

Data Collection Methodology

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An initial list of hospital pharmacies was prepared, based on respondents to previous surveys, hospital pharmacies on the mailing list of the Hospital Pharmacy in Canada Annual Report website, hospital pharmacies suggested by the members of the Editorial Board of the Hospital Pharmacy in Canada Annual Report, and the membership list of the Association of Canadian Academic Healthcare Organizations (ACAHO). A telephone survey of these hospitals was conducted in order to obtain the current name and e-mail address of the Director of Pharmacy and the hospital's Chief Executive Officer, and to attempt to confirm each hospital's eligibility based on the number of their acute beds (≥ 50) and their total number of beds (≥ 100).

A final list of 203 hospitals was then prepared, based on the information collected. This list included 41 teaching hospitals that were members of the ACAHO. This list did not include mental health facilities that were handled as a separate group.

The Hospital Pharmacy in Canada survey was announced in e-mails sent to Directors of Pharmacy and to CEOs of the 203 hospitals during the period of June 23 - 27, 2006. A second e-mail was sent only to the Directors of Pharmacy between July 3 and July 5, 2006. This letter contained the respondent identification and the password required to log on to the survey web site. Respondents who had not completed the on-line survey received weekly reminders starting on July 26, 2006.

The respondent identification (user ID) and the password enabled a respondent to log on to the survey website at any time and to complete any part of the questionnaire. The first page of the website contained instructions for completing the survey. The survey questions were distributed over 22 web pages. From any page a respondent was able to move to any other page of the online survey. A respondent was also able to change the language of the questionnaire and respond to questions in English or French.

Online survey completion was interactive. If secondary questions were to be skipped in the event of a "no" or "yes" answer to the primary question, the on-line program presented a modified version of the questionnaire, without the non-applicable questions, after a screening question had been answered and saved. The program also warned respondents if they had entered numbers that were too high or too low, based on a preset range of expected minimum and maximum values, or if they had entered non-numeric information in fields that required numeric answers.

Questionnaires were included in the analyses if more than 25% of key questions had been answered by October 2, 2006 and if the hospital's bed size was known. Using these criteria, data from 142 hospital pharmacies could be analyzed. Ten hospital pharmacies did not qualify because they did not meet the bed size. The overall response rate, calculated on the basis of the remaining 193 eligible hospitals, was then 74%. The response rate for teaching hospitals was 90% and the response rate for non-teaching hospitals was 69%. The actual response rate for non-teaching hospitals may be higher because it is not known if there are more non-qualifying hospitals among the 27 hospitals who never logged on to the survey website.