

Pharmacist led care in General Practice (PLAGE) Study

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Abstract

Background: To meet the increasing demands on primary care services, the widespread integration of pharmacists within general practice has been proposed. To better understand how this role will be embedded, it is crucial to seek the perceptions of key stakeholders in primary care.

Aims: This study aims to explore in depth, the attitudes and perceptions of general practitioners (GPs) to pharmacist led care in general practice, and to identify any barriers and enablers to the integration of pharmacists in the general practice setting.

Method: Semi-structured interviews were carried out using a maximum variation convenience sample of 14 GPs. Interviews were recorded and transcribed digitally and analysed using thematic analysis with constant comparison.

Results: The key themes to emerge include; (1)reduce GP workload by use of non-medical workforce, (2)pharmacists' pharmaceutical knowledge, (3)GPs are protective of their roles, (4)GPs have a lack of confidence in pharmacists' clinical aptitude and (5)colocation and team integration.

Conclusions: GPs believe integration of pharmacists in general practice can reduce GP workload, improve prescribing safety and improve medicines optimisation. In particular pharmacist independent prescribers were perceived to have a wider scope of practice and a greater impact on workload pressures. Negative professional attitudes and a lack of confidence in pharmacists' clinical aptitude were thought to be potential barriers to the integration of pharmacists in this setting; however it is thought that this can be overcome by colocation and team work, as well as further pharmacist training. The views of GPs towards the role of pharmacists in acute care in general practice remain inconsistent; this is an area for further research.

Implications for practice and future research: This study provides insight in to the attitudes and perceptions of GPs to pharmacist led care in general practice. The findings demonstrate the perceived benefits of the integration of pharmacists, the scope of practice as well as the perceived barriers and facilitators to the integration of pharmacists' in general practice. These findings may inform future planning, development and implementation of this emerging role on an individual practice level and nationwide.

Future research which seeks the perceptions of other key informants including nurses working in general practice, pharmacists working in primary care and alternative sectors and patients seems prudent. Furthermore, research to explore the role of clinical pharmacists in acute care in the general practice setting is needed.

The evaluation from the NHS England clinical pharmacists in general practice pilot is expected following the three year pilot period which is anticipated to provide further understanding of this integrated model of working.