



COMPASS
Project

薬局を地域のソーシャルキャピタルに： COMPASS研究の結果から

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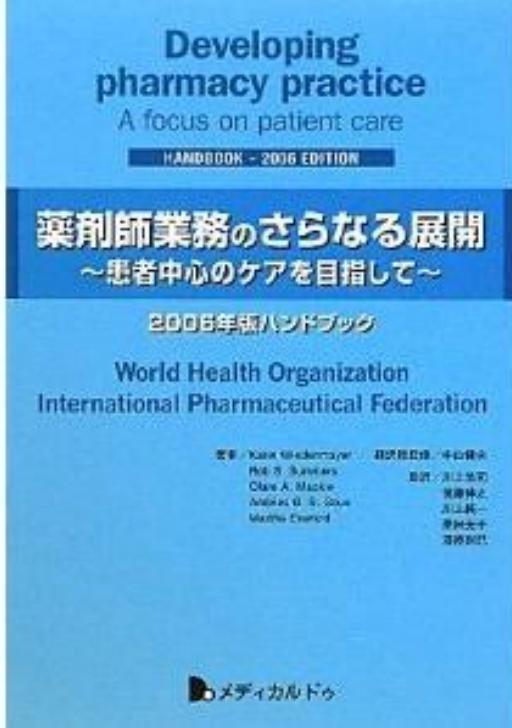
ソーシャル・キャピタル（社会関係資本）

人々が信頼し協力し合う社会では健康状態が良好

「信頼」、「互酬性」（助け合い）、「ボランティア」、「社会参加」、「投票率」（政治への信頼）などが調査される。



近藤克則 健康格差社会



Developing Pharmacy Practice A focus on patient care

「薬剤師業務のさらなる展開」
～患者中心のケアを目指して～

薬剤師はカウンターの奥から出て、薬を手渡すだけでなく、患者ケアの提供を通じた社会への貢献を始めるべきである。

調剤という単なる作業そのものに未来はない。

薬局の処方せん調剤を越える業務



薬剤師とヘルスプロモーション：FIPガイド



Three FIP guide covers are shown side-by-side:

- Establishing tobacco-free communities** (2015): A practical guide for pharmacists. It features a photo of a pharmacist in a white coat breaking a cigarette.
- Nutrition and weight management services** (2021): A toolkit for pharmacists. It features a photo of various healthy foods like fruits, vegetables, and nuts.
- Empowering self-care** (2022): A handbook for pharmacists. It features a photo of a pharmacist in a white coat talking to a man in a grey shirt.

Below each guide is a large Japanese character: 禁煙 (Kinshu - No Smoking), 食事・減量 (Shokuji - Diet), and セルフケア (Selphukae - Self-care).



メンタルヘルス、ワクチン、女性、災害医療

カナダ薬剤師の果たす役割

AB:アルバータ州は全範囲実施可能(COVID-19以降、現在)

	BC	AB	SK	MB	ON	QC	NB	NS
Prescriptive Authority (Schedule 1 Drugs) 新規処方 Initiate ^{1,2}	Independently, for any Schedule 1 drug	X	✓ ⁴	X	X	X	X	X
	In a collaborative practice setting/agreement	X	✓ ⁴	✓ ⁴	✓ ⁴	X	✓	✓
	For minor ailments/conditions	✓	✓	✓	✓ ⁴	✓	✓	✓
	For smoking/tobacco cessation	✓	✓	✓	✓ ⁴	✓	✓	✓
	In an emergency	✓ ⁶	✓	✓ ⁶	✓ ⁷	✓	✓	✓
Adapt/Manage ^{1,3} 継続処方	Make therapeutic substitution	✓	✓	✓ ⁸	X	X	✓	✓
	Change drug dosage, formulation, regimen, etc.	✓	✓	✓ ⁸	✓	✓	✓	✓
	Renew/extend prescription for continuity of care	✓	✓	✓	✓	✓	✓	✓
Injection Authority (SC or IM) ^{1,4} 注射処方	Drugs ⁵	✓	✓	✓	✓	✓	✓	✓
	Vaccines ⁵	✓	✓	✓	✓	✓	✓	✓
	Influenza vaccine	✓	✓	✓	✓	✓	✓	✓
臨床検査	Order and interpret lab tests	X	✓	P ⁹	✓ ¹⁰	X	✓	P ⁹
	Techs テクニシャン	Regulated pharmacy technicians	✓	✓	✓ ¹²	✓	X	✓

BCブリティッシュコロンビア
ABアルバータ
SKサスカチュワン
MBマニトバ
ONオンタリオ
QCケベック
NBニューブランズウィック
NSノバスコシア

イギリス：薬局は健康とウェルビーイングを促進 (NICE)

NICE National Institute for Health and Care Excellence

Search NICE...  Sign in

Guidance Standards and indicators Life sciences British National Formulary (BNF) British National Formulary for Children (BNFC) Clinical Knowledge Summaries (CKS) About

Read about [our approach to COVID-19](#)

Home > NICE Guidance > Health and social care delivery > Medicines management

Community pharmacies: promoting health and wellbeing

Quality standard [QS196] Published: 28 August 2020

Quality standard Tools and resources History

Overview

Quality statements

Quality statement 1: Advice and education

Quality statement 2: Expertise and services available from community pharmacy teams

Quality statement 3: Integrating services into care and referral pathways

Quality standard

This quality standard covers how community pharmacies can support the health and wellbeing of the local population. It describes high-quality care in priority areas for improvement.

[Download \(PDF\)](#) 

 This quality standard was developed before the coronavirus pandemic and is intended to support quality improvement as services return to normal. Please tell us if there are any particular issues relating to COVID-19 affecting its use that should be highlighted.

NICE National Institute for Health and Care Excellence

Public Health England

NICE guideline
Published: 2 August 2018
www.nice.org.uk/guidance/ng102

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イギリス：薬局は予防・公衆衛生の中心（英國 健康安全局）

Pharmacy playing a pivotal role in prevention and public health

Gul Root. 28 June 2019 - [Health Improvement](#). [Health Protection](#). [Prevention](#)

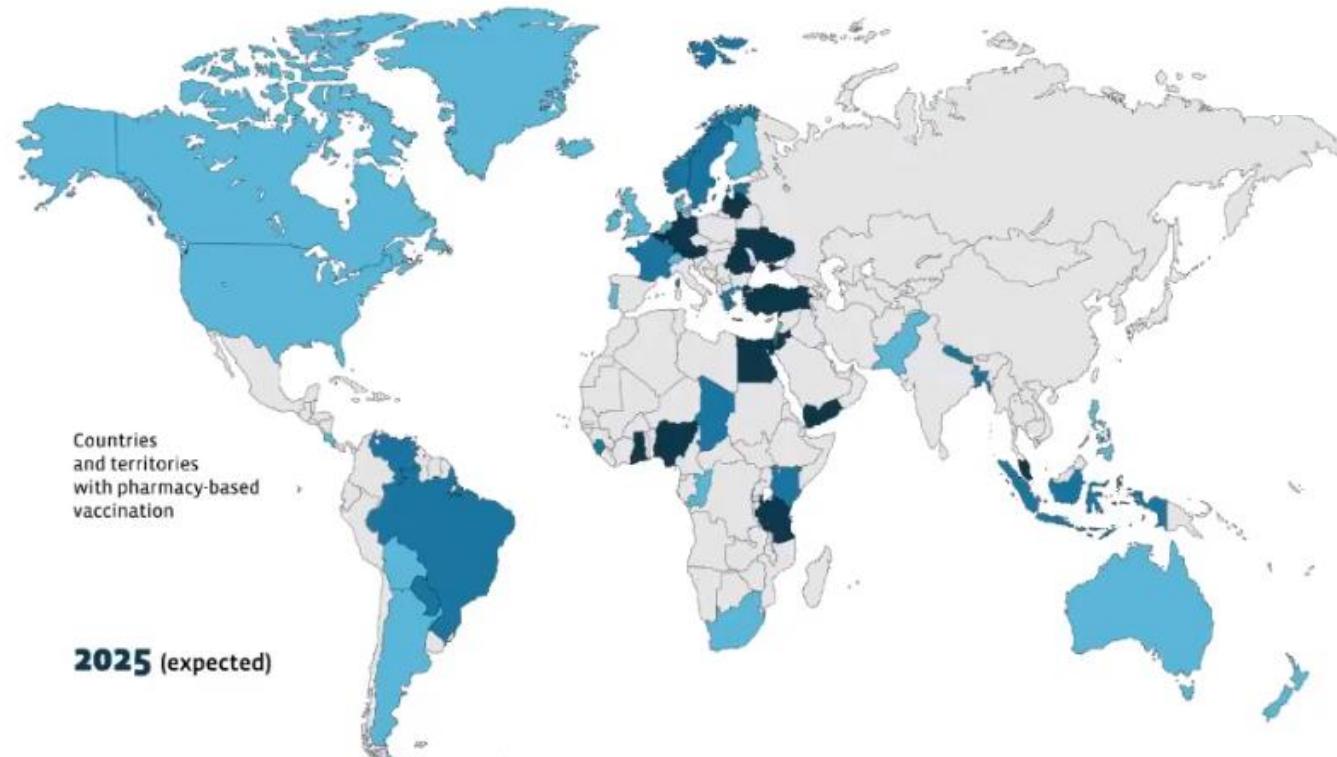


1. Cardiovascular disease (CVD)
2. Smoking (禁煙)
3. Sexual health, reproductive health and HIV (SRHR)
4. Healthy ageing (高齢者)
5. Mental health (精神)
6. Vaccination (ワクチン接種)

薬局でのワクチン接種 2025年 52か国

Countries and territories with pharmacy-based vaccination

52

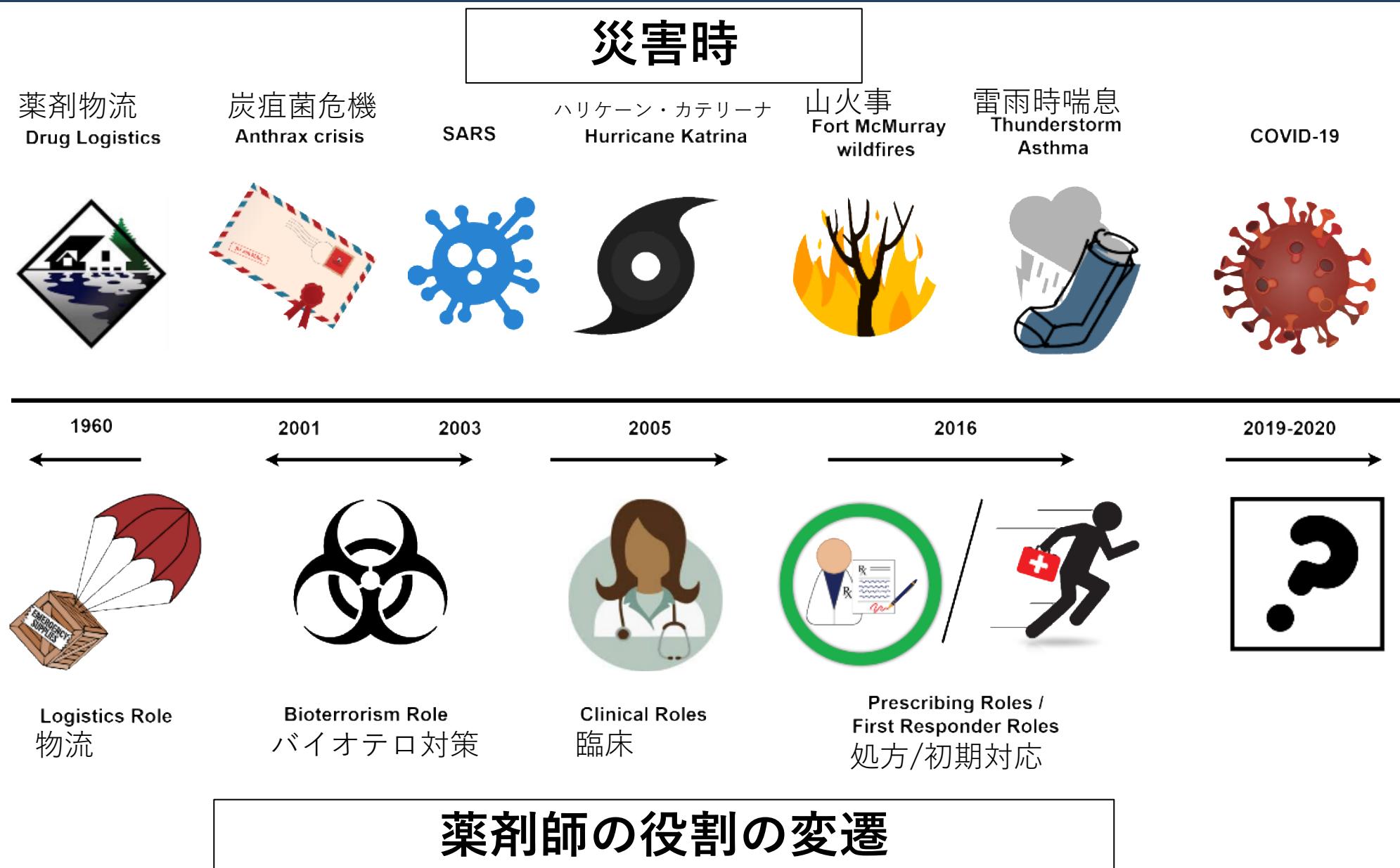


Source
International Pharmaceutical Federation (FIP). An overview of pharmacy's impact on immunisation coverage: A global survey. The Hague: International Pharmaceutical Federation; 2020

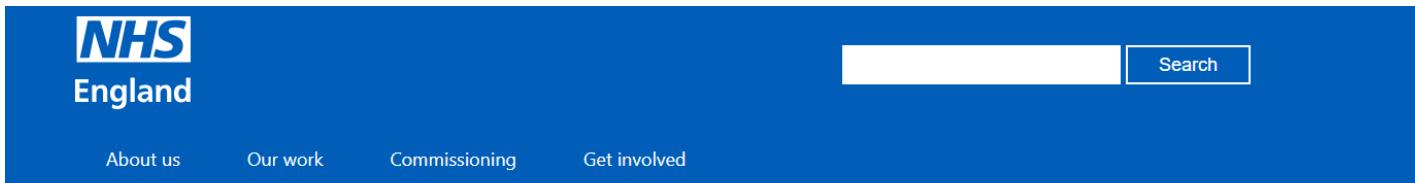
zoom

欧州：ドイツ、ウクライナ、ルーマニア、エストニア、ラトビア、トルコ
アフリカ：シェラレオネ、ガーナ、ナイジェリア、エジプト、タンザニア
アジア：マレーシア・・・など

薬剤師の役割は災害で拡大してきた



薬剤師による薬剤処方：イギリス 2026年新卒者全員で開始



The screenshot shows the NHS England website header. It features the NHS England logo in the top left corner. To the right is a search bar with a white input field and a blue 'Search' button. Below the search bar are four navigation links: 'About us', 'Our work', 'Commissioning', and 'Get involved'. The background of the header is dark blue.



A vertical sidebar menu on the left side of the page. It has three main sections with dropdown menus: 'Primary care' (with 'Community pharmacists' and 'Independent prescribers' options), 'Pharmacy' (with 'Community pharmacy' and 'Independent prescribing' options), and 'Pharmacy Integration Programme' (with 'Independent prescribing' option). The 'Independent prescribing' link under 'Pharmacy' is highlighted in blue, indicating it is the current section being viewed.

[Home](#) > [Primary care](#) > [Pharmacy](#) > [Pharmacy Integration Programme](#) > [Independent prescribing](#)

Independent prescribing

Community pharmacy independent prescribing

Developing and utilising the clinical skills and capabilities of community pharmacists, supported by significant investment in training, is part of a wider shift across the health system to improve access to care in local communities and address health inequalities.

Pharmacist independent prescribers will facilitate quicker and more convenient access to safe and high-quality healthcare, including the prescription of appropriate medicines for minor illness, addressing health issues before they get worse, providing monitoring of long-term health conditions and preventing ill-health.

Community pharmacists will be working as part of wider primary care teams and supported by their primary care network colleagues.

The expanding clinical scope of practice for pharmacy technicians will be key to supporting pharmacist prescribers with the opportunities for multidisciplinary working as a key driver for change.

Independent prescribing training for pharmacists

Pharmacists are experts in medicines, and extensive prescribing training will be incorporated into the 5 years of their education in both the undergraduate and foundation programmes. This process began in 2021 in collaboration with Health Education England when the revised standards for the [Initial Education and Training of Pharmacists](#) came into effect.

薬剤師による独立処方 (Independent Prescribing)

2026年卒の薬剤師からは、酢ツ行と同時に薬剤処方を可能にする

既卒の薬剤師にも薬剤処方のための研修機会を準備している

糖尿病 エンパワーメント

糖尿病は患者のものであり、患者自身が問題を解決し治療方針を立案していく権利と能力を持っている

患者が主体であり、責任も負う

医療者は、患者が意思決定するための十分な情報を提供し、患者を支援する役目を担う

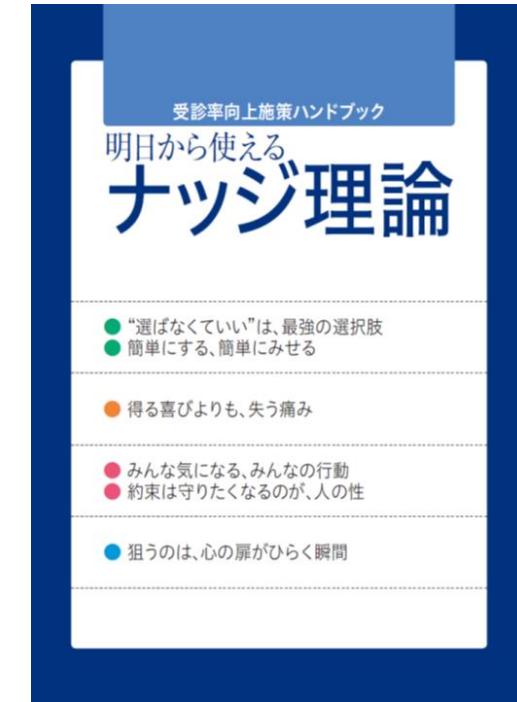
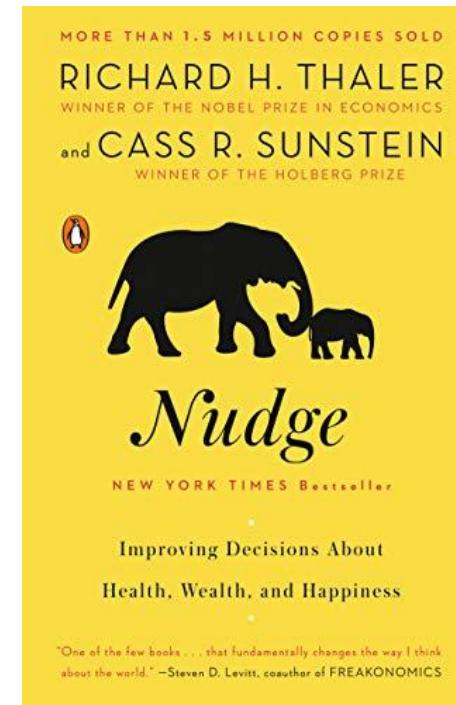


岡崎研太郎 「かなづちを捨てよ！」糖尿病エンパワーメントの理念とは
https://www.jstage.jst.go.jp/article/yakushi/135/3/135_14-00207-1/_pdf

行動経済学 Nudge (ナッジ)

ナッジ(nudge)：元々は「ひじで軽く突く」という意味

強制ではなく、自発的に望ましい行動を選択するよう促す仕掛けや手法（リバタリアン・パターナリズム）



薬剤師になつてすぐのある日・・・

インスリンの注射にすると
言わされました
悪くなつたってことでしょう

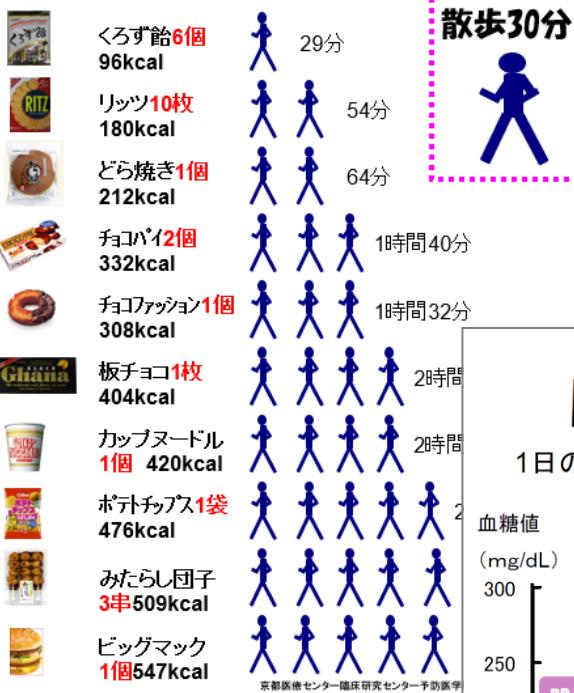


血糖値が高いから
間食やめろって！



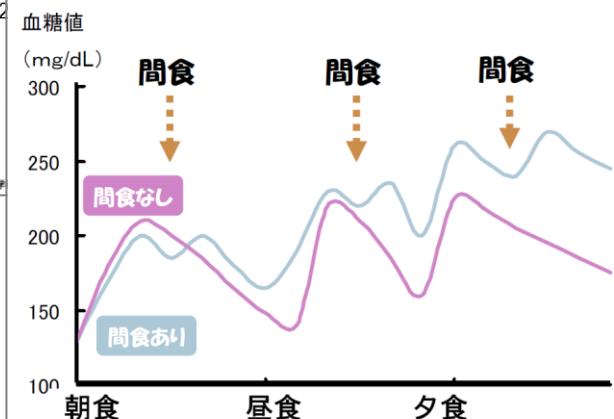
間食を運動で消費するには

散歩30分で100kcal消費(体重60kg)として



間食をすると…？

1日の血糖値変化を比べるとこんな違いが！



間食をとると、1日中血糖値が下がらない

つまり、逆に言えば…

間食を控えると、血糖が改善する！？

ビール・発泡酒のエネルギー

※1缶350mLあたりの熱量（アルコール%）

プレミアムモルツ	165 kcal	5.5%
キリン一番搾り	150 kcal	5.5%
アサヒスーパードライ	147 kcal	5%
スパークリングホップ	144 kcal	5%
アサヒアクアブルー	123 kcal	5%
淡麗グリーンラベル	102 kcal	4.5%
サッポロビバライフ	98 kcal	5%
アサヒフリースタイル	84 kcal	4%
サントリーゼロ生	81 kcal	4%
サントリーダイエット	77 kcal	3.5%
キリンゼロ	67 kcal	3%

清涼飲料水の糖分

けっこう糖分が多いです

黒酢	125mL	24kcal	6g	= 砂糖6g
トマトジュース	190mL	38kcal	7.2g	
ヤクルト	65mL	50kcal	11.5g	
野菜生活	120mL	63kcal	14.6g	
リポビタンD	100mL	74kcal	18g	
オロナミンC	120mL	79kcal	19g	
UCCコーヒー	250mL	120kcal	23.5g	
のむヨーグルト	240mL	161kcal	30g	
ポカリスエット	500mL	135kcal	33.5g	
コカコーラ	500mL	225kcal	56.5g	

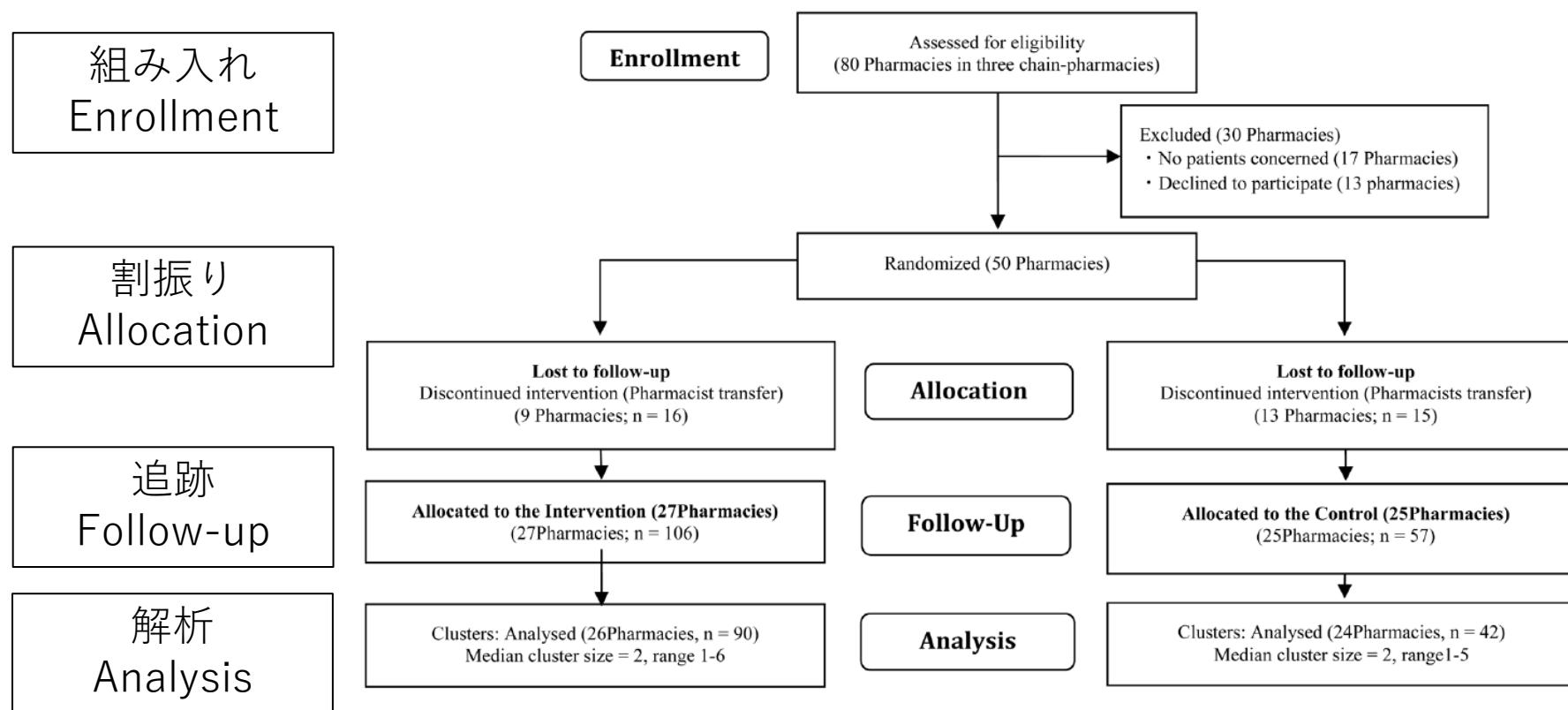
ハンマーを捨てろ！



Throw away your Hammer !

COMPASSプロジェクト 研究フロー

国内80薬局が参加、50薬局が患者支援を実施



間食を運動で消費するのは大変！

散歩30分で100kcal消費(体重60kg)として



Copyright by Kyoto Medical Center Preventive Medicine H. Okada

血糖値を上げない間食

1. 飲み物(ゼロカロリー飲料)



2. ゼリー(ゼロカロリー食品)



3. 寒天・めかぶ



4. その他

野菜スティック(キュウリ、セロリ、ニンジンなど)
海藻・キノコはカロリーも低く、血糖値に影響をほとんど与えない。

試してみること:

サイン:

COMBINEプロジェクト

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ビール・発泡酒のカロリー数

※1缶350mLあたりのカロリー (アルコール%)

ビール プレミアムモルツ 165 kcal 5.5%

キリン一番搾り 150 kcal 5.5%

アサヒスーパードライ 147 kcal 5%

発泡酒 リラックス 糖質0(ゼロ) 119kcal 5%

淡麗グリーンラベル 102 kcal 4.5%

アサヒオフプリン体85%糖質70%オフ 91kcal 4.0%

アサヒフリースタイル 84 kcal 4%

キリンゼロ 67kcal 3%

ノンアルコール

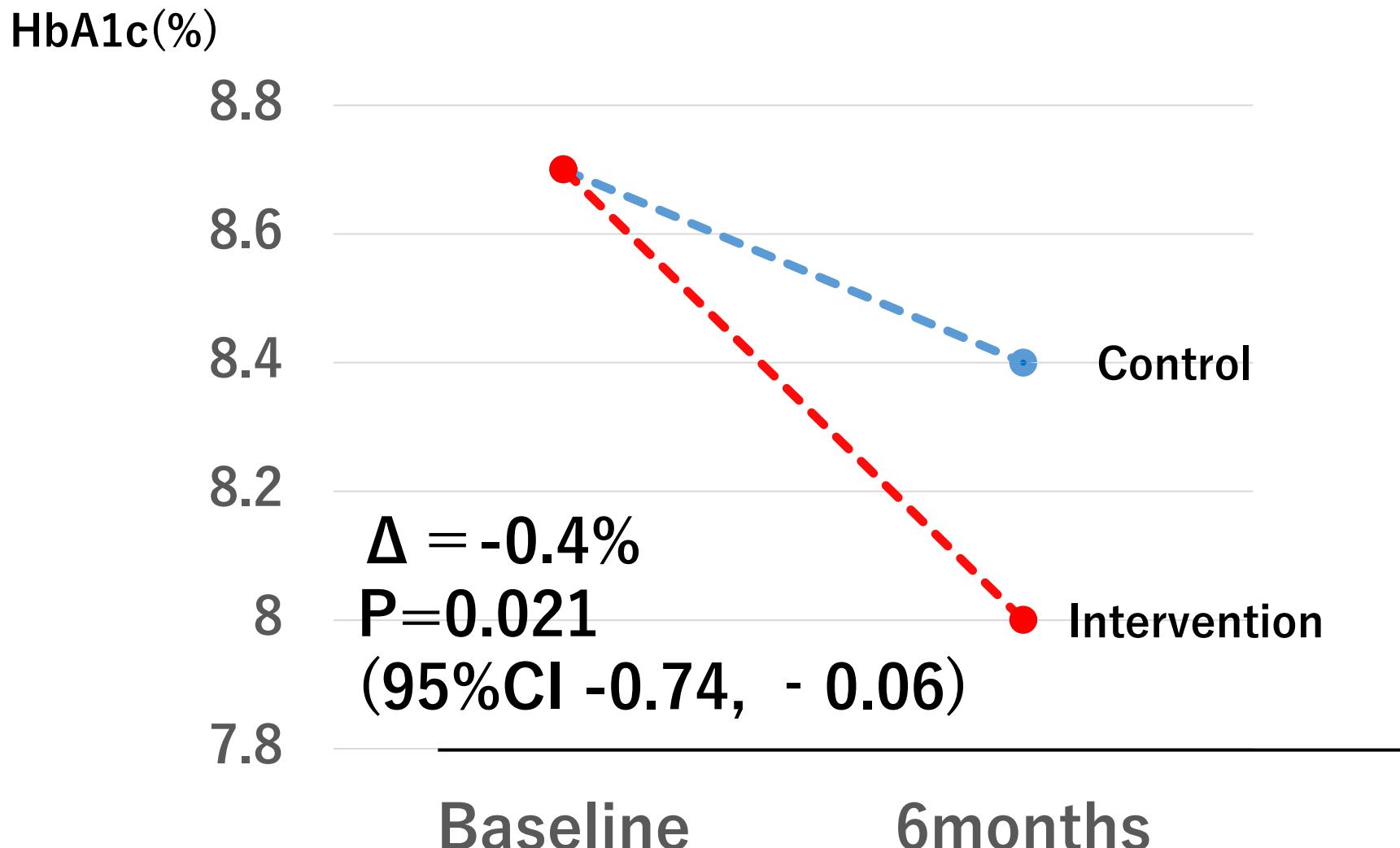
キリンフリー 56kcal 0%

休む日の0.00%オルニチン含有 54kcal 0%

アサヒダブルゼロ 0kcal 0% 造正飲酒量:1日25gまで
ビール:500ml
日本酒:1合(180ml)
ワイン2杯(240ml)

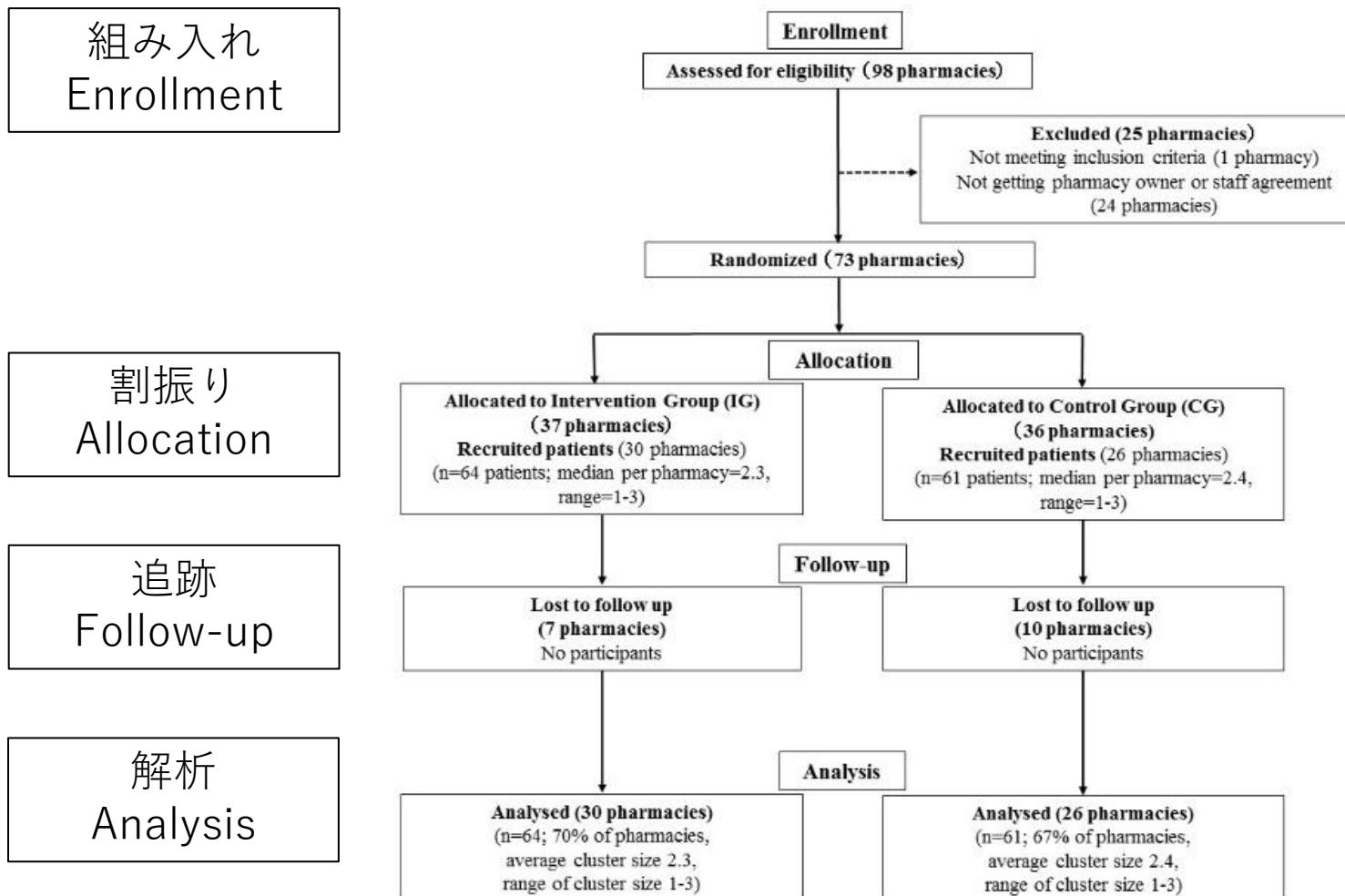
サンタリーオールフリー 0kcal 0% 12
ウイスキーダブル1杯(60ml)
Copyright by Kyoto Medical Center Preventive Medicine H. Okada

COMPASSプロジェクト 結果

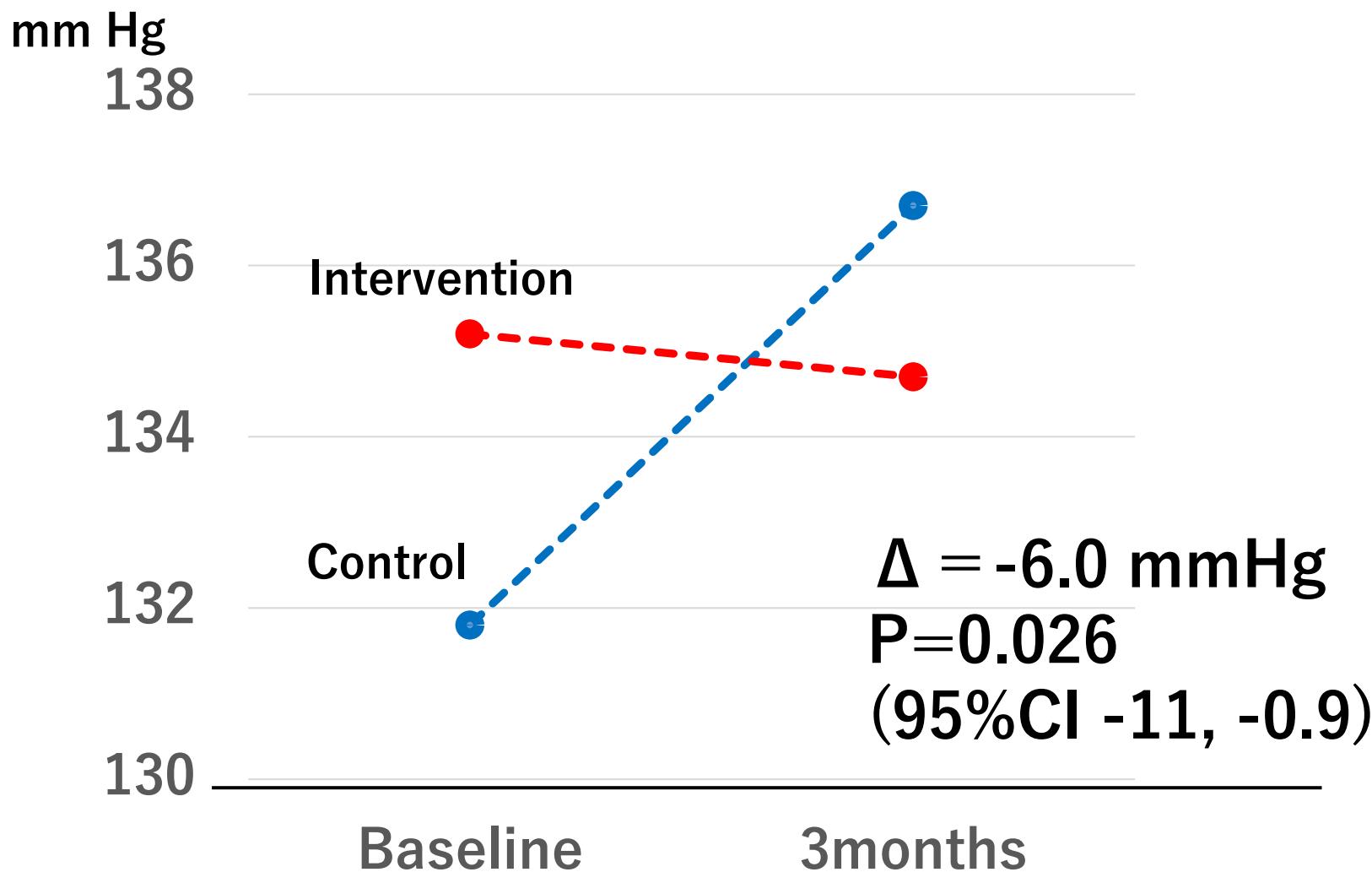


COMPASS-BP 研究フロー

56薬局が支援実施 高血圧患者125名が参加



COMPASS-BP 結果



COMPASS研究 その他の結果

薬剤師の行動変容“YARIGAI”向上 COMPASS,COMPASS-BP

社会薬学 (Jpn.J.Soc.Pharm.) Vol.33 No.1 2014

Original Article

A Study about “YARIGAI”: What Makes Work Worth Doing for the Community Pharmacists Who Participated in a Workshop of the COMPASS Project

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¹⁾Clinical Laboratory of Practical Pharmacy, Osaka University of Pharmaceutical Sciences,

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Abstract : Objective : By extracting and modeling the component factors that community pharmacists have for “YARIGAI”—a Japanese colloquial expression commonly defined as “something worthwhile doing”—and by redefining “YARIGAI,” we sought to help improve the quality of work lives of community pharmacists. Methods : All of 139 employee pharmacists participated in a workshop of the COMPASS Project (May 2011) were surveyed using a self-administered questionnaire. Responses were collected on the scene. The seventeen, 6-point-scale questions focused on the “patient-pharmacist relationship,” which may be related to “YARIGAI.” Then “YARIGAI” factors were extracted using factor analysis, and modeled using covariance structure analysis. IBM SPSS (ver. 20) and Amos 5.0J were used for the analyses. Results : To the item “I feel ‘YARIGAI’ with pharmacy work,” 12.2% of the 139 respondents said, “Strongly agree”, followed by “Agree” (41.0%) and “Somewhat agree” (33.8%). A factor analysis extracted three factors related to “YARIGAI” (knowledge, patient counseling management, and sense of personal growth). After modeling (AGFI : 0.903, RMSEA : 0.048) with these factors as latent variables and items in them as observable variables, a positive correlation was indicated for all the following factor pairs : “knowledge” and “patient counseling management”, “knowledge” and “sense of personal growth”, and “sense of personal growth” and “patient counseling management” (standardized points of estimate : 0.71, 0.55, and 0.42, respectively). Standardized coefficients for all latent and observable variables were 0.7 or higher, showing a good fit. Conclusion : “YARIGAI” of pharmacists employed by community pharmacies can consist of “knowledge,” “patient counseling management,” and “sense of personal growth”. Our results suggest that the improvement of communication skills and knowledge can lead to improvement of “YARIGAI” of pharmacists working for community pharmacies.

Key words : pharmacy, pharmacist, YARIGAI, covariant structure analysis, factor analysis

IJPP
INTERNATIONAL JOURNAL OF
Pharmacy Practice

IJPP
International Journal of
Pharmacy Practice

International Journal of Pharmacy Practice 2019, 27, pp. 520-527

Research Paper

The change in pharmacists' attitude, confidence and job satisfaction following participation in a novel hypertension support service

Masaki Shoji^a , Mitsuko Onda^a, Hiroshi Okada^{b,c,d}, Naoki Sakane^c and Takeo Nakayama^b

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Keywords

Community Pharmacy; Communicating with Patients; Health Seeking Behaviour; Professional Practice

Correspondence

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doi:10.1111/ijpp.13750

Abstract

Objectives To demonstrate how the confidence, attitude and job satisfaction of pharmacists who provide interventions and lifestyle support services to patients with hypertension are altered.

Methods This study was a before-and-after study that used data from 50 pharmacists who participated in the Community Pharmacists Assist for Blood Pressure (COMPASS-BP) study, which was an interventional study that was conducted in Japan to evaluate the effects of lifestyle support services provided to hypertension patients. The pharmacists received 4 h of training before the study was initiated to learn how to quickly provide patients with guidance about diet and exercise and tobacco and alcohol consumption. During the interventional period, each pharmacist provided concise lifestyle guidance to 1–3 hypertension patients. The pharmacists met with the patients a total of 5

薬局での健康支援：コクラン・ライブラリー (SR)



Trusted evidence.
Informed decisions.
Better health.

Cochrane Database of Systematic Reviews

[Intervention Review]

Community pharmacy interventions for health promotion: effects on professional practice and health outcomes

Liz Steed¹, Ratna Sohanpal¹, Adam Todd², Vichithranie W Madurasinghe¹, Carol Rivas³, Elizabeth A Edwards¹, Carolyn D Summerbell⁴, Stephanie JC Taylor^{1,5}, RT Walton^{1,5}

¹Centre for Primary Care and Public Health, Barts and The London School of Medicine and Dentistry, Queen Mary University of London, London, UK. ²School of Pharmacy, Newcastle University, Newcastle upon Tyne, UK. ³Department of Social Science, UCL Institute of Education, University College London, London, UK. ⁴Department of Sport and Exercise Sciences, Durham University, Durham, UK.

⁵Asthma UK Centre for Applied Research, Queen Mary University of London, London, UK

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Editorial group: Cochrane Effective Practice and Organisation of Care Group.

Publication status and date: New, published in Issue 12, 2019.

Liz Steed et al. Cochrane Database Syst Rev. 2019

薬局での健康支援：コクラン・ライブラリー (SR)



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Access provided by: Kyo

Title A

Cochrane Reviews ▾ Trials ▾ Clinical Answers ▾ About ▾ Help ▾

Cochrane Database of Systematic Reviews | Review - Intervention

Pharmacy-based management for depression in adults

結果

57件のRCT、参加者16,220人の参加者

- 糖尿病、高血圧、喘息、および心血管リスクの改善

健康支援介入

- 健康関連行動の改善

(SMD 0.43, 95% CI 0.14~0.72; I² = 89%; 10 試験; 2138人)

- コレステロール値や糖化ヘモグロビン値の改善

(SMD -0.43, 95% CI -0.65 to -0.21; I² = 90%; 20 試験; 3971人)

健康増進の介入

- 薬局利用者のQOLの改善 (SMD 0.29, 95% CI 0.08 to 0.50; I² = 82%; 10 試験; 2687人)

薬局での健康支援：日本の研究もコクランに掲載



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Better health.

Cochrane Database of Systematic Reviews

Maguire 2001 {published data only}

Maguire T. Pharmaceutical care - a realistic pharmaceutical service. *Pharmacy Today* 1996;7:20-4.

* Maguire TA, McElnay JC, Drummond A. A randomized controlled trial of a smoking cessation intervention based in community pharmacies. *Addiction* 2001;96(2):325-31.

Mansell 2016 {published data only}

Mansell K, Evans C, Tran D, Sevany S. The association between self-monitoring of blood glucose, hemoglobin A1C and testing patterns in community pharmacies: results of a pilot study. *Canadian Pharmacists Journal* 2016;149:28-37.

Mayer 1998 {published data only}

Mayer JA, Eckhardt L, Stepanski BM, Sallis JF, Elder JP, Slymen DJ, et al. Promoting skin cancer prevention counseling by pharmacists. *American Journal of Public Health* 1998;88(7):1096-9.

* Mayer JA, Slymen DJ, Eckhardt L, Rosenberg C, Stepanski BM, Creech L, et al. Skin cancer prevention counseling by pharmacists: specific outcomes of an intervention trial. *Cancer Detection & Prevention* 1998;22(4):367-75.

McDonough 2005 {published data only}

Mehuys 2011 {published data only}

Mehuys E, Van Bortel L, De Bolle L, Van Tongelen I, Annemans L, Remon JP, et al. Effectiveness of a community pharmacist intervention in diabetes care: a randomized controlled trial. *Journal of Clinical Pharmacy & Therapeutics* 2011;36(5):602-13.

Nishita 2013 {published data only}

Nishita C, Cardazone G, Uehara DL, Tom T. Empowered diabetes management: life coaching and pharmacist counseling for employed adults with diabetes. *Health Education & Behavior* 2013;40(5):581-91.

Nola 2000 {published data only}

Nola KM, Gourley DR, Portner TS, Gourley GK, Solomon DK, Elam M, et al. Clinical and humanistic outcomes of a lipid management program in the community pharmacy setting. *Journal of the American Pharmaceutical Association* 2000;40(2):166-73.

Okada 2018 {published data only}

Okada H, Onda M, Shoji M, Sakane N, Nakagawa Y, Sozu T, et al. Effects of lifestyle advice provided by pharmacists on blood pressure: the COMMunity Pharmacists ASSist for Blood Pressure (COMPASS-BP) randomized trial. *Bioscience Trends* 2018;11:632-9.

エンパワーメントスコア：EM度チェック

+ 2点	感情や目標に注意を向けている	「どんなことを試してみたいですか？」 「どのように感じておられますか？」 「どうなるのが一番いいですか？」
+ 1点	問題を掘り下げている	「そのことについて詳しく教えてください」 「なぜそれが問題になるのですか？」 「どんな意味があなたにありますか？」
± 0点	情報提供	
- 1点	患者の代わりに問題を解決	「その場合、○○しましょう！」 「家族には話しておくべきです」 「私が奥様に話しますよ」
- 2点	患者を批評	「それはよくない方法ですね」 「運動したんですね、頑張りましたね」 「食事療法がしっかり守れてうれしいです」

ナッジ：3つの方法

1. 選択肢を示す

→ 「運動、食事、薬だったらどれがいいですか？」

2. 仮定「もし・・・」を使う

「もし、気を付けるなら何ができるですか？」

3. 伝聞「・・・の方もいます」を使う

「この薬の効果を引出して1%下がる人もいました」

薬局でのフレイル対策の効果

RESEARCH

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The effectiveness in preventing frailty of exercise intervention provided by community pharmacists to older persons with chronic conditions: A pragmatic randomized controlled trial

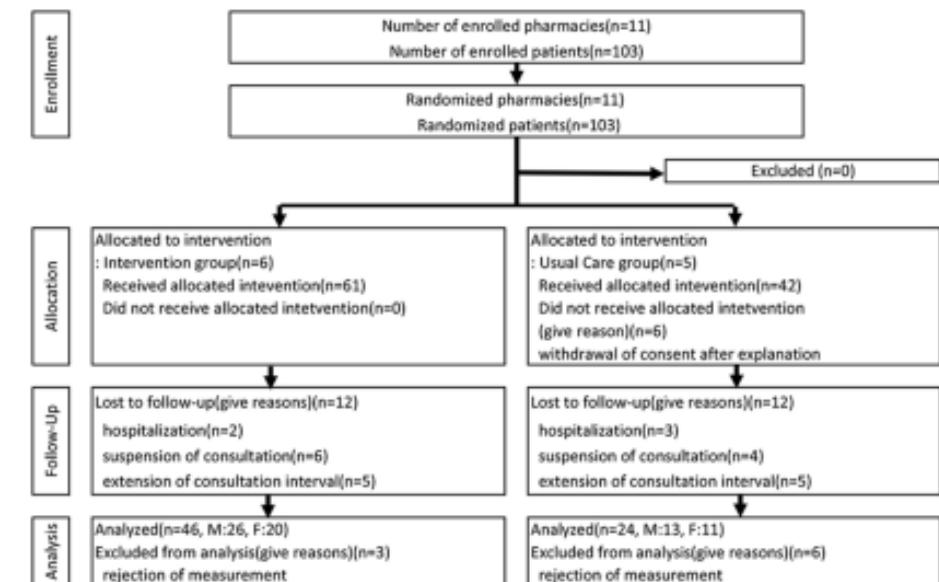
Noritake Hirota^{1,2*}, Hiroshi Okada³ and Noboru Okamura¹

Abstract

Background Once older persons become frail, the risk of falls, bone fractures, and other problems increases. Exercise intervention is a form of prevention that has a high degree of evidence.

Objective We investigated the effectiveness of frailty prevention consisting of exercise intervention by community pharmacists at 11 pharmacies operated by Osaka Pharma Plan.

Methods In total, 103 older persons between 70 and 79 years of age (53 males and 50 females) who were suffering



薬局でのシックデイ対策

RESEARCH

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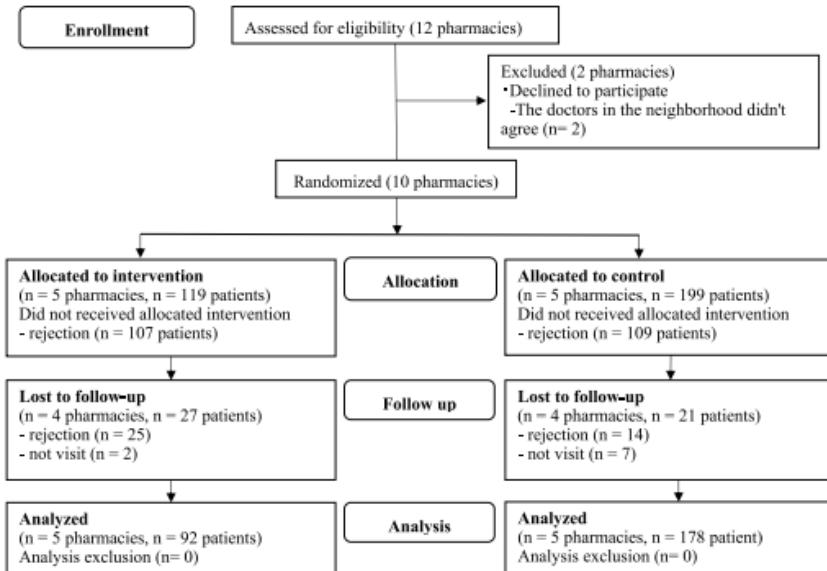
Study of assessment of knowledge and understanding for coping with sick days among patients with diabetes in community pharmacy: a cluster randomized controlled trial (SAKURA trial)

Keisuke Kado¹, Hiroshi Okada^{2*}, Shota Suzuki^{2,3}, Masako Satake¹, Toru Yamazaki¹, Mayumi Kurosawa¹, Mie Yamamoto¹, Miho Takahashi¹ and Takeo Nakayama²

Abstract

Background Awareness regarding coping with sick days among patients with diabetes is limited. Thus, we evaluated the effectiveness of sick-day education by community pharmacists among patients with type 2 diabetes using sick-day educational materials (sick-day cards).

Methods A cluster randomized controlled trial was conducted. Pharmacists in the intervention group educated patients with T2D on coping with sick days (adjusting medication dosage and seeking medical care).



薬局でのisCGMの活用：COMPASS-Libre



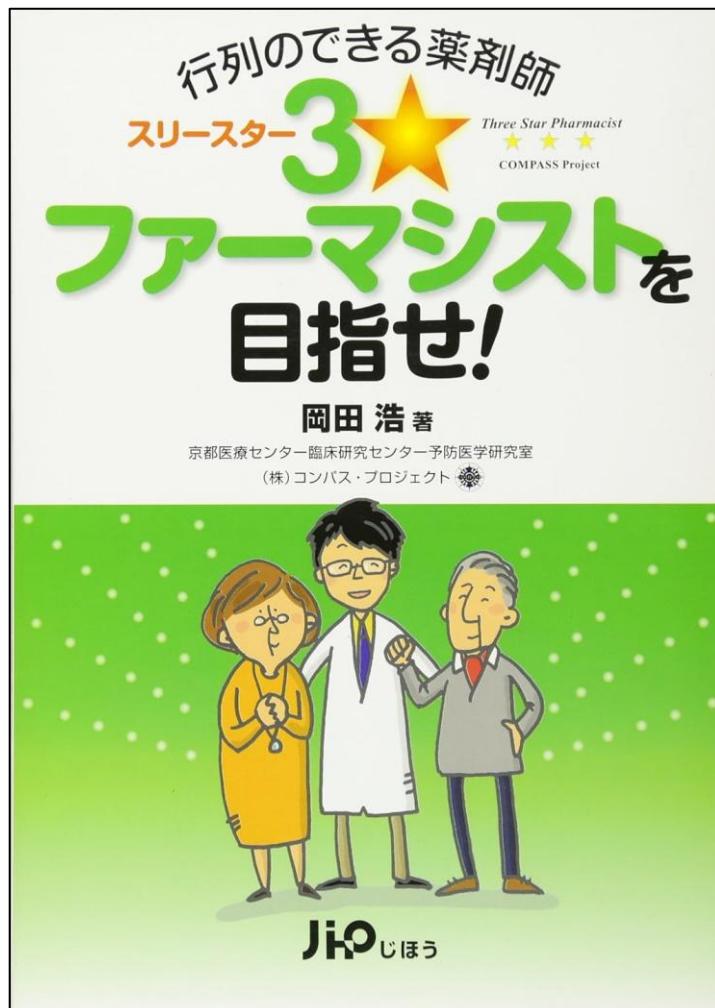
岡田浩、薬局薬剤師による2型糖尿病患者の
isCGMデータを用いた血糖自己管理支援プ
ログラムの開発とその効果の検証 薬剤師
職能振興研究助成事業 2022年

大学講義：薬局でのヘルスプロモーション

和医大薬講義：地域医療薬学Ⅰ・Ⅱ



3☆ファーマシスト研修 ⇒ 行列研修



- ・患者支援のスキル：エンパワーメント
- ・情報提供のスキル：ナッジ
- ・行動変容モデル
- ・性格タイプ別アプローチ

岡田浩 じほう、2013年

BioPsycoSocial (生物心理社会) モデル

