

Exploratory Study of the GP, Pharmacist and Patient Community Triad



Executive Summary

There is now a growing recognition in the Western world, that the provision of healthcare should shift from being predominately acute in nature to a greater focus on integrated community care. A strong inter-collaborative relationship within the GP/pharmacist/patient triad is therefore set to become an integral cog in the delivery of community care and chronic disease management – unfortunately, in Ireland, this particular eco-system is over-used and under-resourced, which is not helped by the growing shortage of GPs in Ireland.

With this in mind, this report will attempt to illuminate the ways in which the GP and pharmacist interact and communicate in relation to patient care in the Irish Primary care model, with a particular focus on the nuances and pain points of this interaction. The report will also highlight GP and pharmacist perspectives and needs regarding more effective means for information sharing and collaborative care, which are also expected to be applicable in the international context.

The Culture of Interaction

Pharmacist–GP interactions are generally ‘informal’ in nature i.e., there is an open-door policy with regards to contacting each other, but the degree to which they interact is dependent on personal relationships and rapport. For instance, some pharmacists expressed that, over-time, if you build a rapport with a GP, they are more inclined to suggest calling their mobile phones to contact them but that this is not the norm.

Contact Scenarios: Pharmacist and GP

The study found that GP and pharmacist contact is instigated by queries in relation to the following aspects: (a) Medication Supply; (b) Adherence; (c) Discharge Prescriptions and (d) Prescription Technicalities – primarily, Dosage Errors; Medication Omissions; Drug Contraindications; and Allergies.

GP Needs Identified – Medication Lists

GPs highlighted that having access to up-to-date medication lists would mean they are more informed about their patients which would also facilitate safer prescribing.

Pharmacist Needs Identified – Better Communication Channels

All pharmacists were adamant that there is a requirement for a more efficient and effective means for communicating with GPs. Since information sharing regarding the patient could broaden, pharmacists view their role as growing especially in relation to chronic disease management.

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Collaborators

General support from ARCH
Industry Members

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Care

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**ARCH Industry Members have full access to this report*



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Connected Health Opportunities for Industry

Looking forward, there are areas to act-on and explore;

- a. There certainly appears to be a need for the development of an electronic based communication platform between the GP and pharmacist – the central role of the phone and fax-machine in their workflows is too burdensome and time consuming
- b. A means through which the pharmacist and GP can request and share a patient's last dispensed medication list has the potential to really impact patient care – in terms of appropriate prescribing and poly-pharmacy – while also increasing the GP's knowledge of their patient's status
- c. Due to the myriad of issues present in relation to prescription technicalities, there is a definitely a need for ePrescribing systems; this is a well-known issue but the amount of time consumed by GPs and pharmacist rectifying these issues certainly reinforces the need
- d. The perspective of the patient and caregiver needs to be investigated in this context



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