Nurse practitioners in community pharmacies: Now a reality, so what do they do?

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Objective
Nurse practitioners (NPs) can legally prescribe a range of medicines and perform clinical services. Some community pharmacies have purchased a Revive Clinic franchise to offer NP services to meet client demand for such services. The Revive Clinic is the dominant model in Australia and has been operating since 2008. This study explored the integration of Revive Clinic NPs in community pharmacies, to inform collaborative patient care.

Methods
Interviews and observational data collection were undertaken in August - September 2011 with five Revive Clinic NPs, 10 pharmacists, 12 pharmacy staff and 17 clients of the clinics, in five metropolitan and four regional sites in Western Australia. Telephone interviews were conducted with key staff of three of the regional sites. Questions explored the operation of the clinic, workflow arrangements and procedures in the pharmacy.

Results
As independent practitioners, the NPs perform patient management services within their self-declared scope of practice. Pharmacists’ roles, including provision of Pharmacist Only Medicines, clinical monitoring services, advice and consumer medicines information, were not impacted by the NP. NPs complement these roles by providing more intensive and physical diagnostic services (e.g. ordering pathology) and prescribing via clinical guidelines. Clients were not pressured to have their NP-issued prescriptions or non-prescription product recommendations filled at that pharmacy.

Conclusions
Given the complementary nature of the NPs’ and pharmacists’ roles, further developments might focus on the ideal balance between independence of both practitioners and integration of the NP into the pharmacy team. The model suggests a strong future for collaborative patient care.