

Developing an R&D agenda for pharmacy workforce research

KAREN HASSELL and LIZ SESTON

Introduction Over 12,000 pharmacies in Britain provide access to medicines and health care advice to millions of people every day, making pharmacists an integral part of primary health care services. Alongside their more traditional contribution to the National Health Service, pharmacists also play an increasingly important role in primary care organisations, for example, by helping to manage general practitioner (GP) prescribing or providing clinical expertise to patients with chronic illness. With the recent NHS plan¹ and the pharmacy strategy² further roles for pharmacists are likely to emerge.

Against the increasing involvement of pharmacists in primary care and their changing roles in secondary and intermediary care, the pharmacy profession is reporting difficulties recruiting and retaining its workforce. Questions about the supply of and demand for pharmacists and about workforce capacity in general, are difficult to address because of a dearth of research about pharmacists and their careers. Most pharmacy practice research focuses on evaluating new services, with very little published work on the workforce.

The need to stimulate interest and investment in the workforce was recognised in 1995 when a task force was set up to review the research infrastructure underpinning practice and service delivery in the pharmacy profession.³ This paper reports the findings from a consultation exercise, undertaken as a direct result of recommendations made by the task force, to identify and prioritise the research agenda for the profession and its workforce.

Method The consensus technique known as the Delphi survey was used for the consultation process. The "idea generation" stage was conducted qualitatively, by inviting

FOCAL POINTS

- A consultation exercise was conducted to identify and prioritise the research agenda on the pharmacy workforce
- A two-round Delphi technique was employed for the main study
- People from all sectors of the profession were invited to contribute their views on what research should be carried out
- Ninety per cent of respondents agreed that the top priority for research was to "identify the levels, causes and implications of turnover among different cohorts of pharmacists"
- The need to take forward aspects of the proposed programme is now a matter of some urgency for the profession and the National Health Service

named individuals: "to list as many questions, problems or issues you can think of about the pharmacy workforce which you believe require attention, and say why you believe them to be important". Based on the qualitative responses in the first round, eight research scenarios and 37 statements were formulated for the second round or the "prioritisation" stage of the Delphi. A questionnaire containing the research statements was sent to respondents from the first round. Using a seven-point scale they were asked to rate the statements on one dimension: how valuable the results of the research would be to pharmacy if it were to be carried out. In this study, consensus was defined as having been achieved if 75 per cent of respondents to a statement gave a score of 5 or more on the 7 point scale.

Results Consensus was reached on a total of 14 of the statements, spread fairly evenly across five of the eight themes. Almost 90 per cent of respondents agreed that priority should be given to "identify the levels, causes and implications of turnover among different cohorts of pharmacists". Research into the adequacy and suitability of undergraduate

training, ranked second, while joint third were statements concerned with recruitment and motivation, and with identifying skills and competencies needed by pharmacists to deliver future pharmacy services.

Conclusions In light of the commitments made by the Department of Health to make better use of the pharmacy workforce, publication of a workforce research and development agenda in pharmacy is timely. The need to take forward aspects of the proposed programme is now a matter of some urgency for the profession and the NHS.

References

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School of Pharmacy and Pharmaceutical Sciences, University of Manchester, Oxford Road, Manchester M13 9PL
K. Hassell
E. M. Seston

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