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General public awareness and views of community pharmacy in Scotland: the 'first port of call' study.

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General public awareness and views of community pharmacy services in Scotland: the 'First Port of Call' study

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1 Robert Gordon University, Aberdeen 2 NHS Education for Scotland 3 University of Strathclyde 4 Community Pharmacy Scotland 5 Royal Pharmaceutical Society

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First Port of Call: why





First Port of Call: what



Community pharmacy already plays an important role in the provision of NHS pharmaceutical care, providing highly accessible services for people both in-hours and out-of-hours

We want more people to use their community pharmacy as a FIRST PORT OF CALL

Rose Marie Parr

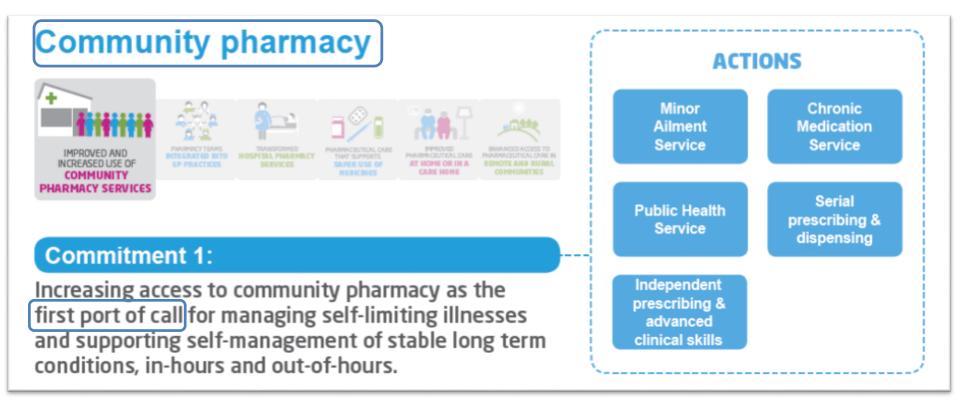
Chief Pharmaceutical Officer and Deputy Director, Pharmacy and Medicines Division, Scottish Government

http://www.gov.scot/Publications/2017/08/4589





First Port of Call: where



http://www.gov.scot/Publications/2017/08/4589





First Port of Call: who





First Port of Call: pre-registration trainees



First Port of Call: eligibility

Step 1. Eligibility

Read the information sheet carefully – it covers all the steps you need to follow

Ask any questions – we are here to help

Complete the pre-reg online consent form – you only need to complete this once - but it must be done before you start to recruit (taking part in the survey indicates consent from the member of the general public).

Stopping if you decide not to continue, please complete the upload of any data and please do let us know.





First Port of Call: information



RGU: Dr Katie MacLure, Professor Derek Stewart, Andrew MacLure NES: Gail Craig, Dr Ailsa Power UOS: Dr Anne Boyter RCSI: Dr Grainne Cousins CPS: Adam Osprey HIS: Sharon Pfleger RPS: Anna-Marie McGregor

General public awareness and views of community pharmacy services in Scotland: the 'FIRST PORT OF CALL' study

PHARMACY PRE-REGISTRATION TRAINEES

Thank you for considering taking part in the 'FIRST PORT OF CALL' study which has the support of NHS Education for Scotland, Healthcare Improvement Scotland, Community Pharmacy Scotland, the Royal Pharmaceutical Society in Scotland and both of Scotland's Schools of Pharmacy.

If you choose to participate in this project, please be aware that there is **compulsory** training with online study material which should take no more than 30 minutes to complete. The training will cover participant selection, obtaining informed consent, information governance, administering a survey, data management and who to contact if you need help.

The aims of the 'FIRST PORT OF CALL' study are to:

- explore the Scottish general public's awareness of services currently available in community pharmacy;
- explore which community pharmacy services the Scottish general public would view as their 'first port of call' for health care support and advice; and
- formulate recommendations for awareness raising of community pharmacy services based on the Scottish general public's views.

This study has been designed by the abovementioned organisations and reviewed by RGU School of Pharmacy and Life Sciences ethical review panel. After reading the information overleaf and before starting recruitment you must complete the online consent form available at:

https://www.surveymonkey.co.uk/r/PreRegConsent

'First Port of Call' study Pharmacy Graduate Information sheet version 4, 14 November 2017

To achieve the aims stated above you are required to recruit up to 20 members of the general public face-to-face in the community pharmacy. It is essential that you, and every pre-reg taking part, follow the process outlined below when recruiting people to the study.

 Invite people to participate if based on your professional judgement they fit the following description:

- a. Aged ≥16 years, please check if in any doubt
- b. Present within any area of the community pharmacy
- c. Able to speak and understand English
- d. No evidence of cognitive impairment

Exclude people who you judge to be in a hurry, unwell or otherwise in distress. Vary the day and the time you recruit. Try to recruit different types of people so different viewpoints are captured in the survey. A mix of gender and age plus where the person is approached within the pharmacy should help. Use your Log Sheet to keep track of recruitment, refusals and withdrawals from the study. Decide whether you will directly enter responses on a secure tablet or laptop in the pharmacy; it must not be a personal device. A paper version of the survey can be printed for completion if a secure device is not available. The study can be accessed at:

https://www.surveymonkey.co.uk/r/FirstPortofCall

- Inviting participants: explain to the participant the purpose of the study, what it will involve, what will happen with their data, emphasising that participation is voluntary and that they can withdraw at any time:
 - a. If the potential participant gives their consent, you can proceed with the survey. Ask the questions and enter the responses online as they are given or on a paper copy which you will later enter via the survey link, do so as soon as possible, then securely destroy the paper copy. Enter details on the Log Sheet which will help remind you to vary your recruitment demographics.
 - b. If the person declines, record it as a refusal on the Log Sheet. If the person initially agrees but withdraws before the survey is complete, discard their data (close the tab or refresh the browser) and record their withdrawal on the Log Sheet.

On completion of your set of 20 surveys, the Log Sheet should be sent to RGU. This can be done by scanning and sending it to k.m.maclure@rgu.ac.uk or by posting it to the address below. If you experience any issues or have any questions, please get in touch by email or phone 01224 262556. As a research data collector, you are raising awareness and giving the general public the opportunity to voice their opinion of community pharmacy services in Scotland. On behalf of the research team, thank you for taking part in the 'FIRST PORT OF CALL' study. We hope it will encourage you to take part in future research.

Dr Katie MacLure, School of Pharmacy and Life Sciences, Robert Gordon University, Aberdeen AB10 7GJ

If for any reason you wish to complain about the handling of this research project, please contact Prof Susan Duthie, RGU, by email s.j.duthie@rgu.ac.uk or phone 01224 262815.

'First Port of Call' study Pharmacy Graduate Information sheet version 4, 14 November 2017





First Port of Call: consent

https://www.surveymonkey.co.uk/r/PreRegConsent

Education for social and Image: Community Social and Heatman Image: Social and Image: Social and Heatman Image: Social and Image: Social and Heatman Image: Social and Image: Social and Image: Social and Heatman Image: Social and Image: Social and Image: Social and Image: Social and Heatman Image: So	 4. I understand that data collected during the study will be used for research purposes including publication of findings and anonymised quotations. I grant copyright permission on the understanding that my confidentiality will be protected. 5. I agree to take part in the above study. 	
Pre-reg 2017-18 Consent form	Pre-reg details	
Please initial each box to confirm you have read and understood each of the following statements: 1. I confirm that I have read and understood the information sheet dated 14 November 2017 (ver 4) for this study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily. 2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, and my employment and legal rights will not be affected. 3. I understand that I will be conducting interviews with people visiting community pharmacy based on the information sheet provided. I have been trained in good practice for conducting research and understand my responsibilities.	Your name Pharmacy pre-registration trainee number (7 digits) Pharmacy number (4 digits) Date (dd/mm/yyyy) Date (dd/mm/yyyy) Compared a copy of this consent form to be emailed to you? Umade mailed to you? Umade mailed to you? Umade mailed to you?	





First Port of Call: preparation

Step 2. Preparation

Online directly (tablet or laptop) – have the survey link open

Paper-based for later upload – printed, on a clipboard with pen and spare to hand

Pilot test – give it a go with pharmacy staff before approaching general public so you are familiar with the questions





First Port of Call: recruitment



or by posting it to Dr Katie MacLure, School of Pharmacy and Life Sciences, Robert Gordon University, Aberdeen AB10 7GJ

'First Port of Call' Log Sheet, version 4, 14 November 2017





First Port of Call: pilot



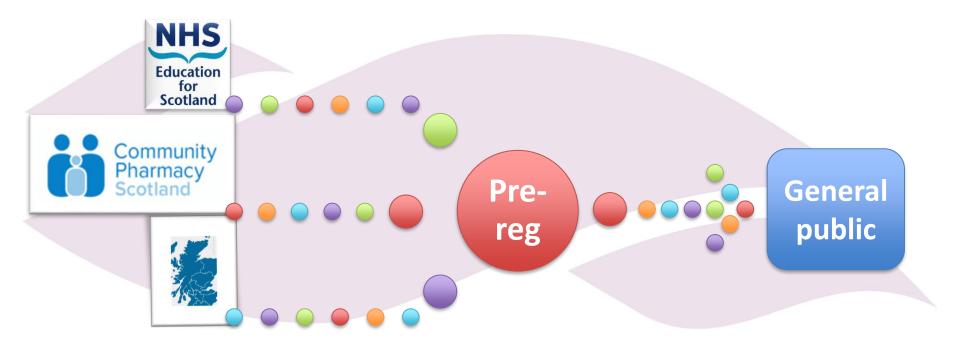
First Port of Call: when

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13 20 27	14 21 28	15 22 29	16 23 30	17 24 31	18 25	19 26	10 17 24	11 18 25	12 19 26	13 20 27	14 21 28	15 22 29	16 23 30	15 22 29	16 23 30	17 24 31	18 25	19 26	20 27	21 28	12 19 26	13 20 27	14 21 28	15 22 29	16 23 30	17 24 31	18 25
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First Port of Call: who







First Port of Call: collect

Step 3. Data collection

Recruit people to take part in the survey (vary day/time/place in community pharmacy/age group)
 Record participation and refusals on the recruitment log sheet
 Continue until data collected from 20 people





First Port of Call: data collection tool

Print emailed copy or access the online version of the data collection form at: https://www.surveymonkey.co.uk/r/FirstPortofCall

7. Would you describe your health as			
👃 Excelent 🚽 Good 🚽 Poer			
🔿 Wey good 🔅 Fair	5. Please give your views on the following statemer		
	community pharmacist access to patients' electroni		
8. Age	Answers are on a 5-point scale ranging from 'strong	3. In which circumstances are you likely to view comr	
	'strongly agree'.	as your first port of call when seeking health advice o	
	literally diagree Disagree Not sare	Answers are on a 5-point scale ranging from 'very un	
9. (don't ask) Gender	I support my community pharmacist to	likely'. You can also say if any circumstance is not at	Pre-reg 2017-18 - First Port of Call
Frende Unite	have access to read parts of my	Very unlikely Unlikely Not sure Likely	
U	Community phyemactatic should have access to read and update relevant	When sufficient contrast Rheat (such as couple, colds, general part, upont	
10. (only ask if not clear) Ethnicity	parts of my electronic headth record	storach, rashes, krivej	
	I trust the community pharmacist to	Childhood Bresses (fever, childen por, stopped cheek, muntos)	
When Asian Main	I would be concerned that my	When unsure what your adment is	Hello, I'm a trainee pharmacist. Could I ask you a few questions about how you use community pharmacy and your awareness of the services that are available to you and
Other (please specify)	electronic health record could be read	When seeking general advice on health	your family? It should take about seven minutes.
	I would feel more confident in the	When suffering more serious symptoms	[If no, add as a refusal to recruitment log sheet] Thanks anyway, enjoy the rest of your
	beament I receive it the community pharmocist had access to my	When sacking addoctroagnent at a time	day.
That's all my questions. Thank you for your time,	electoric health second	when the CP practice is dealed	[If yes, continue] Thanks. This research is being conducted across Scotland with the support of universities and healthcare organisations. We really appreciate your time and
	Evolution for encore likely to view connecting pharmacy as my first part	To neurilor or review a regular medicine for a long term condition (such as	input.
Continue to complete your own details below then add to your recru	of call for health issues if the	anthrea, diabenes, arthritis, high blood pressure)	
either a participant or, if stopped midway through the survey, a withd	electronic health record.	For ables on how to step smoking	1. What is your main reason for visiting community pharmacy today?
	6. Do you think the following services should be pro	For advice on comaception / sexual	General shapping Collect proceed Bay Medical health
Pre-reg and Interview Details	community pharmacy in the future?	Insidth / tanky planning	neskores reskores abice
	community pharmacy in the future?	social care services	O Oter (blene starcit)
11. Day interview conducted	Pharmacy Led Vaccination Services - TravelFluit/few vaccinations	To takly digine of unuted melicines	
Monday _ Tuenday _ Westernin _ Thursday _ Fields _ Salarday _ Sandar	carried out in pharmacy for eligible padents free of charge	and has seen as seen	2. Which of the following did you should be used a second site
	Medication Reviews - Detailed reviews of current medications with ann of ingroving current treatment	4. In general where you have chosen 'unlikely' or 'ver	 Which of the following did you already know about community
12. Time of interview	Care Bundes for common disease states - More structured support for contain conditions (current pilots include Adhma, Dobetres,	previous question, what was the key reason for doing	pharmacy and pharmacy staff?
	Degression)	and the second sec	Community pharmacies are contracted by the NHG to definer a range of services
non že že ten	Community pharmacetet diagnosting and prescribing - For a range of tang-term conditions without the terret to see a GP	Was unaware these services were available in community pharmacy	Community plaamacy previous must have a private comultation room.
	Acuted Brief Immovements - To offer advance on hear to reduce	Discontinuible speaking in the community pharmacy environment	Pharmacots are buind by 'Bress to practice' regulations and professional standards similar to these set for GPs
13. Pre-registration Pharmacist GPhC Trainee num	alcohol consumption	It's more conversion to get an appointment with a CP	Pharmacetti with an additional qualification can diagnose and prescribe for conditions within their areas of competencie
	Enhanced Sexual Health Services - To provide long-acting contraception and associated reprototing and advice	Have a relationship with GP that don't have with community pharmactat	
	Weight Management Service - For advice on healthy eating	Would knit far information online	
		Other (please specify)	
	Participant information		





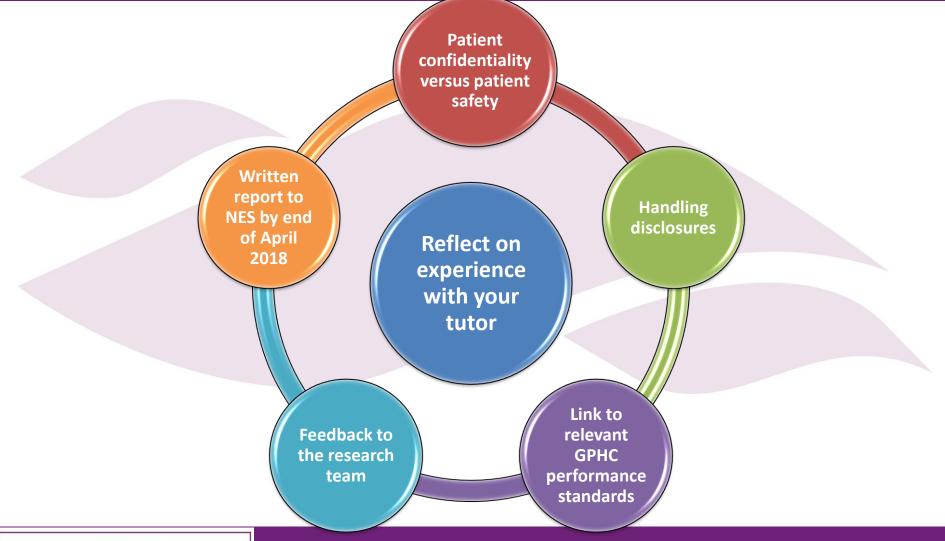
First Port of Call: governance







First Port of Call: reflect





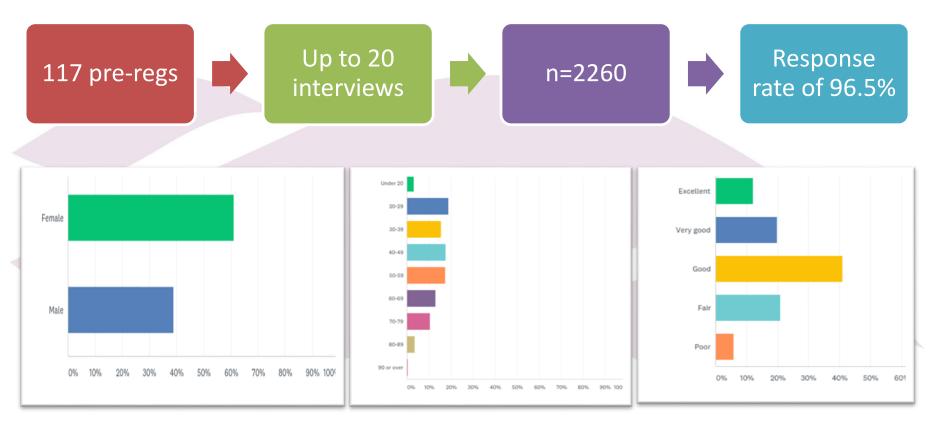


First Port of Call: enjoy!







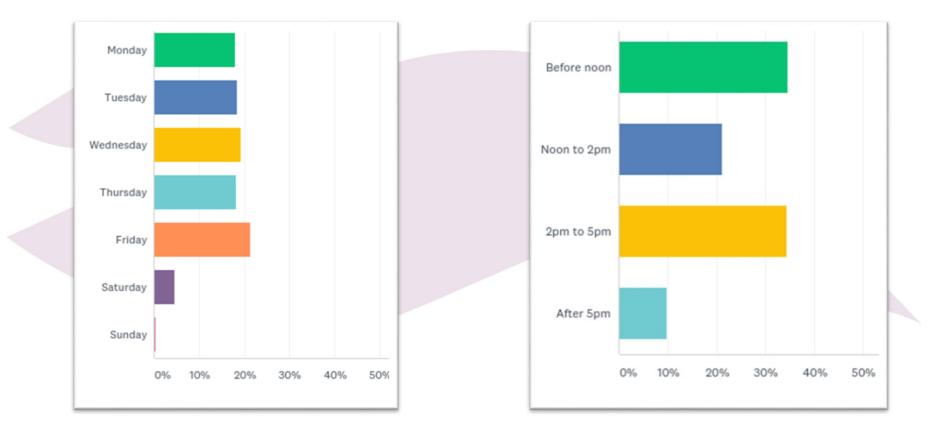


Sex

Age bracket

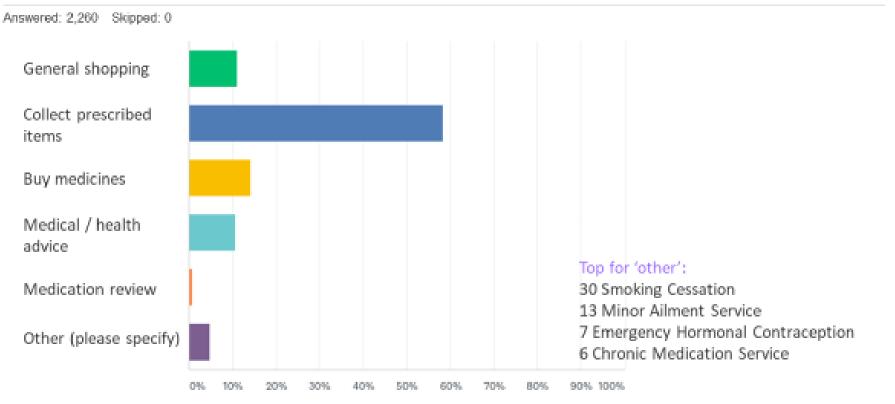
Health status







What is your main reason for visiting community pharmacy today?





First Port of Call: results - awareness

Which of the following did you already know about community pharmacy and pharmacy staff?

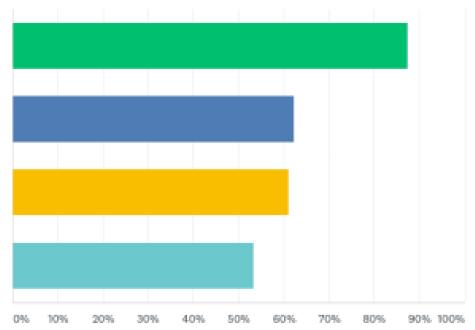
Answered: 2,169 Skipped: 91

Community pharmacies are contracted by the NHS to deliver a range of services

Community pharmacy premises must have a private consultation room

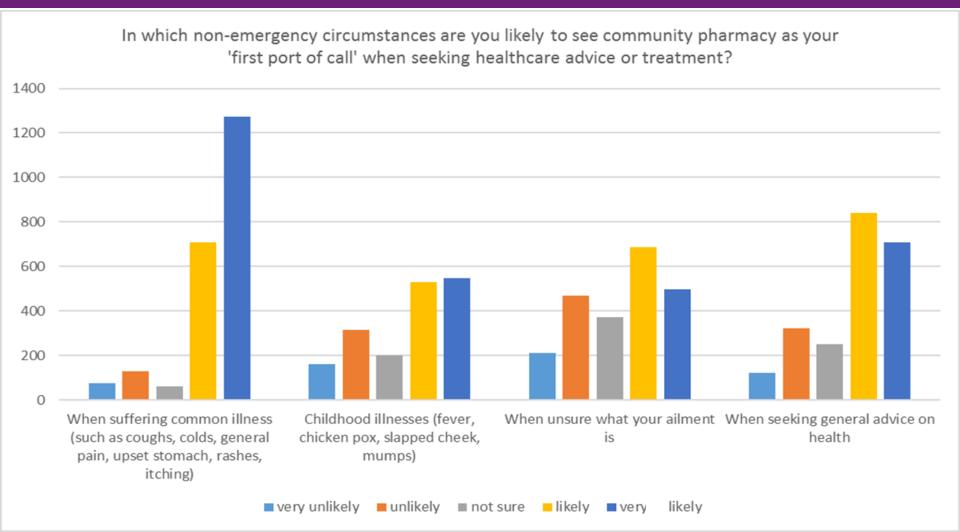
Pharmacists are bound by 'fitness to practise' regulations and professional standards similar to those set for GPs

Pharmacists with an additional qualification can diagnose and prescribe for conditions within their area of competence





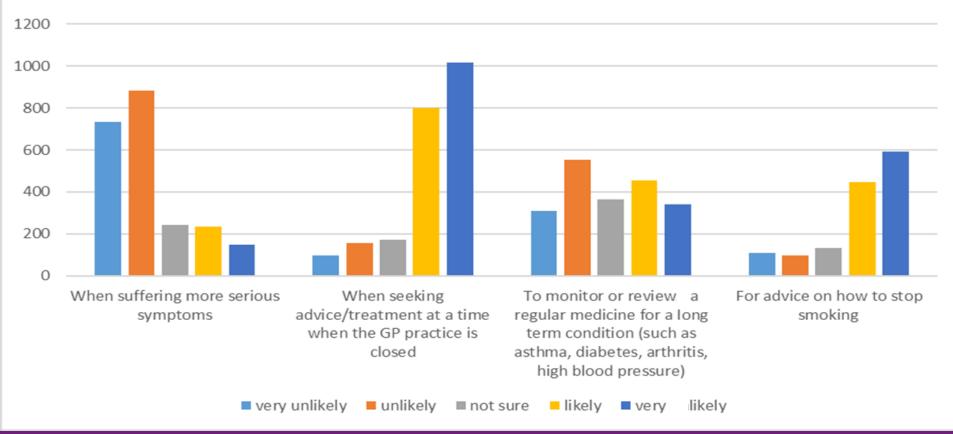
First Port of Call: results — which circumstances





First Port of Call: results — which circumstances

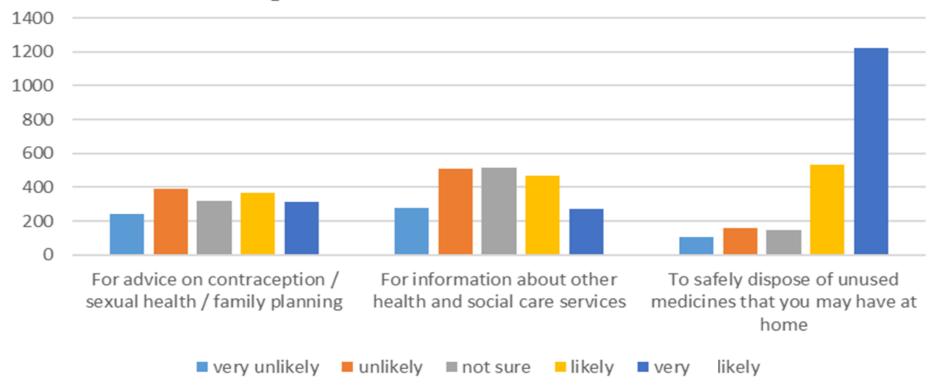
In which non-emergency circumstances are you likely to see community pharmacy as your 'first port of call' when seeking healthcare advice or treatment?





First Port of Call: results — which circumstances

In which non-emergency circumstances are you likely to see community pharamcy as your 'first port of call' when seeking healthcare advice or treatment?





First Port of Call: results — why not

Where you have chosen 'unlikely' or 'very unlikely' in the previous question, what were your reasons for doing so? Choose all that apply.

Answered: 1,986 Skipped: 274

Unaware these services were available in community pharmacy

Uncomfortable speaking in community pharmacy environment

It's more convenient to get an appointment with a GP

Have a relationship with GP that don't have with community pharmacist

Would phone NHS 24

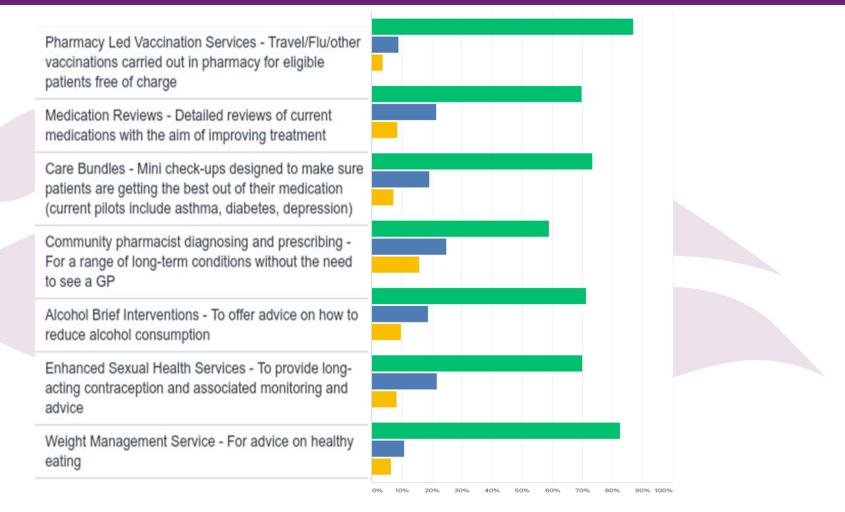
Would look for information online

Other included

10% 30% 40% 50% 60% 70% 80%	0%	20%	30%	4.0.04	 	0.044	1900.04	0.041	



First Port of Call: results — future services



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Please give your views on the following statements regarding community pharmacist access to patients' electronic health records. Answers are on a 5-point scale ranging from 'strongly disagree' to 'strongly agree'.

I expect my community pharmacist to have access to read parts of my EHR

Community pharmacists should have access to read and update relevant parts of my EHR

I trust my community pharmacist to protect my confidentiality

I would be concerned that my EHR could be read by other people in the pharmacy

I would feel more confident in the treatment I receive if the community pharmacist had access to my EHR

I would be more likely to view community pharmacy as my first port of call for health issues if the pharmacist had access to my EHR

