Consultant Pharmacist Post Recognition Application Pro-forma across London and the South East

2017 /2018

Please read then complete **ALL** sections in **FULL** sincefailure to do so will invalidate this document. Each of the sections should normally consist of not more than 250-300 words.

The grey boxes below should expand to accommodate your entry as you type. You will not be able to amend the text outside the grey boxes. To cross a box, click on the box using your mouse.

It is our policy to share anonymously good applications with organisations on request. If you do NOT agree to this, please cross the box. [ ]

**Please preface your application with a one page (A4) summary of your organisation’s vision for the post and the anticipated benefits/outcomes.**

**Section 1 – General information**

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| --- | --- |
| 1.1 | **Title of proposed consultant pharmacist post:**  |
| 1.2 | Date of application:       |
| 1.3 | Named contact for submission:      Telephone:      Email:       |
| 1.4 | **Address of employing organisation:**  |
| 1.5 | **Proposed base for post holder:**  |
| 1.6 | **HEE Regional Office:**  |

## Section 2 - Role and responsibilities of post

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| 2.1 | Please attach the following for the post as an appendix:Job descriptionPerson specification, * **A job plan related to each of the sub sections in 3.1 below**
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## Section 3 - Needs assessment

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| 3.1 | **What are the issues, problems, service needs and gaps in current provision?** |
| **3.2** | **How were these identified?** |
| **3.3** | **How will the post deliver medicines optimisation and value for money?**  |
| 3.4 | **Indicate how the post is consistent with the spirit of DH guidance** |

**Section 4 - Anticipated outcomes**

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| **4.1** | **Please state clearly what the post-holder will do, the level of responsibility they will hold and the outcomes expected in each of the following sections. Please include details in relation to patients, service improvement and medicines optimisation more generally.** |
|  **a)** | **Expert practice:** |
|  **b)** | **Research, evaluation and service development:** |
|  **c)** | **Education, mentoring and overview of practice:** |
|  **d)** | **Professional leadership and consultancy:** |

## Section 5 – Distinction between consultant and advanced level practice

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| **5.1** | **How will this post differ from that fulfilled by other members of the pharmacy team?**  |

## Section 6 – Strategic benefits

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| 6.1 | **How will the post contribute to the organisation’s clinical governance agenda and strategic plans?**  |
| **6.2** | **How will the post contribute to health service policy and targets?**  |

**Section 7 – Organisational map**

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| Please provide an organisational map that outlines the key working relationships the post-holder will have within the organisation (professional manager, advanced level pharmacists, other healthcare professional), wider health community/external partners (including Higher Education and, if appropriate, commercial sponsor) and links to strategic service planning. *N.B.* It is expected that post-holders will normally be professionally and organisationally responsible to the chief pharmacist for the employing authority (see also 9.2 below). Where a post-holder has accountabilities to a directorate/speciality outside pharmacy, clarity will need to be provided on specific reporting arrangements to both the directorate/speciality and the chief pharmacist. In this situation, it is expected that the post-holder will be accountable to the chief pharmacist both professionally and for medicines management policies. |

## Section 8 - Risk assessment of professional and legal liabilities:

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| This post-holder will be working at a high degree of personal and professional autonomy. They will need to be able to make decisions where precedents do not exist. A thorough risk assessment of the post must be undertaken. This section should include the structures and processes that will be in place to minimise risk to patients, post-holder and the employing organisation: |

## Section 9 - Performance review

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|  | **How will the post be monitored to ensure that it meets the identified needs and stated outcomes?**  |
|  | **What arrangements will be made for clinical supervision, development review and continuing professional development of the post holder?**  |

## Section 10 - Funding arrangements including assessment of salary

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| 10.1 | Annual leave entitlement:       days |
| 10.2 | Indicative salary (plus on-costs): £      *N.B.* Please attach the Trust-endorsed Agenda for Change job profile for this post (8b-d) |
| 10.3 | **Extras (e.g. mobile phone, laptops, office space, travel):**  |
| **10.4** | **CPD allowance: £**  |
| 10.5 | Secretary if appropriate (salary plus on-costs) (FT/PT): £       |
| **10.6** | **TOTAL COSTINGS AGREED: £**  |
| **10.7** | **Have annual increments been agreed in the costing?** |
| 10.8 | **Please indicate the anticipated study leave entitlement per annum:****and professional leave entitlement per annum:** |
| 10.9 | **Please give details of how annual/professional/CPD/maternity/sickness cover will be covered:**  |
| 10.10 | **Source(s) of recurrent funding:** |
| 10.11 | **Where the post is sponsored via a commercial source, specify the commercial source and any linkage with the fulfilment of duties:**  |
| **10.12** | **Signature:** |
| **10.13** | **Date:**  |

## Section 11 - Appointment process

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| 11.1 | **Please give an overview of the timescales for appointment. This does not require dates, but the anticipated intervals for local agreement on the post and funding, the approval process, and recruitment and selection:**  |
| 11.2 | Please outline the selection process and list the potential interview panel:*N.B.* The interview panel should include a Chief Pharmacist or Director of Pharmacy Services, medical consultant and an external assessor with appropriate expertise in the area of practice under consideration. It is suggested that an HEI representative participates unless the function is already provided by one of the above panel members      |
|  | How will evidence of competency be assessed? *N.B.* It is expected that candidates will have undertaken a broad, general level of post-registration training (not solely in their chosen area of practice) and have developed a majority of competencies at either mastery or excellence for the specified domains of the RPS Faculty Advanced Pharmacy Framework (APF) (page 11, DH Guidance).  |

**Section 12 – Details of those involved in the development and submission of this post**

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| Name | Designation | Organisation |
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**Please return this form electronically to:** **Katie.reygate@hee.nhs.uk** **and copy to:** **lasepharmacy@hee.nhs.uk**

**The panel will review applications twice a year.** Application deadlines are **30 April** and **31 October.** A response can be anticipated within 60 days from these deadlines.