

Community Pharmacies at the Frontline for Tobacco Cessation: Insights from a Qualitative Study

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KEY TAKE-HOME POINTS

- Community pharmacies offer a viable and accessible venue for tobacco cessation services, enhancing patient care and engagement.
- Successful integration of these services relies heavily on staff buy-in, seamless integration into existing workflows, and effective documentation systems.
- Systemic barriers, including documentation of patient care activities in pharmacy electronic health records and reimbursement for clinical services, must be addressed to fully realize the potential of community pharmacy in public health initiatives.

BACKGROUND & OBJECTIVE

- Background:** Tobacco use remains a leading preventable cause of morbidity and mortality, with pharmacotherapy and counseling recognized as effective approaches for cessation. Twenty-three states permit pharmacists to prescribe medications for tobacco cessation. Given this, and that 89% of M Americans live within 5 miles of a community pharmacy, pharmacists are uniquely positioned to treat tobacco use and dependence.
- Objective:** To characterize community pharmacists' and pharmacy technicians' perceptions of facilitators and barriers to implementing tobacco cessation services, including prescribing, into routine practice within independent pharmacy settings.

METHODS

- Conducted in California, this qualitative study involved personnel from seven independently-owned community pharmacies within the Community Pharmacy Enhanced Services Network (CPESN) who had received training and had implemented a tobacco cessation patient care service.
- Key personnel, including nine pharmacists (7 owners and 2 managers) and seven lead technicians, were invited to participate in a 30- to 45-minute qualitative interview conducted via Zoom).
- Rogers' Diffusion of Innovations Theory served as the guiding framework for qualitative thematic analysis.

RESULTS

- Sixteen pharmacy personnel participated in individual interviews, and themes emerged for each of the five key Rogers' constructs. See Table 1.
- Relative Advantage:** The clear benefits of offering cessation services included accessibility and enhanced patient care. Participants noted increased patient engagement and satisfaction.
- Compatibility:** Services were largely seen as aligning well with existing pharmacy operations, with emphasis on the integration into existing workflows and the leveraging of established patient relationships. Staff engagement and the involvement of pharmacy technicians in initial patient screening and intake were crucial to the success of the tobacco cessation program, allowing pharmacists to focus on screening, medication selection and counseling.
- Complexity:** Key challenges involved navigating reimbursement processes, integrating cessation documentation into pharmacy systems, and tailoring services to diverse patient needs without overwhelming staff.
- Trialability:** Pharmacies experimented with different approaches to service delivery, from how to ask about tobacco use, to in-the-moment counseling versus scheduled follow-up sessions, adapting strategies based on patient and staff feedback.
- Observability:** Successes were shared within the pharmacy team and with the wider network, including patient success stories and the impact on pharmacy engagement, fostering a culture of continuous improvement.

CONCLUSION

- Community pharmacies can expand patient access to tobacco cessation services.
- Despite facing several challenges, pharmacies successfully initiated cessation services with variable delivery and follow-up practices.
- Addressing systemic barriers related to billing, documentation, and tailored training can further empower pharmacies to contribute significantly to public health efforts against tobacco use.

Table 1. Representative Quotes Mapped to Rogers' Diffusion of Innovation Constructs

Construct	Quote
Relative Advantage	"Patients can get it where they live, because there are pharmacies everywhere. We're flexible and that's good for patients and access."
Compatibility	"The ability of my staff to get engaged and excited about the program I think is huge. I think it would have been much harder if they weren't so on board with it."
Complexity	"Our biggest challenge remains reimbursement with the health plans not wanting to pay for it. Or they accept the claim, they process it, but then they actually pay us below the cost of getting the product in here, especially for the patches and the gum."
Trialability	"We started out asking, 'Are you a smoker?' and found that people would say, 'Oh no I don't smoke but I vape, or I chew...' so we switched it."
Observability	"They've [patients] mostly been all positive. We've had quite a few patients cut down dramatically, some even completely get off of tobacco, which is really exciting."

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