

Background

Multidisciplinarity is a key concept in patient education. Indeed, a multidisciplinary approach is recommended by the french health authorities^(a) and several laws govern this notion since the beginning of 2000s. In the university hospital of Lille, 34 patient education programmes exist but only 5 integrate a pharmacist in their team.

Purpose

First : To understand why pharmacists are so few in the patient education teams by **studying the perceptions of health professionals** on the work of pharmacists.

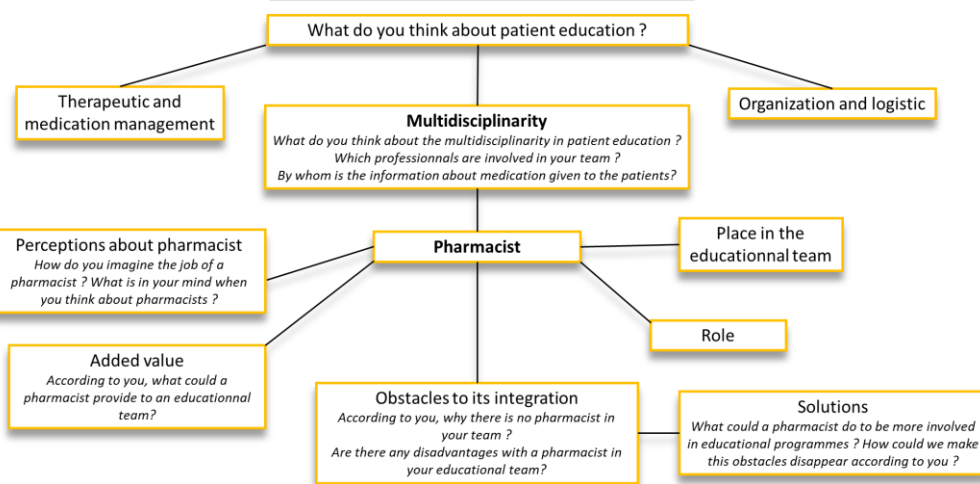
Then : Propose solutions to make easier the **integration of pharmacists** in these multidisciplinary healthcare teams.

Material and method

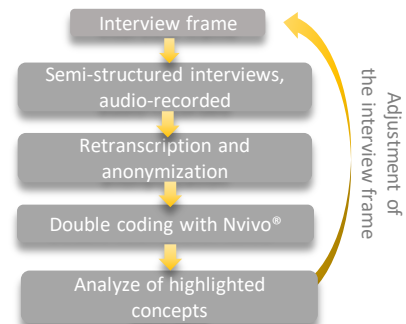
→ **Qualitative research**

→ **Semi-structured interviews** with the healthcare professionals involved in educational teams with no pharmacist.

Summerized frame of semi-structured interviews



Qualitative study process



Double coding : Verbatims were coded in Nvivo 12[®] by 2 pharmacists → minimize the subjectivity.

COREQ criteria : assess quality and scientificity of the study^(b).

Results

14 healthcare professionals interviewed, involved in 11 of our 34 education programmes.

→ 6 nurses, 4 doctors, 2 psychologists, 1 dentist, 1 clinical research associate.

Obstacles

- Multidisciplinarity = **heavy organization** by adding more health professionals
- **A job not well known** (especially clinical pharmacists)
- **Not physically in wards**
→ team coordinator can't identify them as a potential actor of patient education
→ pharmacists don't know the patient
- Other health professionals **share their knowledge** in specific wards

Opportunities

- Multidisciplinarity = **wealth and complementarity**
- Pharmacists have **to communicate about their missions** to be identify as an actor of patient education
- **Clinical pharmacist must be in wards** to be integrated in healthcare teams
- Pharmacists stays **the expert of medication**

Conclusion

This study revealed several obstacles to integration of pharmacists in education programmes but highlighted many opportunities. A beginning of reflection began among the people who were interviewed since they didn't have a pharmacist in their wards. Several teams mentioned being interested in the intervention of a pharmacist. But do pharmacists have their own obstacles ?