**Evaluation of a conceptual model of collaborative working between GPs and community pharmacists: a qualitative study**

Mohsina Tariq1, Simon White1, Rebecca Venables1, Simon Harris2,3 and Elizabeth Mills2,3

1School of Pharmacy, Keele University, 2Green Light Healthcare Ltd, 3School of Pharmacy University College London

**Introduction**1

Recent health strategy and policy has focussed on GPs and community pharmacists working more closely together to improve patient care. Bradley and colleagues developed a conceptual model of GP-pharmacist collaboration, comprised of seven factors (locality, service provision, trust, ‘knowing’ each other, communication, professional roles and professional respect) and the extent of collaboration for each factor is divided into three levels (level 1 – isolation; level 2 – communication; level 3 – collaboration), with a descriptor for each level of the seven factors.1 However, the practical usability of this model in determining the extent of collaborative activity between GPs and community pharmacists does not appear to have been explored.

**Aim**

This study aimed to evaluate Bradley and colleagues’ model in practice through in-depth interviews with GPs and community pharmacists with experience of such collaborative activity.

**Methods**

A qualitative approach was adopted on the basis of being appropriate for gaining insights into the nature of participants’ experiences of collaborative activity. The interview guide was developed to meet the study aim and was theoretically informed by Bradley and colleagues’ model.1 Participants were identified, approached and recruited (in person or by email) through personal contacts and professional networks. This allowed a purposive sample to be drawn of UK GPs and community pharmacists known or recommended to the study team who had been recently involved in collaborative working initiatives with either community pharmacists or GPs. As an initial exploratory study, there was no target sample size and data saturation was not sought. In depth, audio-recorded telephone interviews were conducted with participants and transcribed verbatim. These were analysed using Framework analysis, mapped to Bradley and colleagues’ model.1,2

**Results**

Interviews were conducted with three community pharmacists and three GPs. Analysis of the data revealed that whilst the model broadly fitted participants’ experiences, attributing aspects of their reported collaborative activity to specific levels of the model could be problematic. This was mainly due to overlap between or insufficient fit with the descriptors for the levels within factors. For example, one GP said “…pharmacists can be useful in a substitute role to GPs…” which seems to correspond to level 2 for the ‘professional roles’ factor, since the descriptor includes that the “GP believes the pharmacist can be useful in a substitute role…”. However, the GP also said that ‘…pharmacists are a useful resource to consult for advice…’ which seems to better fit into level 3 for this same factor, since the descriptor includes that “…The GP views the pharmacist as a useful resource for them to consult for advice…”.In addition, the model does not easily allow for assessment of the overall extent of collaboration, since there is no scoring of factors, for example, no minimum thresholds for overall categorisation of the levels of collaboration or differentiation between the relative importance of factors.

**Discussion**

The findings suggest that whilst of clear conceptual value, the model needs further development for use as a practical tool. This study was limited in size and additional practical issues may emerge from more extensive evaluation. Further research is warranted to develop a practical tool to facilitate collaborative working between GPs and community pharmacists.

**References**

1. Bradley F, Ashcroft D, Noyce P. Integration and differentiation: a conceptual model of general practitioner and community pharmacist collaboration. *Res Soc Adm Pharm* 2012; 8: 36-46.
2. Gale N, Heath G, Cameron E, Rashid S, Redwood S. Using the framework method for the analysis of qualitative data in multi-disciplinary health research. *BMC Med Res Methodol* 2013; 13: 117.