

## Development, implementation and evaluation of a pilot project to deliver interventions on alcohol issues in community pharmacies, 'Drinking in Pharmacies'

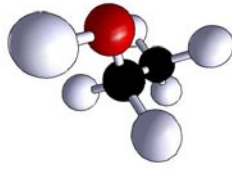
### Introduction

There is increasing concern amongst health professionals and officials at the rising level of alcohol consumption in the UK and the overwhelming evidence of the negative impact of excessive alcohol consumption on health. Excessive alcohol consumption is associated with an increased risk of a whole range of illnesses that collectively contribute to a massive impact on the morbidity and mortality of the population as a whole. Despite this increasing concern, recorded evidence of community pharmacy involvement to identify/address hazardous or harmful drinking is virtually non-existent. The argument for pharmacy involvement in addressing alcohol issues is strong, since an estimated 600,000 people visit a community pharmacy in Scotland each day, accessing a walk-in facility without the need for a pre-booked appointment, and 95% of the population does so at least once each year.

This project sought to evaluate for the first time, the feasibility and acceptability of the provision of brief interventions on alcohol in community pharmacies. The objectives were to:

- (1) Establish a pilot project in which trained community pharmacists initiate discussion of alcohol consumption with targeted pharmacy clients and screen, intervene or refer as appropriate.
- (2) Explore, with pharmacists and clients, the feasibility, acceptability, perceived value and perceived impact of the provision of such interventions in community pharmacy.
- (3) Identify markers of good practice and formulate recommendations for future practice.

Eight community pharmacies in Greater Glasgow participated. A baseline evaluation was carried out to establish pharmacists' knowledge and attitudes relating to alcohol prevention and education. After a two day training course for pharmacists, the eight pharmacies were asked to recruit clients over a three month period. Standardised protocols were prepared to screen clients for hazardous drinking using the Fast Alcohol Screening Tool, to guide the intervention and to record the whole process for each client. Clients were recruited from specific target groups as well as through posters highlighting the service. Following completion of the recruitment phase, pharmacists and clients were followed-up by the research team.



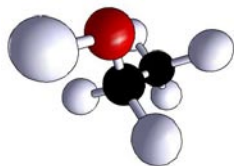
### Findings

In the baseline evaluation, all pharmacists agreed that they were interested in the responses that could be made to alcohol-related problems but just one claimed to regularly raise the issue of drinking with clients. All felt it appropriate for community pharmacists to “opportunistically identify hazardous and harmful drinkers and to deliver a brief intervention” although they had some concerns about client sensitivities. Most were unable to correctly outline the recognised daily limits for alcohol consumption and none was familiar with the concept of brief interventions to address hazardous drinking. Training was rated highly and had an impact on knowledge and attitudes. On follow-up the pharmacists were positive about the project and felt it worthwhile and importantly noted no aggression or strong negative reactions from clients.

Seventy clients were recruited to the study, 30 screened as drinking hazardously (42.9%) and 7 (10%) screened positive for harmful drinking. Nineteen clients were followed-up and most were happy to have taken part in the intervention and were generally positive about the experience.

### Implications

- This project has been successful in establishing a pilot project in which eight trained community pharmacists conducted a discussion about alcohol with 70 clients.
- Where clients were screened as drinking hazardously or harmfully, the pharmacists provided a brief intervention including advice about sensible drinking guidelines and alcohol units, appropriate literature and options for cutting down consumption
- Comprehensive training for pharmacists is necessary to enable them to feel confident in providing this kind of service in community pharmacies. Pharmacists felt that the training in this case was of appropriate duration and content although they felt that there should have been no gap between training and the commencement of service provision.
- While acknowledging these positive aspects, the findings should nonetheless be interpreted with caution. This research was planned as a pilot feasibility study and hence the pilot pharmacies are not necessarily representative of



community pharmacies in general, either locally or nationally. Similarly, those clients participating in the study may not be typical of the general community-pharmacy attending population. It is not possible to say what proportion of clients who were approached refused to participate in the research in the first place and there was further attrition among those who agreed to be followed up and those with whom a follow up interview was actually carried out.

- Further work is necessary to determine the best way to approach clients in relation to alcohol issues, that is, whether posters and leaflets advertising the service are sufficient or whether pharmacists should raise the issue specifically with certain groups, and if so, which groups. In addition, further work is required to measure the impact on alcohol consumption.

This research was carried out at the School of Pharmacy, The Robert Gordon University in collaboration with Create Consultancy, NHS Greater Glasgow and Glasgow Caledonian University.

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**ALCOHOL INSIGHTS**

*Alcohol Insights* are brief summaries of the findings made from research or development grants.

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