

# Developing a Framework for Pharmacist Prescribing: A Risk-Based Approach

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## INTRODUCTION

Non-medical prescribing allows for streamlined access to medication, leading to a reduced workload for general practitioners and increased professional satisfaction for pharmacists.<sup>1</sup>

Determining patient's perception of the risks involved with an expanded prescribing model is important before implementation, to determine acceptability of the prescribing model.

## AIMS

- To assess consumer perception of the risks associated with pharmacist prescribing.
- To develop frameworks for pharmacist prescribing for selected medical conditions, based on consumers' and healthcare professionals' perceptions.

## METHOD

### Phase 1

A self-administered questionnaire entitled 'Consumer perception of risks of pharmacist prescribing' was developed.

Questionnaire was validated, pilot tested and disseminated using convenience sampling via social media and in person distribution.

The Mann-Whitney U test and Kruskal-Wallis test were used to identify variances based on age, gender and level of education of the respondents.

### Phase 2

Data extrapolated from questionnaire was presented to an age- and gender- balanced focus group consisting of 4 general practitioners and 4 pharmacists.

Focus group was presented with Risk Priority Numbers for a number of medical conditions based on Phase 1 results.

Five medical conditions were selected for development into frameworks for pharmacist prescribing. These were validated by the same focus group.

## RESULTS

- Two-hundred and five valid responses were collected.
- Demographic analysis revealed that 77% of respondents completed tertiary or post-graduate education. Age and gender were distributed as shown in figure 1

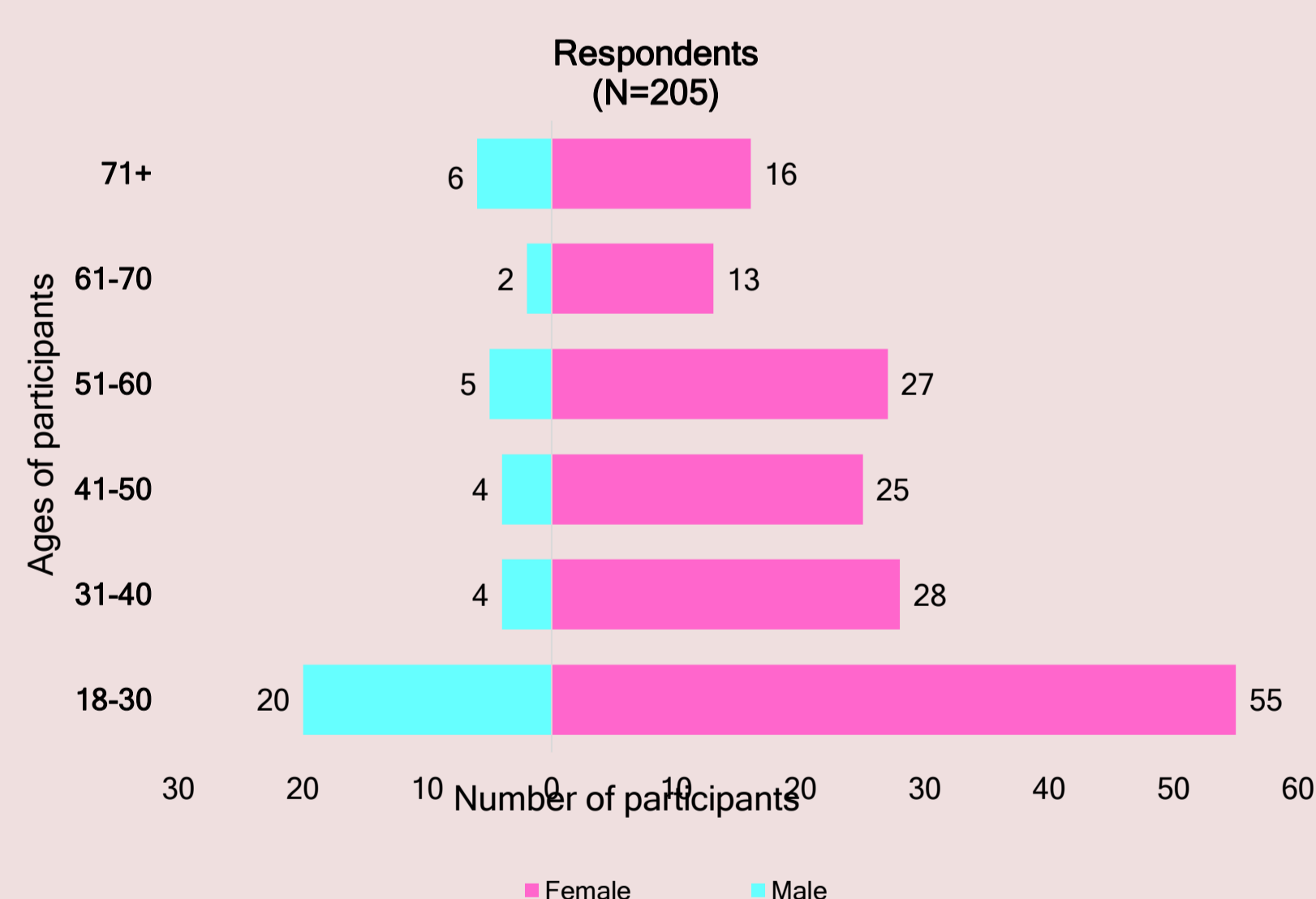


Figure 1: Age and gender distribution of questionnaire respondents

- The probability of side-effects was multiplied with the severity of consequences to calculate the RPN, as perceived by consumers.
- Thirty-six conditions were categorized as low risk (RPN= 1-5), 12 conditions as medium risk (RPN= 6-15), and none were categorized as high risk (RPN- 16-25).
- The focus group identified 21 conditions for inclusion in a pharmacist prescribing framework. Frameworks for the 5 most frequently selected conditions were devised.
- Frameworks were developed based on existing literature and recommendations put forward by the focus group.
- Frameworks were devised for nicotine dependence, urinary tract infections, muscle strains and sprains, mild acne and conjunctivitis.

## CONCLUSION

By studying perceived risks of pharmacists prescribing, risk reduction strategies, such as the development of a pharmacist prescribing framework for selected conditions, and the use of a collaborative model, can be implemented to ensure acceptability of the model.

Data gathered through both the questionnaires and the focus group of healthcare professionals revealed encouraging results, in which consumers had an overall positive impression of pharmacists, and trusted pharmacists with prescribing practices, as none of the specified minor or chronic ailments were deemed to carry high risk.

## REFERENCES

1. Mills T, Patel N, Ryan K. Pharmacist non-medical prescribing in primary care. A systematic review of views, opinions, and attitudes. *Int J Clin Pract Suppl.* 2020; 75(3): e13827. DOI: <https://doi.org/10.1111/ijcp.13827>.