



# *Prescriber Update* Reader Satisfaction Survey

## Survey Outcome Report

Medsafe

July 2016



New Zealand Government

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## About Medsafe

- € Medsafe is the New Zealand Medicines and Medical Devices Safety Authority and is responsible for the regulation of therapeutic products in New Zealand through administration of the Medicines Act 1981.
- € Medsafe is a business unit of the New Zealand Ministry of Health.
- € Medsafe's Mission is: 'To enhance the health of New Zealanders by regulating medicines and medical devices to maximise safety and benefit.'
- € In working to achieve the stated mission Medsafe:
  - applies accepted international practice to the regulation of therapeutic products
  - provides efficient services measured against agreed stated performance indicators
  - prepares and maintains regulatory guidelines reflecting sound science and promoting evidence based decisions
  - applies processes that are consistent, transparent and minimise the costs of regulatory action
  - provides timely and unbiased information to healthcare professionals and consumers about the safe use of therapeutic products.

## Background

*Prescriber Update* is a safety bulletin written for healthcare professionals to provide information on safety concerns with medicines and medical devices. It provides information on medicine and medical device-related safety issues, emerging safety issues and actions taken by both Medsafe and medicine sponsors. It is published quarterly, in March, June, September and December of each year.

*Prescriber Update* was first published on 30 October 1957 as *Therapeutic Notes*. *Therapeutic Notes* was originally published as a small double-sided printed leaflet. Over time, the content has increased. The name changed to *Prescriber Update* and distribution is now through a number of channels, predominantly via mail and email. Each edition is mailed out to approximately 11 000 individuals and emailed to over 4 000 individual subscribers. *Prescriber Update* is also sent via email to 5th year medical students and trainee interns at both the Auckland and Otago Schools of Medicine and distributed to pharmacy interns through the Pharmaceutical Society of New Zealand (PSNZ) Evolve programme. In addition, Medsafe has recently undertaken to increase the exposure of *Prescriber Update* via the New Zealand District Health Boards (NZ DHBs). A number of DHBs now publish links to *Prescriber Update* on their intranet sites and/or inform staff via email that new editions have been released.

## Introduction

In March 2016, the *Prescriber Update* editorial team undertook a reader satisfaction survey. The aim of the survey was to determine whether readers find *Prescriber Update* a valuable tool and to gather information on how Medsafe's *Prescriber Update* editorial team could improve the publication. The survey was conducted online using Survey Monkey and publicised to readers through an article on page 3 of the March 2016 edition of *Prescriber Update*. A reminder was placed on the Medsafe website on 17 March 2016. Two email reminders were sent to those subscribed to receive *Prescriber*

*Update* electronically. The survey was open for just over one month from the date of publication (3 March 2016), closing on Friday 8 April 2016.

## Survey Questions

The survey consisted of the following 11 questions:

1. What is your profession?
  - a. Hospital Doctor
  - b. GP
  - c. Hospital Nurse
  - d. Community Nurse
  - e. Nurse Prescriber
  - f. Hospital Pharmacist
  - g. Community Pharmacist
  - h. Consumer
  - i. Other, please describe:
2. Do you read *Prescriber Update*?
  - a. Yes, from cover to cover
  - b. Yes, key messages only
  - c. Yes, if relevant to my work
  - d. Yes, if I have time
  - e. No
3. How relevant is *Prescriber Update* to your work?
  - a. Relevant to my work
  - b. Somewhat relevant to my work
  - c. Not relevant to my work but informative
  - d. Not relevant to my work
  - e. Other, please describe:
4. How do you currently read/access *Prescriber Update* articles? (select as many as applicable)
  - a. Hard copy, delivered to my home
  - b. Hard copy, delivered to my place of work
  - c. PDF version sent to me electronically
  - d. Online articles sent to me electronically
  - e. Through Medsafe's website, when searching for information on a particular subject
  - f. Through search engines (eg, Google)
  - g. Other, please describe:
5. Overall, how satisfied are you with the current format of *Prescriber Update*?
  - a. Unsatisfied
  - b. Somewhat unsatisfied
  - c. Satisfied
  - d. Somewhat satisfied
  - e. Very satisfied
6. What would be your preferred way of receiving/reading *Prescriber Update*?
  - a. By mail, addressed to me

- b. By mail, with one or more sent to the practice/hospital department/pharmacy (number sent dependent on size of practice/department)
  - c. By email, in PDF format only
  - d. By email, with links to the articles on Medsafe's website
  - e. Through an App
7. How frequently would you like to receive *Prescriber Update*?
- a. Every two months
  - b. Every three months (current frequency)
  - c. Every four months
  - d. Every six months
  - e. Every six months, with monthly updates of important safety concerns sent to me electronically
8. What types of articles would you like to see more of? (select as many as applicable)
- a. I like the current balance of articles
  - b. Safety briefings reporting on a specific medicine and adverse reaction
  - c. Reviews about the safety of a specific medicine or class of medicine
  - d. Reviews about a specific adverse reaction
  - e. Articles on pharmacodynamics or pharmacokinetics of a medicine(s)
  - f. Complementary Corner
  - g. Reminders of recently published safety communications
  - h. Occasional spotlight on a particular therapeutic class or class of medicine
  - i. Invited reviews from experts in the field
  - j. Information on Medsafe's processes and what we do. Please comment below.
  - k. Other, please describe:
9. Are there any changes that you would like to see to *Prescriber Update*? (select as many as applicable)
- a. I like the current format
  - b. Fewer articles per edition
  - c. Shorter articles
  - d. Longer articles
  - e. Use of pictures/photos where relevant
  - f. Other, please describe:
10. What do you think of the key messages? (select as many as applicable)
- a. I find the key messages informative
  - b. I do not find the key messages useful
  - c. Inclusion of a short summary (1–2 sentences) of articles on the cover page would be useful
  - d. The title is informative enough, no key messages needed
  - e. Other, please describe:
11. Do you have any other comments, questions, or feedback?

Thank you for completing this survey. Your opinion/thoughts are important to us.

You can sign up to receive *Prescriber Update* direct to your inbox. When you sign up electronically, an option is available to opt out of receiving a hard copy ([www.medsafe.govt.nz/profs/subscribe.asp](http://www.medsafe.govt.nz/profs/subscribe.asp)).

Alternatively, if you already receive *Prescriber Update* electronically and no longer wish to receive a hard copy as well, please email [medsafecommunications@moh.govt.nz](mailto:medsafecommunications@moh.govt.nz)

## Survey Results

### Response Rate

As of 14 January 2016, 4 153 individuals had subscribed to receive *Prescriber Update* electronically. A printed copy of the March 2016 edition of *Prescriber Update* was sent to 10 857 individuals.

*Prescriber Update* was also sent via email to 5th year medical students and trainee interns at both the Auckland and Otago Schools of Medicine, distributed to pharmacy interns through the PSNZ and NZ DHBs as described in Background. However, Medsafe does not have access to these distribution figures.

A total of 352 individuals participated in the survey, representing 8.5% of individuals subscribed to receive *Prescriber Update* electronically or 2.3% of the total number of recipients (4 153 + 10 857 = 15 010; assuming no overlap between those receiving the electronic and hard copies and excluding 5th year medical students, trainee interns, pharmacy interns and those accessing it via DHB intranets as exact numbers are not known).

Of note, over 300 responses were received within 10 days of the survey closing, following email reminders sent to those subscribed to receive *Prescriber Update* electronically. Therefore, it is assumed that the majority of responses came from those accessing *Prescriber Update* electronically. This may have biased the results of the survey thereby limiting the generalisability of the results to the wider readership.

## Results

### Question One: What is your profession?

The response rate to this question was 100%, all 352 participants provided a response (Table 1).

**Table 1: Professions of survey participants**

What is your profession?	Count	Percent
Hospital Doctor	35	9.9%
GP	46	13.1%
Hospital Nurse	12	3.4%
Community Nurse	19	5.4%
Nurse Prescriber	28	8%
Hospital Pharmacist	62	17.6%
Community Pharmacist	43	12.2%
Consumer	6	1.7%
Other, please describe:	101	28.7%
<b>Answered question</b>	<b>352</b>	
<b>Skipped question</b>	<b>0</b>	

A number of the responses to ‘Other, please describe’ included pharmacist, doctor or nurse but were described as more specialist roles such as nurse practitioner, advisory pharmacist, clinical nurse specialist, and private medical specialist. Midwife was also added to the categories, as this was a frequent response. Therefore, the results were re-analysed using the following categories: doctor, nurse, pharmacist, consumer and other (Table 2). The results show that there was a relatively even spread of responses from doctor, nurse and pharmacist professions.

**Table 2: Professions of survey respondents, re-analysed into the six most common responses – doctor, nurse, pharmacist, midwife, consumer and other**

What is your profession?	Count	Percent
Doctor	89	25.3%
Nurse	70	19.9%
Pharmacist	120	34.1%
Midwife	14	3.9%
Consumer	7	2%
Other	52	14.8%
<b><i>Answered question</i></b>	<b>352</b>	
<b><i>Skipped question</i></b>	<b>0</b>	

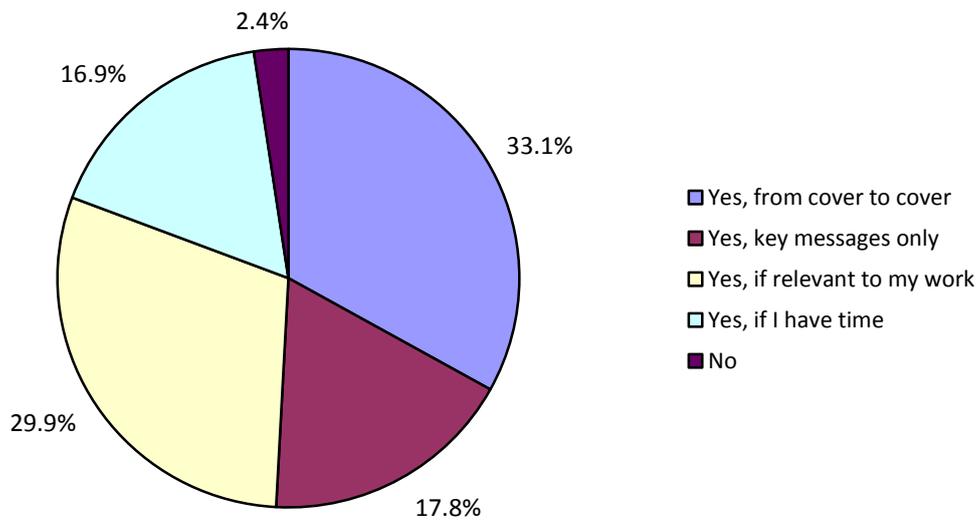
Other professions reported were Academic, Advisor, Anaesthetic Technician, Dentist, Dietician, Editor, Herbalist, Media, Naturopath, Nutritionist, Optometrist, Regulator, Researcher, Sponsor (Industry) and Veterinary Scientist.

***Question Two: Do you read Prescriber Update?***

The response rate to this question was 96%, 338 participants provided a response.

As shown in Figure 1, 33.1% of respondents read *Prescriber Update* from cover to cover. Nearly half of respondents only read it if they have time or it is relevant to their work. Key messages are only read by 17.8% of respondents.

Eight (2.4%) respondents reported not reading *Prescriber Update*. Of these, there were five professions (doctor, pharmacist, nurse, dietician and herbalist). Five of the respondents reported working in a hospital setting. One respondent (dietician) reported that they had not read it as they had recently subscribed to receiving the publication. Three of these eight respondents reported not receiving the publication although they believed they had subscribed to receive it.

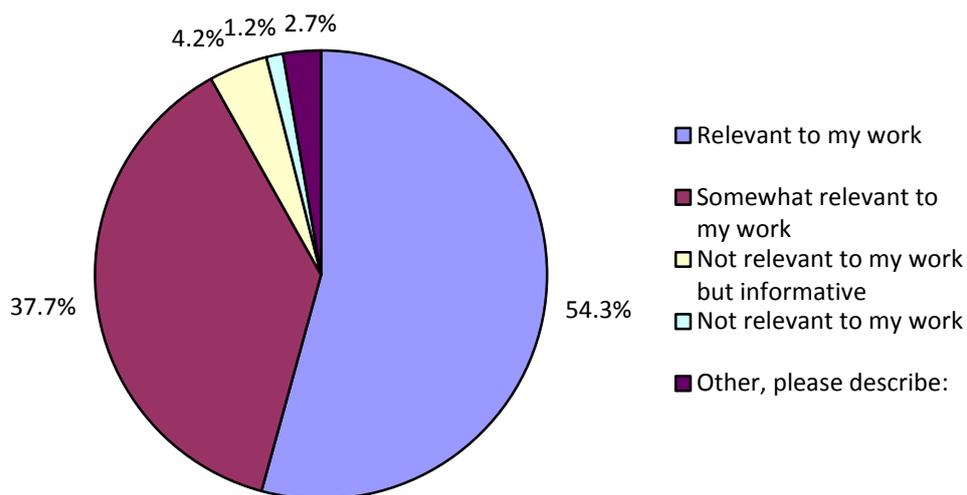


**Figure 1: Responses received from Question Two - Do you read *Prescriber Update*?**

**Question Three: How relevant is *Prescriber Update* to your work?**

The response rate to this question was 95.7%, 337 participants provided a response.

As shown in Figure 2, 92% of respondents find *Prescriber Update* relevant or somewhat relevant to their work.



**Figure 2: How relevant *Prescriber Update* is to respondents work**

Nine 'Other' responses were received. The themes from these responses are summarised below.

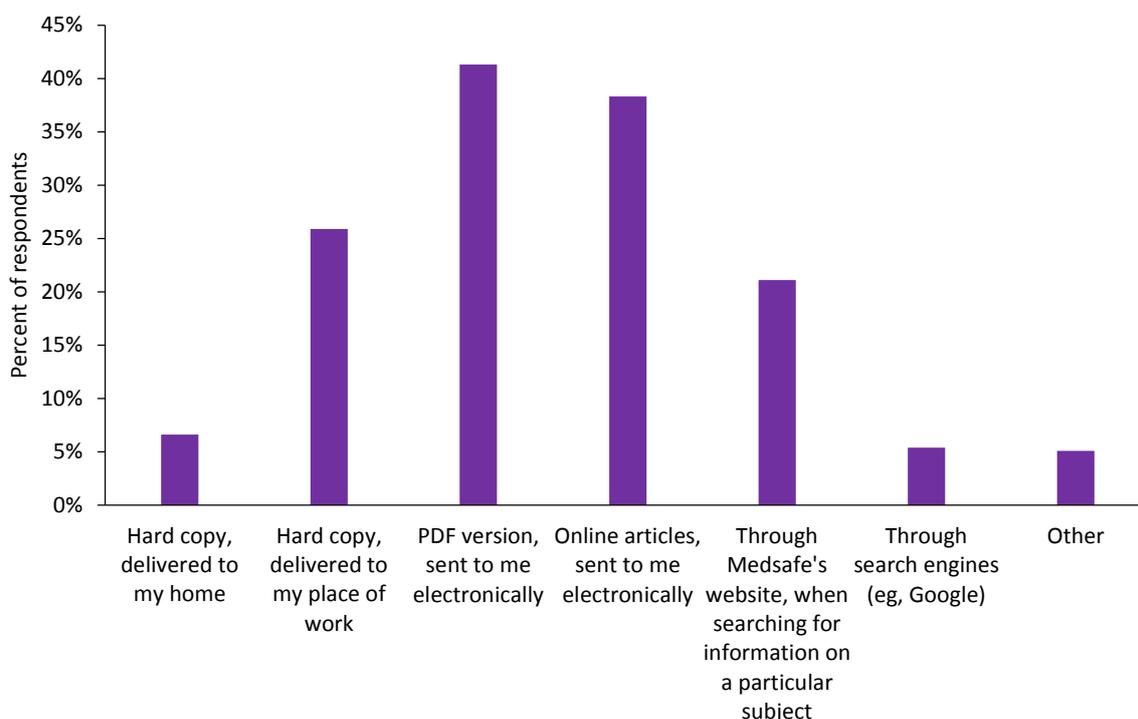
- *Prescriber Update* keeps international regulators informed about New Zealand therapeutic product safety issues.
- The purpose of the articles is not always clear.
- *Prescriber Update* keeps readers updated with relevant information.

**Question Four: How do you currently read/access *Prescriber Update* articles? (select as many as applicable)**

The response rate to this question was 94.3%, 332 participants provided a response.

Figure 3 shows that survey respondents most frequently access *Prescriber Update* electronically. This result should be interpreted with caution as the survey was conducted online and the majority of responses were received after email survey reminders were sent to the *Prescriber Update* email distribution list.

Respondents also reported that they accessed *Prescriber Update* after a peer recommended they read an article, through Medsafe’s website and clinical sites such as HealthPathways.



**Figure 3: How *Prescriber Update* is being read/accessed**

**Question Five: Overall, how satisfied are you with the current format of *Prescriber Update*?**

The response rate for this question was 94%, 331 participants provided a response.

Table 3 shows that on average respondents are at least satisfied with the current format of *Prescriber Update* and 32% of respondents are very satisfied with the current format.

**Table 3: How satisfied respondents are with the current format of *Prescriber Update***

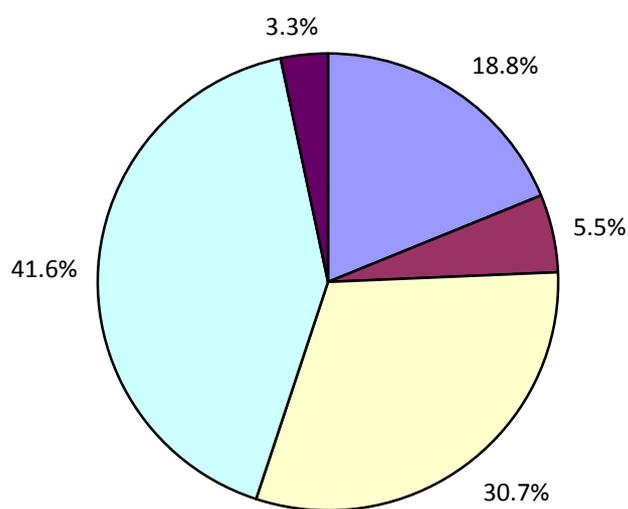
Overall, how satisfied are you with the current format of <i>Prescriber Update</i> ?	Unsatisfied (1)	Somewhat unsatisfied (2)	Satisfied (3)	Somewhat satisfied (4)	Very satisfied (5)	Rating Average	Response Count
	4	13	127	81	106	<b>3.82</b>	331
<i>Answered question</i>							<b>331</b>
<i>Skipped question</i>							<b>21</b>

**Question Six: What would be your preferred way of receiving/reading *Prescriber Update*?**

The response rate to this question was 93.5%, 329 participants provided a response.

The majority (72.3%) of respondents would prefer to receive *Prescriber Update* electronically, in PDF format only or with links to articles on Medsafe’s website (Figure 4). Currently, links to both the PDF version and individual articles are sent to those receiving *Prescriber Update* via email. Similar to question four, this result may be biased due to the majority of responses being received after email survey reminders were sent to the *Prescriber Update* email distribution list. Five comments asked Medsafe to keep the hard copy version.

Only 3.3% (11) of the respondents would prefer to receive *Prescriber Update* by way of an App.



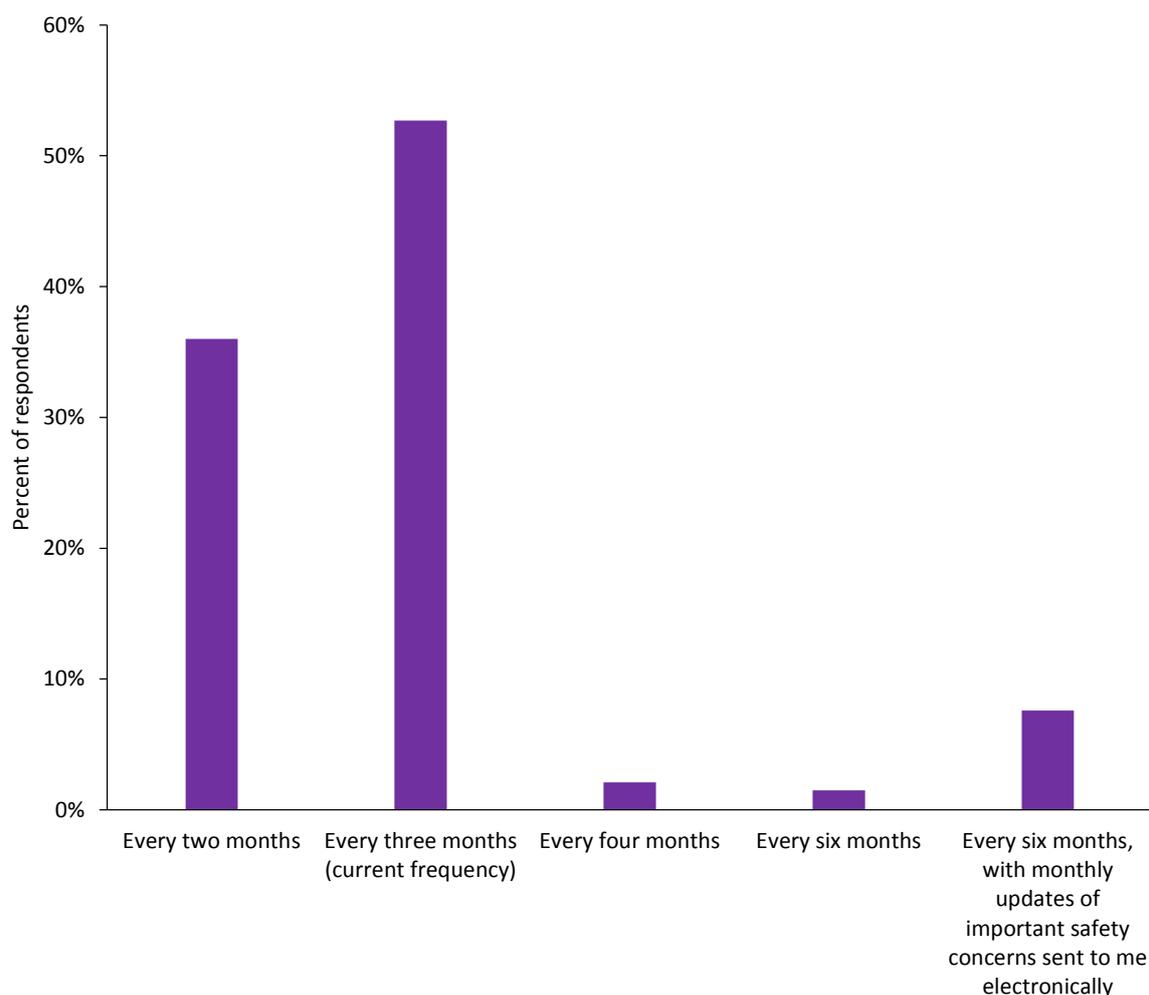
- By mail, addressed to me
- By mail, with one or more sent to the practice/hospital department/pharmacy (number sent dependent on size of practice/department)
- By email, in PDF format only
- By email, with links to the articles on Medsafe's website
- Through an App

**Figure 4: Ways in which survey respondents would prefer to receive *Prescriber Update***

**Question Seven: How frequently would you like to receive *Prescriber Update*?**

The response rate to this question was 93.2%, 328 participants provided a response.

Half (52.7%) of respondents like the current publication frequency (three monthly) (Figure 5). A further 36% of respondents would like to receive *Prescriber Update* every two months, while 7.6% of respondents would like to receive *Prescriber Update* every six months with monthly updates of important safety information sent to them electronically.



**Figure 5: How frequently respondents would like to receive *Prescriber Update***

**Question Eight: What types of articles would you like to see more of? (select as many as applicable)**

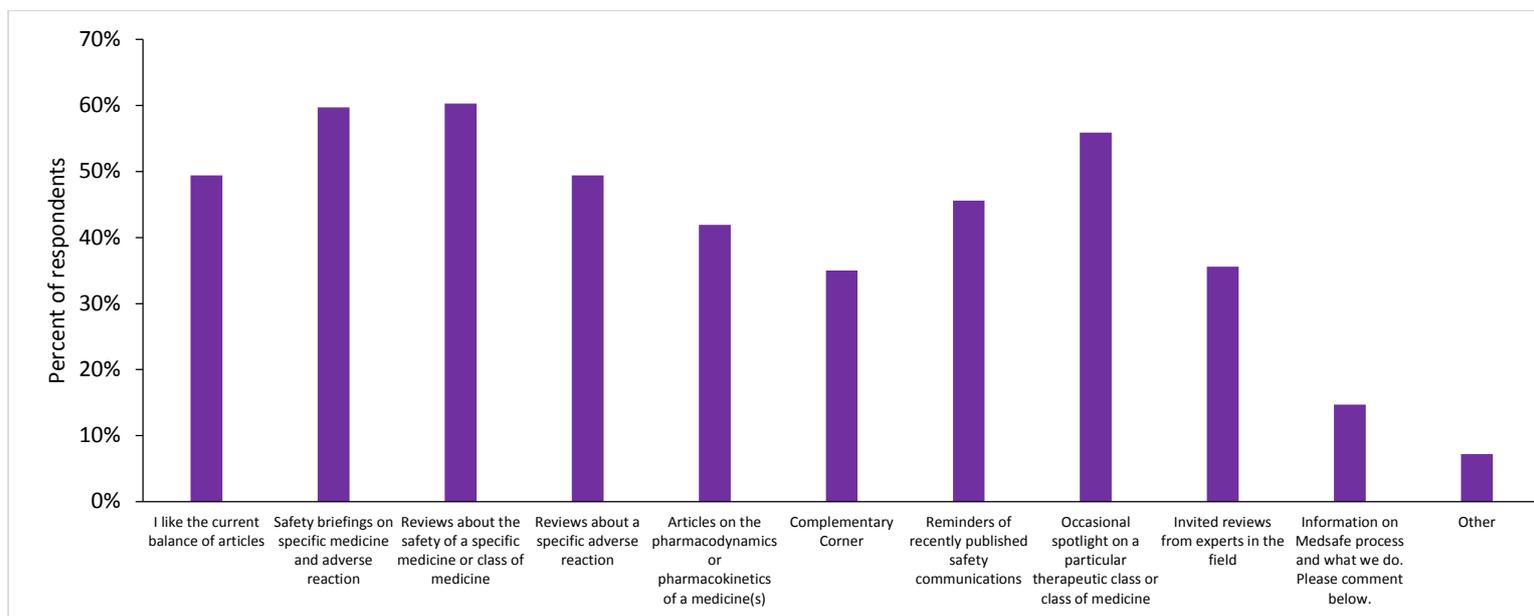
The response rate to this question was 91%, 320 participants provided a response.

Half (49.4%) of respondents like the current balance of articles.

There was a wide range of articles readers would like to see more of in *Prescriber Update* (Figure 6). The following topics were the most popular, with approximately 50% or more of respondents saying they would like to see more of the following.

- ☞ Safety briefings reporting on a specific medicine and adverse reaction.
- ☞ Reviews about the safety of a specific medicine or class of medicine.
- ☞ Reviews about a specific adverse reaction.
- ☞ Occasional spotlight on a particular therapeutic class or class of medicine.

14.7% of respondents wanted information on Medsafe’s processes and what Medsafe does. Approximately 35% of respondents wanted more invited reviews from experts in the field and Complementary Corner.



**Figure 6: Types of articles respondents would like to see more of in *Prescriber Update***

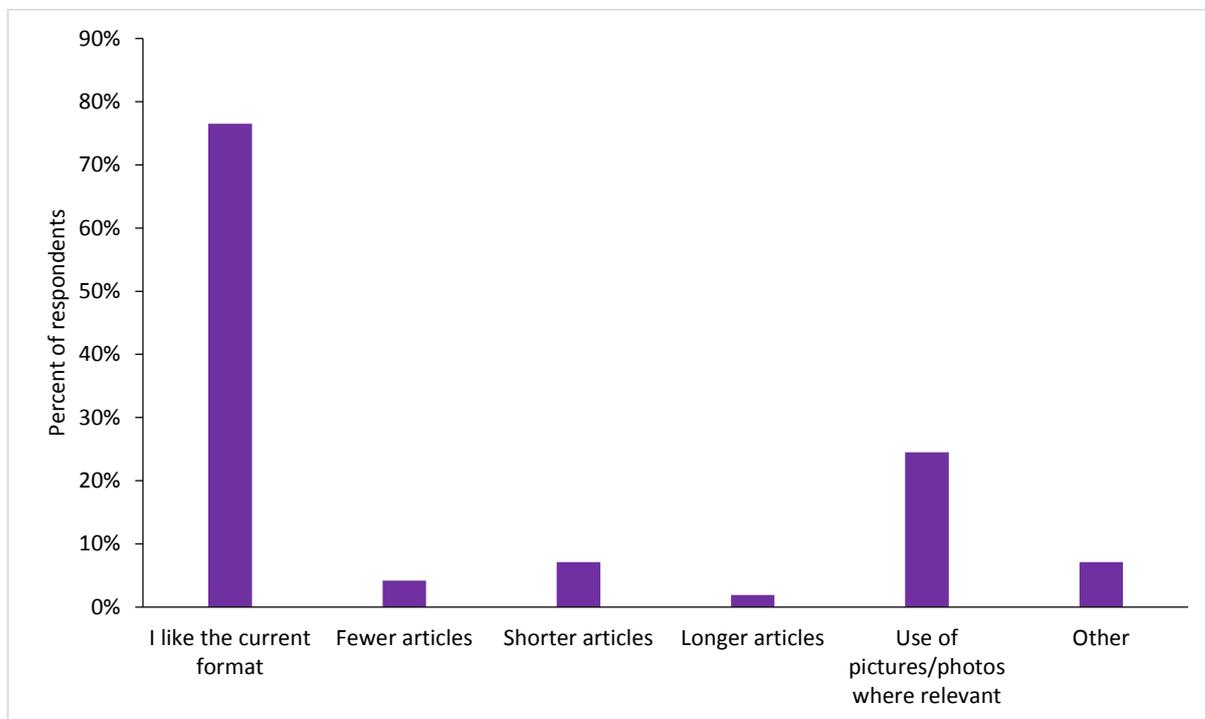
A total of 23 ‘Other’ comments were received about what respondents would like to see more of in *Prescriber Update*. The themes from these comments are summarised below.

- Questions about Medsafe’s function and processes.
- More information about the CARM case reports (eg, case ID numbers).
- More information on medicine interactions.
- Articles that are written or reviewed by experts.
- Understanding medicine advertisements, including bias.
- Information on newly approved/available medicines.
- Herbal product information.
- Management of medicines purchased online.

**Question Nine: Are there any changes that you would like to see to *Prescriber Update*? (select as many as applicable)**

The response rate to this question was 88%, 310 participants provided a response.

Over 75% of respondents like the current format while 25% said they would like to see the use of pictures/photos where relevant (Figure 7).



**Figure 7: Changes that respondents would like to see to *Prescriber Update***

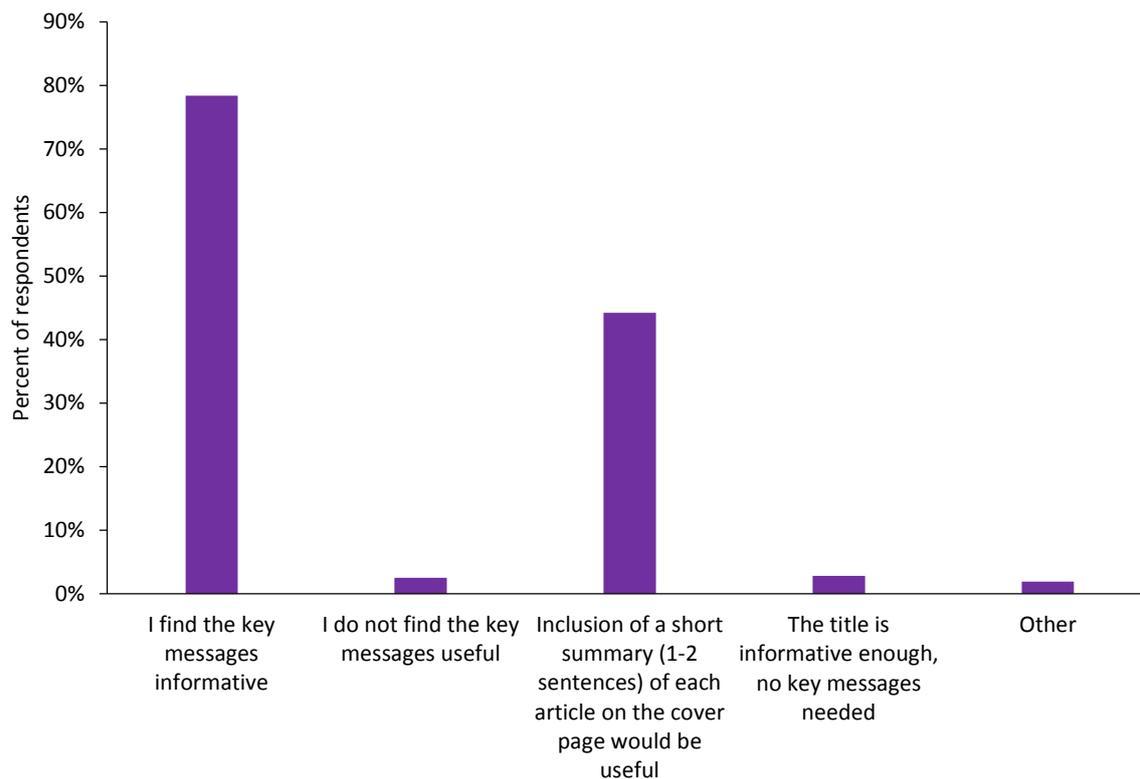
A total of 22 ‘Other’ comments were received on the changes respondents would like to see to *Prescriber Update*. The themes from these comments are summarised below.

- Additional, more regular articles with a mix of short and long articles.
- Recent references used in articles.
- Re-design the publication.
- Articles that have specific instructions and direct actions.
- Articles on look-alike and sound alike medicines.
- Reviews by clinical experts.
- Make key messages more accessible.
- Include a short summary of the article on the contents page and email sent to subscribers.

**Question Ten: What do you think of the key messages? (select as many as applicable)**

The response rate to this question was 91%, 319 participants provided a response.

Figure 8 shows that almost 80% of respondents find the key messages informative and nearly half (44.2%) consider that inclusion of a short summary (one to two sentences) of each article on the cover page would be useful.



**Figure 8: What respondents think about *Prescriber Update's* key messages**

Six 'Other' comments on what respondents think about *Prescriber Update's* key messages were received. The themes of these comments are summarised below.

- ☞ Continue with key message bullet points.
- ☞ Include key messages in the email sent to subscribers.
- ☞ Review article titles.
- ☞ Articles should focus on the basics and facts.
- ☞ Limit long articles unless necessary.

*Question Eleven: Do you have any other comments, questions or feedback?*

Seventy-four comments were received. A summary of the most frequently mentioned words are presented in the following diagram.



**Figure 9: Diagram of the most frequently mention words in the survey. The larger the word, the greater the frequency it was used by respondents when providing comments in the survey.**

## Summary of Survey Results

- ☞ The survey included 352 participants, representing 8.5% of individuals subscribed to receive *Prescriber Update* electronically and 2.3% of the estimated total number of recipients.
- ☞ The response rate per question dropped throughout the survey.
- ☞ There was an even spread of participants from the target audience; doctors (25.3%), pharmacists (34.1%) and nurses (19.9%).
- ☞ *Prescriber Update* is read from cover to cover by a third (33.1%) of respondents. Nearly half of respondents only read it if they have time or it is relevant to their work, and 17.8% only read the key messages.
- ☞ *Prescriber Update* is relevant (54.3%) or somewhat relevant (37.7%) to the work of 92% of respondents.
- ☞ Respondents most frequently access *Prescriber Update* electronically. However, only 3.3% (11) of the respondents would prefer to receive *Prescriber Update* by way of an App.
- ☞ Respondents (70%) are satisfied or very satisfied with the current format of *Prescriber Update*. However, 25% said they would like to see the use of pictures and/or photos where relevant.
- ☞ Respondents (72.3%) would prefer to receive *Prescriber Update* electronically, in PDF format only or with links to articles on Medsafe's website.
- ☞ Half (52.7%) of respondents like the current publication frequency (three monthly). A further 36% of respondents would like to receive *Prescriber Update* every two months.
- ☞ Respondents would like to see a wider range of articles in *Prescriber Update*. However, 49.4% of respondents like the current balance of articles. The top three article topics readers would like to see more of include the following.
  1. Reviews about the safety of a specific medicine or class of medicine.
  2. Safety briefings reporting on a specific medicine and adverse reaction.
  3. Occasional spotlight on a particular therapeutic class or class of medicine.
  4. Information on new medicines.
- ☞ Almost 80% of respondents find the key messages informative. Nearly 20% said they only read the key messages.
- ☞ Respondents (44.2%) said inclusion of a short summary (1 to 2 sentences) of each article on the cover page would be useful.

## Next steps

Medsafe is aware that the survey was conducted online only with a low response rate, which affects results. In response to the survey results, Medsafe will consider the following.

- ☞ A move to an electronic/online publication only. Benefits may include the following.
  - Potential reduced print and distribution costs (requires cost analysis).
  - Enables implementation of some survey recommendations (eg, short summaries of articles on the cover page, redesign the publication, use of pictures and/or photos).
- ☞ A hybrid model may be used to ensure *Prescriber Update* does not lose readers as a result of abruptly moving to an online only publication.
  - The model may include mailing hard copies to organisations, businesses (eg, pharmacies) and to those that opt-in to receive a hard copy. The printed copy could then be gradually phased out or, dependant on demand, the hybrid model could remain.
  - A hybrid model may help reduce waste as a large number of hard copies are returned.
- ☞ Including key messages in the email sent to subscribers.
- ☞ Including a short summary (one to two sentences) of each article on the cover page of the PDF and hard copy.
- ☞ Use of pictures and/or photos.
  - This is possible if *Prescriber Update* moves to online only as there are colour limitations with the printed copy.
- ☞ Publishing articles on the following topics.
  - Reviews about the safety of a specific medicine or class of medicine.
  - Safety briefings reporting on a specific medicine and adverse reaction.
  - Occasional spotlight on a particular therapeutic class or class of medicine.
  - Medsafe functions and procedures.
  - Annual review of medicine interactions reported to CARM.
- ☞ Including a 'New Medicine Briefing' table in *Prescriber Update*.
  - Summary of medicines that have been given consent for distribution during the preceding three months.
- ☞ Reviewing the name of the publication to better reflect the wider readership.
  - Must consider recognition of the publication by title.
- ☞ Ensuring it is clear why articles are being published in *Prescriber Update* (eg, recent safety issues, CARM case report).
- ☞ Increasing *Prescriber Update* advertising channels to ensure the publication continues to reach the target audience.
- ☞ Including CARM case ID numbers and link to SMARS in the reference list of the articles where appropriate.
- ☞ Adding the details of the reviewer at the end of the article with their permission (if space permits).