners need to overcome their reluctance to change behaviour and work routines in order to try out and adopt those services that have been proven to improve patient outcomes; similarly, employers need to recognize research as a core component of a pharmacist's job description, and academia needs to better promote the benefits of practice research. If we are to succeed in providing new evidence-based services and in witnessing a change in our culture, we need to engage our students and our colleagues in this scholarly activity so they recognize what research can do for them, for their practice, and ultimately for their patients.<sup>8</sup> With recognition that existing pharmacy services are end products of research, one strong argument for embracing this culture is simple: today's research has the potential to become tomorrow's clinical service. Personally, I believe that leadership is crucial!

#### References

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## ON THE FRONT COVER



### Near Helen Lake, Alberta

This photograph was taken on a tranquil mid-August afternoon in 2013 in Banff National Park, Alberta.

While returning from a stunning and rewarding moderate-difficulty day hike to Helen Lake (12 km return, 455 m

elevation gain), the photographer, June Chen, captured this serene image of the glistening alpine meadows with a Sony Cyber-Shot Digital Still Camera. June is a Clinical Pharmacist at the Mazankowski Alberta Heart Institute in Edmonton, Alberta, and a CSHP member.

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