

TITLE : Valorisation of clinical pharmacy activities: validation of a standard tool for routine interventions quotation in French hospitals

Authors: French Society of Clinical Pharmacy SIG*

Establishment : *

Background and Objective:

According to French Society of Clinical Pharmacy, the general objective of this project is to elaborate a standard for clinical pharmacy intervention in order to built up a multicenter data base that allowed to analyze pharmaceutical care practice in French hospitals.

The first step was the construction and validation of a codification scale as a tool to quote everyday interventions.

Design:

- 1) Establishment of the scale by a panel round table discussion of 6 experts clinical pharmacists.
- 2) Finalization in 3 main fields : problem identification (12 categories) , type of intervention (7 categories) and clinical impact of the intervention (3 categories).
- 3) Validation by a blinded cross-quotation of 60 pharmaceutical interventions by the experts (each of them has proposed 10 cases).

Setting: Units of Clinical Pharmacy in 6 different French hospitals *

Main outcome measures:

We have tested the level of agreement on answers among multiple raters with the kappa coefficient. Kappa positive]0 ; 1] : observed agreement exceeds chance agreement, with its magnitude reflecting the strength of agreement (+1 : complete , >0.81 : very good, >0.61 : good t, >0.41 : moderate, >0.21 : mediocre).

Results:

Each expert was able to codify all the 60 interventions with this scale. Among the 3 fields, the only one associated with a very good level of agreement was the type of intervention

(Kappa = 0.83 $p < 0.01$) allowing validation of this category. The Kappa of problem identification and clinical impact were respectively 0.53 and 0.26 (moderate and mediocre agreements) and were not enough to validate these categories. The experts were not in a fully agreement with the problem identification probably because of the high number of categories defined. The reduction of categories could allow a better quotation by decreasing the confusion between similar categories. According to the experts, there was a different interpretation of the clinical impact and we need to improve the definition by giving some examples.

Conclusion: This study showed the necessity to validate in practice a new scale before a wide diffusion even if there is a consensus in the definition of all categories of the scale. Next step will be to improve two of the three fields by simplifying the categories or/and giving examples.

* O Conort (Paris), P Bedouch (Grenoble), M Juste (Epernay), B Charpiat (Lyon), R Roubille (Vienne), L Augereau (Rennes), B Allenet (Grenoble)