



Pharmacy Residency Research Project Proposal

WORKING TITLE OF THE PROJECT

CLINICAL PHARMACIST INVOLVEMENT IN THE CARE OF TRAUMA PATIENTS: A CANADIAN NATIONAL SURVEY

PRINCIPAL INVESTIGATOR

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CO-INVESTIGATORS

Interior Health Pharmacy Practice Resident (TBD)
?Dr. Brenden Van der Westhuizen – Medical Director, Interior Health Trauma Network
Dr. Brooke Gessner
Dr. Sean Gorman
Dr. Richard Slavik
Allyson Thomas – Clinical Nurse Specialist, Interior Health Trauma Network

RESEARCH SITE(S)

Kelowna General Hospital

PROPOSED RESEARCH QUESTION(S)

POPULATION: CANADIAN LEVEL 1 AND 2 ADULT AND PEDIATRIC TRAUMA CENTERS AND LEVEL 3 ADULT TRAUMA CENTERS

INTervention: SURVEY OF PHARMACY LEADERS AT IDENTIFIED SITES

OUTCOMES: CHARACTERISTICS OF IDENTIFIED SITES, LOCATIONS WHERE CLINICAL PHARMACISTS PROVIDE CARE FOR TRAUMA PATIENTS, DESCRIPTION OF CLINICAL PHARMACISTS (TRAINING, ROLE/RESPONSIBILITIES), CLINICAL PHARMACIST ATTACHMENT TO TRAUMA TEAM

****POSSIBLE ADDITIONAL INTERVENTIONS/OUTCOMES TBD:**

- SECOND SURVEY DISTRIBUTED TO IDENTIFIED CLINICAL PHARMACISTS WHO CARE FOR TRAUMA PATIENTS (ASK THEM ABOUT INTERVENTIONS/ACTIVITIES THEY PROVIDE FOR TRAUMA PATIENTS, AWARENESS OF TRAUMA GUIDELINES/SOCIETIES, ETC.)?

- FOCUSED INTERVIEWS FOR A SELECT GROUP OF SURVEY PARTICIPANTS?

STUDY DESIGN: ONLINE SURVEY QUESTIONNAIRE

OBJECTIVES (SHOULD LINK TO OUTCOMES)

Describe the scope of clinical pharmacist involvement in the care of trauma patients at Canadian trauma centers.

RATIONALE (LIMIT TO 150 WORDS)

Trauma patients have complex drug therapy needs. Evidence supporting the benefit of clinical pharmacists who provide care to trauma patients (trauma pharmacists), although limited, does exist. A recent survey suggests that the rate of clinical pharmacist involvement in trauma resuscitations in American emergency departments is on the rise, but little is known about the scope of pharmacist involvement in the care of trauma patients outside of emergency departments. Indeed, even less is known about the scope of clinical pharmacist involvement in the care of trauma patients in Canada; including Canadian emergency departments.

The role of multidisciplinary team-based care for trauma patients is advancing in tandem with the role of the clinical pharmacist. However, clinical pharmacists are a finite resource. There are currently no consensus guidelines or white-papers that describe the place of clinical pharmacists in trauma systems/teams or which activities/interventions for trauma patients should be prioritized. In order to better define pharmacist roles and opportunities for high-value interventions it is important to first understand where and how clinical pharmacists are interacting with the trauma population. A survey examining the scope of clinical pharmacist involvement in the care of trauma patients at Canadian trauma centres will facilitate evaluation of this key question.

SIGNIFICANCE (LIMIT TO 100 WORDS)

No publications describing the scope of involvement of clinical pharmacists in the care of trauma patients in Canada has been published. Enhancing our understanding of how clinical pharmacists interact with the trauma population at Canadian trauma centres will help inform future research questions (a program of research) which will ideally culminate in the development of a consensus-based guideline outlining the role of the trauma pharmacist. Additionally, it is hoped that this work may facilitate the creation of a Canadian network or collaborative of pharmacists who care for trauma patients to facilitate knowledge and resource sharing, quality improvement, enhanced education, and research.

PROPOSED RESEARCH METHODS

This study will utilize an internet-based survey questionnaire +/- focused interviews (TBD). Canadian level 1 and 2 adult and pediatric trauma centres and level 3 adult trauma centres will be identified using a publicly available online registry published by the Trauma Association of Canada. The pharmacy

department at each identified trauma center will be contacted individually to request survey participation. Survey format, questions, etc. are TBD.

FUNDING SOURCES

No additional funding is being requested for this project

ANTICIPATED START DATE OF THE RESIDENCY PROJECT

July 1, 2024

ANTICIPATED END DATE OF THE RESIDENCY PROJECT (CONSIDER FOR FEASIBILITY OF RESIDENCY PROJECT)

May 31, 2025

PROJECT SUITABILITY (*FOCUS ON RESIDENCY PROJECT SUITABILITY*)

After consideration of the “**FINER**” criteria (Feasible, Interesting, Novel, Ethical, Relevant) I believe that the project meets all the Project Suitability Criteria. **YES**

EQUITY, DIVERSITY, INCLUSION CONSIDERATIONS (contact Sean if you have questions)

This proposed research has the potential to:

- ☐ Increase healthcare and health disparities (reconsider the design and methods to prevent this)
- ☐ Maintain healthcare and health disparities (reconsider the design and methods to prevent this)
- ☐ **Reduce healthcare and health disparities in equity-deserving groups (ideal)**