



Summary Report

Evaluation of the Pharmacist Care
Clinic Pilot in New Brunswick I:
Descriptive Summary of Clinic
Operations, Clinic Services, and Client
Perceptions

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Why is This Study Important?

Healthcare systems across Canada are faced with challenges when it comes to providing timely care. The demand for health services is rising with Canada's aging population, and labour shortages and limited access to care are making it difficult to meet these demands. To address this problem, governments and healthcare providers are exploring different ways to boost the healthcare system - to make health services more accessible while ensuring new practices can be sustained over time.

In the province of New Brunswick (NB), one approach that's being explored involves increasing the types of services pharmacists can provide, known as an expanded scope of practice, or expanded authority.

To test this approach, the **Pharmacist Care Clinic** pilot program was launched in August 2023 in 6 community pharmacies across NB. In addition to standard clinical pharmacy practices, community pharmacists provided certain health services outside of their normal scope of practice. These included point-of-care screening and prescribing for Group A Strep and prescribing for chronic disease management of diabetes, cardiovascular disease, asthma and/or chronic obstructive pulmonary disease (COPD).

This study evaluates the impact of the Pharmacist Care Clinic pilot program on patient care and explores its potential impacts on the healthcare system. Using a combination of clinic data and patient surveys, the study describes clinic operations and services provided, and it examines patients' experiences and levels of satisfaction with the clinics.

The results provide important insights that have the potential to inform decision making surrounding the future of the Pharmacist Care Clinic model, pharmacist scope of practice and provincial funding for pharmacy services in NB.



How Was This Study Completed?

To undertake this study, researchers at NB-IRDT used a mixed methods approach that combined operational data and service records from the 6 pharmacy clinics with survey data. Using clinic operational data gathered between January 21 and May 20, 2024, they examined the clinics' hours of operations, staffing levels, appointments, cancellations and client characteristics - including whether clients had a primary care provider and if they were repeat visitors. Records of services rendered between the clinic open dates and March 31, 2024, were used to summarize the services provided. Services examined include assessment for Group A Strep and minor ailments, chronic disease management, prescription renewal/adaptation, vaccinations/injections and the PharmaCheck medication review service. They also considered whether the services fell within pharmacists' regular scope of practice or the expanded scope of practice exclusive to the Pharmacist Care Clinic pilot.

Clients who visited a pilot clinic between January 23 and May 17, 2024, were invited to complete voluntary, anonymous surveys. These were used to learn the reasons for clients' clinic visits, how they would have navigated the healthcare system without the clinic and whether they were satisfied with the clinic and the care they received.



Limitations

While reading the results on the next pages, it's important to remember there are certain limitations to this study. For instance, the clinic service record data used for the study were derived from service codes recorded by clinic staff. Errors or omissions in service code entry may have occurred, which would impact the accuracy of study results.

Additionally, the study took place during a period when there was an unusually high number of Group A Strep infections in the community and significant discussion of these infections in the media. As a result, Group A Strep patients may be overrepresented in the study population. Finally, the client survey was completed by a relatively small sample size, so the survey results may not accurately represent the entire population of clients who visited the clinics.

Key Findings: Clinic Operations and Services

In total, **10,365** appointments took place and **7,800** different clients were served across the 6 pharmacy clinics between when the clinics opened and March 31, 2024.

What were the most common services provided?

- ➔ The most common reasons for appointments were prescription renewals and changes (**38%**), chronic disease management (**18%**), minor ailments (**16%**) and Group A Strep (**15%**).
- ➔ Pharmacists wrote **2,975** prescriptions (not including renewals) and reported making **275** changes to therapy and **190** over-the-counter recommendations.



Pharmacists referred clients to another healthcare provider in only **9%** of appointments. Notably, 44% of these referrals were for the purpose of having physicians order pharmacist-recommended laboratory testing, as pharmacists do not have this authority.

Clients With and Without a Primary Care Provider

The majority of clients (**75%**) had a primary care provider. However, repeat visits to the care clinics were more common among clients without a primary care provider.

Differences Between Clients' Services



While services for chronic disease management were more common than services for Group A Strep among clients without a primary care provider, the opposite was true for clients who had a primary care provider.

Key Findings: Client Experiences and Satisfaction

A total of **409** individuals completed the client survey. Most of them (**71%**) were visiting the clinic for services related to Group A Strep.

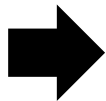


Most clients visiting for **Group A Strep** had a primary care provider.

They indicated they chose to visit the clinic anyway because they needed fast access to acute care.

Clients visiting for **chronic disease management** often did not have a primary care provider.

They were more likely to seek care for an ongoing (rather than new) concern and less likely to report having other options for care.



Nearly half of respondents were able to book an appointment the same day they contacted the clinic.

Client Satisfaction With the Clinics and Care Provided

Over 90% of respondents said the pharmacist provided care for their health concern and saved them from needing to seek care from another provider.

Would you use the clinic again in the future?



Said "Yes"

Would you recommend it to family and friends?



Said "Yes"

Conclusions

Data collected by the pharmacy clinics shows that the clinics were heavily used, providing both routine pharmacy services and novel services that were part of pharmacists' expanded scope of practice through the Pharmacist Care Clinic pilot.

Within the expanded scope of the pilot program, pharmacists demonstrated the ability to provide comprehensive care - including writing prescriptions and adjusting therapy, providing patients with follow-up care and making referrals to other healthcare providers when necessary. It's important to note, as well, that nearly half of these referrals were for physicians to order laboratory testing recommended by the pharmacist (since ordering these tests is not currently within pharmacist scope of practice in NB). This suggests that if pharmacists' scope of practice was expanded to include ordering lab tests, this could potentially reduce the burden on other healthcare providers while supporting more seamless care.

The higher rate of follow-up, or repeat, visits among clients without a primary care provider also demonstrates the ability of the pharmacy clinics to provide continuity of care, suggesting these clinics were fulfilling an unmet need for this group. Even among clients with a primary care provider, the clinics provided important healthcare services. After all, if the clinics were not in place, at least some of the 10,365 appointments that were recorded likely would have been replaced by visits to emergency rooms, walk-in clinics or other healthcare providers.

In addition to meeting demand for care, the pharmacy clinics were very well-received by pharmacy clients. Survey participants overwhelmingly reported high satisfaction with the clinics, as well as greater confidence in the accessibility of healthcare following their appointment. Overall, results suggest the Pharmacist Care Clinic pilot program was effective in improving timely access to care, and patients were happy with the services they received.



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