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Original Research

A qualitative study exploring community pharmacists' awareness of, and contribution to, self-care support in the management of long-term conditions in the United Kingdom

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Abstract

Background: Self-care support refers to activities aimed at educating, training and empowering patients with skills and ability to manage [and monitor] their long-term conditions (LTCs). While self-care support by health care professionals has emerged as a distinct concept in the management of LTCs, evidence of community pharmacy's contribution is sparse.

Objective: The aim was to explore community pharmacy's contribution to self-care support of LTCs. The objectives were to explore how community pharmacists conceptualize self-care support of LTCs and how they operationalize the core elements of this in their practice.

Methods: Semi-structured interviews were conducted with community pharmacists in England (n = 12) and Scotland (n = 12). A framework consisting of the core elements of self-care support (information and advice; skills training and support; technology; support networks; and collaborative care planning) was developed from the literature and was used to structure the interviews and analysis. Analysis was done thematically using the interpretative phenomenological analysis technique.

Results: The three main themes that emerged were conceptualization; operationalization of the core elements; and barriers to providing self-care support. Participants conceptualized self-care of LTCs as patients taking responsibility for their own health, performing activities that improved their LTCs and that enabled them to become more independent in managing their LTCs. Their views on self-care support did not reflect this conceptual understanding but was described primarily as providing patients with information and advice rather than actively supporting them. Participants' views of operationalizing the core elements of self-care support was found to be medicines focused, opportunistic and dependent on the services they provided, rather than being patient-centered and proactive. The barriers to providing self-care

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support of LTCs in community pharmacy were described as priority accorded to dispensing activities, the structure of the community pharmacy contract, lack of incentives to provide self-care support and patients' expectations and lack of awareness of community pharmacy's role in LTCs management.

Conclusion: Community pharmacists' theoretical understanding of self-care was not reflected in the ways that they portrayed their contributions to self-care support. The current ways in which community pharmacy delivers its services for patient care may need to be re-configured in order to fit into the holistic self-care support paradigm.

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Keywords: Self-care; Self-care support; Community pharmacy; Long-term condition; Health care professional; Collaborative care planning

Introduction

Self-care support: a paradigm shift in the management of LTCs

The term 'self-care,' i.e. the care of oneself, refers to the everyday activities of individuals that affect their health, for example, adopting healthy lifestyles like exercising to maintain health, ensuring proper living hygiene to protect health and selfmedicating to restore health. For people with longterm conditions (LTCs), a number of these tasks can be complex and challenging, including managing the appropriate use of their own medicines, and it sometimes requires a drastic change in ways of living.² Consequently, many people with LTCs require support, which enables them to take responsibility for improving their health outcomes through the actions and decisions they make in their daily living.^{3,4} This is referred to as 'self-care support' (also self-management support), and is now a central component of many models of LTCs management. Self-care support is not a new concept,⁵ but it has evolved with increasing acknowledgment that the current model of care, which focuses on acute, episodic care, will not meet the future demands of LTCs. 6 According to the Department of Health in the United Kingdom (UK), about 70-80% of the population of people living with LTCs require self-care support.

There is ample evidence to indicate that self-care support works, although there are divided opinions on how best to engage in it; whether through lay-led interventions vs. health care professional-led interventions tis, disease-specific vs. generic interventions vs. generic interventions vs. group programs. One of the underlying principles of most successful self-care interventions is that they are underpinned by theories of behavior change, vs. as the self-regulation or common sense model, the social cognitive theory, the self-through the social cognitive theory.

theory of planned behavior¹⁷ and the transtheoretical ('stages of change') model.¹⁸

In the UK, health policy has been evolving radically with a key priority on inculcating patient-centered self-care support into the culture and practice of health-care professionals (HCPs). 19 Successive UK governments have attempted to restructure and reform how the National Health Service (NHS), the main, publicly funded health care provider in the UK, organizes and delivers care to people with LTCs. Self-care support is a key component of the NHS model for the management of LTCs outlined in 2006.²⁰ This model, adapted from the widely accepted chronic care model,²¹ emphasizes the key roles that patients play in the success or failure of their own treatment and care.²² It also advocates for a change in the current HCP-patient relationship and interaction, from the traditional paternalistic approach, to one that puts patients at the center of their own care and one that supports them to undertake self-care.²³ Self-care support involves all activities aimed at educating, training and empowering patients with skills and ability to monitor their conditions in order to maintain a satisfactory quality of life.²⁴

Managing LTCs in community pharmacy; is there a place for self-care support?

The role of community pharmacists worldwide is evolving from a traditional 'backroom' dispensing role to one where pharmacists are now front-facing and getting actively involved in patient care, particularly for people with LTCs.²⁵ In the UK, community pharmacy supply patients with their prescribed medicines through dispensing and repeat/serial dispensing services, in addition to playing expanded roles of supporting patients to get the best out of their medicines and improve their health outcomes. The role expansion of community

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