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Pharmacy technician-led general practice support hub: a feasibility study

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Introduction: Workforce pressures in general practice have led to Scottish Government initiatives to integrate pharmacy teams into general practice. The focus is completion of prescribing management-related activities releasing general practitioner time for patient-focused workload.¹ Activities include medicines reconciliation from immediate discharge letters (IDL), processing outpatient prescription requests (OPL) and special request prescriptions (SR). Pharmacists effectively mobilise GP capacity completing these tasks.² However, pharmacists may aspire to advanced practice roles including medication review case-load management. Therefore, alternative workload delivery models including centralised pharmacy technician-led general practice support hubs to complete IDL, OPL and SR tasks must be considered. National guidance outlines that pharmacy technicians may complete these tasks autonomously with minimal supervision.³ Unknowns include whether pharmacy technicians can lead this service delivery and the definition of the supervisory support required.

Aim: To evaluate the feasibility of a pharmacy technician-led hub for completion of SR, IDL and OPL.

Methods: Feasibility was studied over 4 weeks (12 April – 7 May 2021) during routine service delivery across three medical practices (approx. 23 800 patients) in NHS Greater Glasgow and Clyde. Quantitative real-time self-reported data on the volume of tasks (SR/IDL/OPL), task completion time and volume of pharmacist referrals was collected by pharmacy technicians and pharmacists and analysed in Microsoft Excel[®]. Qualitative data describing why pharmacy technicians referred tasks to pharmacists was collected and categorized using thematic analysis and Microsoft Excel[®] by the lead author. Ethical approval was not required for this service evaluation.

Results: 4485 total tasks were completed: SR 87% (n=3917); IDL 7% (n=323); OPL 6% (n=245). Pharmacy technicians completed most (71%; n=3181) prescribing management-related tasks. A service delivery gap (21%; n=921 of tasks) where workload exceeded technician resource, necessitated pharmacist support. Referral rate for tasks beyond technician competence was 11% (n=383). The locally agreed 48-hour benchmark turnaround to process tasks was achieved for the majority of tasks. Breaches of the target were noted: 53 (1%) SR; 10 (3%) IDL and 5

(2%) OPL. Technicians and pharmacists completed tasks in numerically similar times. 383 tasks were referred to a pharmacist. 134 (35%) tasks could only be completed by a pharmacist due to the need for a prescribing decision or pharmacist-specific knowledge. 226 (59%) could be completed by a technician with additional knowledge or training. Examples include queries requiring interpretation of clinical parameters or blood monitoring or answering medicines information enquiries. 6% (n=23) of referrals were uncategorised due to incomplete data collection.

Discussion/Conclusion: This study provides new information describing the workload volume achieved by pharmacy technicians and characterising the supervisory role of the pharmacist. Pharmacy technicians convincingly completed most activities. Service delivery gaps need addressed including maintenance of service delivery during periods of authorised absence and professional development time. Pharmacist referral rate can be improved by upskilling pharmacy technicians. The volume of SR tasks drives the workload and could be managed more effectively by converting suitable SR tasks to controlled repeats. A Health Improvement Scotland initiative is developing this work stream. Additional projects must identify training gaps to understand technician development needs and analyse achievement of advanced pharmacist activities where technician-led hub exists.

Keywords: Pharmacy; pharmacy technician; pharmacist; primary care; pharmacotherapy

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From drugs to dry mouth: a rapid systematic review exploring health implications of dry mouth in older adults with polypharmacy

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Introduction: Approximately 60% of older adults complain of dry mouth which may be associated with