

Appendix 1 (Part 1 of 4): Survey instrument.

1. Are you a pharmacist currently employed by Lower Mainland Pharmacy Services?
 - Yes
 - No
 2. Does your role as a pharmacist employed by Lower Mainland Pharmacy Services involve providing direct patient care (working directly with patients to prevent, identify, and resolve drug-related issues)?
 - Yes
 - No
- Section 1: General Information**
3. What is your age?
 - <20 years old
 - 20–29 years
 - 30–39 years
 - 40–49 years
 - >50 years
 4. What gender do you associate yourself with?
 - Male
 - Female
 - Would rather not say
 5. How many cumulative years have you practised as a pharmacist for Lower Mainland Pharmacy Services or other health authority?
 - 0–5 years
 - 6–10 years
 - >10 years
 - Would rather not say
 6. What level of pharmacy education do you currently possess? Check all that apply.
 - Bachelor of Science in Pharmacy
 - Entry-level Doctor of Pharmacy
 - Accredited Canadian Pharmacy Residency (ACPR) program
 - Master of Science in Pharmacy
 - Postgraduate Doctor of Pharmacy
 - Would rather not say
 - Other (please specify)
 7. Which of the following roles do you perform in your pharmacy department? Check all that apply.
 - Teaching
 - Research
 - Administrative leadership/management
 - Clinical leadership/management
 - Clinical practice
 - Dispensary/drug distribution
 - Administrative support (e.g., medication use evaluation, drug information)
 - Would rather not say
 - Other (please specify)
 8. Which of the following Lower Mainland Pharmacy Services sites do you work at? Check all that apply.
 - Abbotsford Regional Hospital
 - BC Children's Hospital
 - BC Women's Hospital
 - Bella Coola General Hospital
 - Burnaby Centre for Mental Health and Addiction
 - Burnaby Hospital
 - Chilliwack General Hospital
 - Downtown Community Health Centre
 - Drug and Poison Information Centre
 - Eagle Ridge Hospital
 - Forensic Psychiatric Hospital
 - Fraser Canyon Hospital
 - Fraser Health Community Mental Health
 - Fraser Health Antimicrobial Stewardship Program
 - GF Strong
 - Holy Family Hospital
 - Jim Pattison Outpatient Care and Surgery Centre
 - Langley Memorial Hospital
 - Langley Pharmacy Production Centre
 - Lions Gate Hospital
 - Mission Memorial Hospital
 - Mount St Joseph Hospital
 - Peace Arch General Hospital
 - Powell River General Hospital
 - Queen's Park Care Centre
 - Ridge Meadows Hospital
 - Richmond Hospital
 - Royal Columbian Hospital
 - RW Large Memorial Hospital
 - Squamish General Hospital
 - St Paul's Hospital
 - Surrey Memorial Hospital
 - UBC Hospital
 - UBC Tertiary Mental Health
 - Vancouver General Hospital
 - Vancouver Pharmacy Production Centre
 - Other (please specify)
 - Would rather not say

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9. Which of the following best describes your primary area(s) of practice? Check all that apply.
- Adult cystic fibrosis/respirology
 - Ambulatory outpatient clinic (please specify type)
 - Anticoagulation management clinic
 - Antimicrobial stewardship
 - Cardiology (ambulatory)
 - Cardiology (inpatient)
 - Child and adolescent psychiatry
 - Critical care
 - Drug distribution
 - Emergency medicine
 - General medicine
 - Heart function clinic
 - Hemodialysis
 - HIV (inpatient)
 - HIV (outpatient clinic)
 - Home IV Program
 - Infectious diseases
 - Leukemia/bone marrow transplantation
 - Maternal fetal medicine
 - Medication management
 - Medication reconciliation
 - Medication safety
 - Medication use evaluation
 - Mental health and addiction
 - Neonatal medicine
 - Neonatal ICU
 - Nephrology (inpatient)
 - Nephrology (outpatient clinic)
 - Neurology/neurosurgery
 - Oncology
 - Palliative care
 - Pediatrics (critical care)
 - Pediatric cystic fibrosis
 - Pediatric (emergency medicine)
 - Pediatrics (general)
 - Pediatric medicine
 - Pediatric nephrology
 - Pediatric (neurology)
 - Pediatric (oncology)
 - Pediatric solid organ transplantation
 - Pediatric surgery
 - Pharmacokinetics
 - Psychiatry

- Rehabilitation
- Rural medicine
- Solid organ transplant
- Surgery
- Toxicology
- UBC Pharmacists Clinic
- Women's health
- Other (please specify)
- Would rather not say

Section 2: Attitudes and Beliefs Regarding Independent Pharmacist Prescribing

Please rate how you feel about the following (not at all, slightly, somewhat, moderately, strongly).

10. Do you feel it is important for the profession of pharmacy to have independent pharmacist prescribing?
11. Do you feel that independent prescribing authority is relevant to your practice?
12. Do you feel that you require additional training to take on a prescribing role?
13. Do you feel that you have the clinical expertise to be an independent pharmacist prescriber?
14. Do you have the time to incorporate prescribing activities into your practice?
15. Do you feel that having independent prescribing authority would decrease efficiency in your practice?
16. Do you feel that having independent prescribing authority would increase efficiency in your practice?
17. Do you feel that independent pharmacist prescribing will enhance job satisfaction?
18. Are you concerned about the increased responsibility associated with prescribing?
19. Are you concerned about increased liability with prescribing?
20. Do you feel having prescribing authority would reduce the amount of time spent contacting physicians and leaving suggestions?
21. Do you feel your communication with physicians would be more frequent if you had independent prescribing authority?

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22. Do you feel communication with physicians would be improved/more effective if you had independent prescribing authority?

Section 3: Characterization of Direct Patient Care Activities with Independent Prescribing Authority

If you were a pharmacist with independent prescribing authority, how would that affect your prescribing behaviour in each of the following activities?

Options:

It would not affect my behaviour because I already have authority

It would be helpful and enable me to more easily accomplish this for my patients

It would not affect my behaviour because I do not do this now and I do not envision myself doing this

I would not do this anyway because it is not relevant to the patients I look after

I would not do this because I do not have the knowledge/skill to do this

Medication reconciliation:

23. Prescribe medications the patient was taking prior to hospital admission during medication reconciliation
24. Prescribe medications as part of a medication reconciliation during a patient transfer (e.g., post-operative medication reconciliation)
25. Prescribe discharge medications

Dose adjustment:

26. Prescribe an adjusted dose of a medication based on laboratory values and clinical assessment
27. Prescribe an adjusted dose of a medication based only on laboratory values (e.g., renal function adjustments, serum level targets)

Initiating/stopping medications:

28. Prescribe new medications for an inpatient
29. Prescribe new medications for an outpatient
30. Renew medications previously prescribed by yourself or another prescriber
31. Deprescribing
32. Prescribe over-the-counter medications

Interprofessional team dynamics:

33. Prescribe a medication without prior discussion with a physician or team
34. Prescribe a medication with prior discussion with a physician or a team

Section 4: Factors Affecting Intentions to Apply for Independent Prescribing Authority

35. To what extent would the following act as barriers to your applying for prescribing authority? (i.e., to what extent would these factors hold you back from applying for prescribing authority?) (not at all, slightly, somewhat, moderately, strongly)
- Would the amount of time required to apply influence your decision to apply?
 - Would the potential for decreased efficiency in your practice influence your decision to apply?
 - Would the time required to incorporate a prescribing role into your practice influence your decision to apply?
 - Would your inability to provide the necessary monitoring and follow-up for independent prescribing activities influence your decision to apply?
 - Would your inability to provide the necessary documentation for independent prescribing activities influence your decision to apply?
 - Would your concern over increased responsibility influence your decision to apply?
 - Would your concern over increased liability influence your decision to apply?
36. To what extent would the following act as enablers to your applying for prescribing authority? (i.e., to what extent would these factors make you more likely to apply for prescribing authority?) (not at all, slightly, somewhat, moderately, strongly)
- Would the potential for increased efficiency at your practice influence your decision to apply?
 - Would the potential for saving time (reduced time spent contacting physicians) influence your decision to apply?
 - Would the potential for more frequent communication with physicians influence your decision to apply?
 - Would the potential for improved/more effective communication with physicians influence your decision to apply?

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- Would the importance of pharmacist prescribing for the profession influence your decision to apply?
- Would the perceived value of independent prescribing at your practice setting influence your decision to apply?
- Would the potential for enhanced job satisfaction influence your decision to apply?

Section 5: Barriers and Enablers to Incorporating Independent Pharmacist Prescribing in Practice

37. Use the sliders to indicate the extent to which you see the following as being barriers/enablers to incorporating independent pharmacist prescribing into your practice at your practice site? (1 = significant barrier, 5 = neutral, 9 = significant enabler)
- Self-confidence
 - Competence
 - Personal expectations
 - Employer expectations
 - Societal expectations
 - Level of support from pharmacist coworkers
 - Level of support from physicians and other prescriber coworkers
 - Level of support from management
 - Perceived impact on patient care
 - Perceived impact on work environment
 - Interdisciplinary care team dynamics
 - Perceived impact on the profession

Section 6: Familiarity with the Certified Pharmacist Prescriber (CPP) Initiative

38. How familiar are you with the CPP initiative that has been put forth by the College of Pharmacists of British Columbia? (not at all familiar, somewhat familiar, familiar)
39. Do you feel that you are familiar with the proposed application process to obtain CPP certification as set out by the College of Pharmacists of British Columbia in the draft CPP initiative framework? (not at all familiar, somewhat familiar, familiar)
40. How likely are you to apply for CPP authority if it becomes available in British Columbia? (not likely, slightly likely, moderately likely, very likely)
41. Do you feel you are able to complete the necessary follow-up required for monitoring patients as set out by the College of Pharmacists of British Columbia in the draft CPP initiative framework? (not at all, slightly, moderately, strongly)
42. Do you feel you are able to complete the necessary documentation in providing patient care as set out by the College of Pharmacists of British Columbia in the draft CPP initiative framework? (not at all, slightly, moderately, strongly)