Prerequisites for the KSS Foundation Pharmacist Programme 2017 / 2018



**Introduction**

Prerequisites to undertake the Health Education England (HEE) London and South East (LaSE) KSS Foundation Pharmacist Programme were generated by the need to review the curriculum, taking into consideration;

* Previous learning in pre-registration and undergraduate pharmacist training
* Training received in the induction period at NHS Trusts
* The triggers for trainees requiring additional support (TRAS) that have arisen within the programme to date.
* Within the current climate there is a need to ensure that work is not duplicated, including within training.

Experiences with TRAS’ have shown that individuals that commence a foundation pharmacist position at the same time as starting the KSS Foundation Pharmacist Programme are at a higher risk of leaving or failing the programme and they struggle within the workplace. The risk is furthermore increased if the trainee has no hospital experience prior to starting the foundation pharmacist position.

Trust induction programmes are vital in enabling foundation pharmacists to integrate into the workplace, whilst ensuring they are able to work safely and effectively through undertaking competency assessments (checking logs etc.). The induction process can be a difficult time for trainees as they learn to adapt to a new environment.

 To ensure that all trainees have the same baseline knowledge on entry to the foundation programme it is vital that they have proved a basic knowledge and competence of hospital pharmacy and how to practice as a hospital pharmacist.

**What is included in the prerequisites?**

The prerequisites list the learning outcomes within a joint programmes board diploma that are expected to be covered in the induction period of a Foundation Pharmacist.

**How to use this document**

All foundation pharmacists should ensure that all prerequisite learning is completed prior to starting the programme and building the portfolio in January. On the application form prospective trainees will have to declare whether they have completed all of the prerequisite learning outcomes. If a trainee has not they will be asked how many are outstanding and what plans are in place to aid in the timely completion of them. Once completed the prerequisites can be included within a foundation pharmacist’s stage 1 portfolio as evidence and mapped to the RPS Foundation Pharmacy Framework.

An example of how you should use this document is provided below.

***Example***

| **Pre-requisite Number** | **Learning outcome / Competence achieved** | **Date** | **Comments** | **Signature / initials** |
| --- | --- | --- | --- | --- |
| **1** | **Prescription Validation and Handling Queries** |  |  |  |
| 1.1 | Follows local procedures when validating prescriptions  | 10/10/14 | Completed screening competence training on induction. | A.Pharmacist |
| 1.2 | Identifies legal queries  | “ | AP |
| 1.3 | Uses relevant information sources to screen prescriptions  | “ | AP |

*The date should be when the task was completed.*

*Comments should include relevant information on how it was achieved.*

*This should be signed / initialled by an appropriate member of staff who assessed the foundation pharmacist complete the specific learning outcome or competence achieved.*

**What does “demonstrating awareness” mean?**

Within the learning outcomes demonstrating awareness is used frequently. When asked to “demonstrate awareness**”** we require foundation pharmacists to be aware of the issue at hand, and know what to if it arises (including referring to others), it does not mean you have to be fully competent in those areas, for example:

*“Demonstrates awareness of GCP training and regulations regarding clinical trials”* can be interpreted to mean that you as a foundation pharmacist are aware that clinical trials medications are regulated by GCP- good clinical practice, and that undertaking processes involved in the designing, conducting, recording and reporting of clinical trials requires staff who have completed Clinical trials GCP training and adhere to the ethical and scientific quality requirements stated within it. You should know what the process is, should you be faced with a patient admitted onto your ward with a clinical trial drug. In addition you should have an understanding on what implication this would have on the patient, their care and also on the clinical trial.  It does not mean you have to be have to be fully GCP trained and regularly dispensing clinical trials medications to sign this off, however if you have received training on GCP this is an added benefit.

**There are learning outcomes that are difficult to achieve as it is not provided within the trust, how do I achieve them?**

Several learning outcomes state “where applicable” after them, therefore if they are not available within your trust you can simply state N/A – not applicable within the table. This can also be placed next to other learning outcomes in which the service is outsourced to another provider, such as outpatients or private prescriptions.

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| Author: | Katie Reygate, Foundation Training Programme Director  | Version: | 2017 /18 |
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**Operational Pharmacy – Patient Services**

Through local induction the Foundation Pharmacist should have read relevant SOPs, received relevant training and undertaken relevant competency programmes to ensure they can:

| **Pre-requisite Number** | **Learning outcome / Competence achieved** | **Date** | **Comments** | **Signature / Initials** |
| --- | --- | --- | --- | --- |
| **1** | **Prescription Validation and Handling Queries** |  |  |  |
| 1.1 | Follows local procedures when validating prescriptions  |  |  |  |
| 1.2 | Identifies legal queries  |  |  |  |
| 1.3 | Uses relevant information sources to screen prescriptions  |  |  |  |
| 1.4 | Appropriately manages situations where the prescription is incomplete |  |  |  |
| 1.5 | Has awareness of the action to take in the event of a suspected forged, fraudulent prescription  |  |  |  |
| 1.6 | Identifies clinical queries  |  |  |  |
| 1.7 | Identifies formulary queries & appropriately manages requests for non-formulary medicines |  |  |  |
| 1.8 | Can discuss the appropriateness of a prescription with the prescriber  |  |  |  |
| 1.9 | Is aware of local procedures for authorising Doctors self-prescribing and demonstrates its use. |  |  |  |
| 1.10 | Follows local procedures when assessing Patients Own Drugs (PODs) |  |  |  |
| **2** | **Information Technology** |  |  |  |
| 2.1 | Demonstrates the ability to use the pharmacy dispensing and stock control computer system including locating stock, determining stock availability, identifying non-pharmacy stock locations, checking Patient Medication Records or local equivalent.  |  |  |  |
| 2.2 | Can use the pharmacy automated dispensing system (where available). |  |  |  |
| 2.3 | Demonstrates the ability to access the local laboratory test results system. |  |  |  |
| 2.4 | Demonstrates the ability to access information on the Trust Intranet e.g. clinical guidelines, Formulary, Trust policies. |  |  |  |
| 2.5 | Can use the Trust electronic prescribing system (where available). |  |  |  |
| 2.6 | Can use other local IT systems where available and appropriate e.g. prescription tracking  |  |  |  |
| 2.7 | Demonstrates awareness of local procedures in the event of IT downtime |  |  |  |
| **3-5** | **Dispensing Process**  |  |  |  |
|  | For each of the processes 3-5 below ensure the following prescriptions incorporated within the competency training package:1. Medicines (Inpatient, Outpatient, TTO)
2. Controlled Drugs
3. Clinical Trials
4. Oral Chemotherapy
5. Unlicensed Medicines
6. Named Patient Medicines
7. Private Prescriptions

*Completion of Documentation* |  |  |  |
| 3 | *Labelling*  |  |  |  |
| 4 | *Dispensing* |  |  |  |
| 5 | *Checking* |  |  |  |
| **6** | **Controlled Drugs** |  |  |  |
| 6.1 | Demonstrates awareness of their professional responsibilities with respect to controlled drug regulations |  |  |  |
| 6.2 | Follows all local controlled drug policies and SOPs |  |  |  |
| **7** | **Stock Control and Ordering Internal and external ordering**  |  |  |  |
| 7.1 | Demonstrates knowledge of internal requisitioning and external ordering for out of hours service  |  |  |  |
| 7.2 | Follows local procedures to ensure stock is managed correctly including appropriate management of stock discrepancies, returns, storage |  |  |  |
| 7.3 | Ensures “to follow” items or Owings are ordered and appropriately processed  |  |  |  |
| 7.4 | Follows local formulary processes appropriately  |  |  |  |
| 7.5 | Follows local procedures for ordering extemporaneous and aseptically prepared items  |  |  |  |
| 7.6 | Demonstrates awareness of local procedures for obtaining and supplying rarely used medicines  |  |  |  |
| 7.7 | Demonstrates awareness of procedures to follow in the event of a drug recall |  |  |  |
| **8** | **Waste management** |  |  |  |
|  | Complies with waste medicines regulations associated with the following: |  |  |  |
| 8.18.28.38.48.58.68.78.8 | 1. Returns from wards
2. Returns from patients
3. Expired medicines
4. Cytotoxic Medicines
5. Controlled Drugs Returned from wards
6. Returned from patients
7. Expired stock
8. Complies with the storage requirements of CDs awaiting destruction
 |  |  |  |
| **9** | **Management** |  |  |  |
| 9.1 | Follows local prioritising systems in place within the dispensary |  |  |  |
| 9.2 | Demonstrates knowledge of staffing within the department  |  |  |  |
| 9.3 | Can delegate tasks and queries appropriately, taking into consideration 9.2 |  |  |  |
| 9.4 | Demonstrates the ability to negotiate deadlines (e.g. with patient, colleagues, other staff members) taking into consideration 9.1 and 9.2 above. |  |  |  |
| 9.5 | Demonstrates knowledge of the Responsible pharmacist and its application locally. |  |  |  |
| 9.6 | Follows local procedures for maintaining the security of the department |  |  |  |
| **10** | **Local Services Provided** |  |  |  |
| 10.1 | Demonstrates knowledge of the services provided locally via contractual and Service Level Agreements e.g. outpatient dispensing services, provision of medications to other organisations  |  |  |  |
| 10.2 | Demonstrates awareness of local policies and procedures for the sale and supply of medicines to other organisations e.g. community pharmacies, private hospitals, vets |  |  |  |
| 10.3 | Appropriately manages requests for OTC supply, whether this service is provided by the patient services or not. |  |  |  |
| 10.4 | Appropriately manages requests for dispensing Private prescriptions, whether this service is provided by the patient services or not. |  |  |  |
| 10.5 | Appropriately manages requests to dispense prescription-only medicines without a prescriptionRefers requests to other health professionals where appropriate. |  |  |  |
| **11** | **Clinical Trials** |  |  |  |
| 11.1 | Demonstrates knowledge of clinical trials service provided locally |  |  |  |
| 11.2 | Demonstrates awareness of how to manage patients who have been admitted to hospital with clinical trial medications, including code breaking.  |  |  |  |
| 11.3 | Demonstrates awareness of GCP training and regulations regarding clinical trials.  |  |  |  |

**Clinical Pharmacy**

Through local induction the Foundation Pharmacist should have read relevant SOP, received relevant training and undertaken relevant competency programmes to ensure they can:

| **Pre-requisite Number** | **Learning outcome / Competence achieved** | **Date** | **Comments** | **Signature / Initials** |
| --- | --- | --- | --- | --- |
| **12** | **Ward Clinical Service Orientation** |  |  |  |
| 12.1 | Demonstrates knowledge of the clinical services provided locally e.g. Ward specialities/directorates/divisions |  |  |  |
| 12.2 | Follows local Clinical Pharmacy Standards and applies them to clinical practice. |  |  |  |
| 12.3 | Demonstrates awareness of local policies regarding the restrictions on prescribing on patient medication charts e.g. restrictions on chemotherapy prescribing |  |  |  |
| 12.4 | Follows local medication endorsement / annotation policies including following allergy documentation policies. |  |  |  |
| 12.5 | Demonstrates the ability to carry out medicines reconciliation according to local policies  |  |  |  |
| 12.6 | Demonstrates awareness of local processes for cascading information and seeking assistance to aid foundation pharmacists within their clinical practice. |  |  |  |
| 12.7 | Follows local procedures when assessing Patients Own Drugs (PODs) |  |  |  |
| 12.8 | Utilises information sources to aid in safe and effective clinical screening of inpatient medication charts / records. This should incorporate the following resources:* Medicines Management policy
* Prescribing guidelines
* Local formulary including process for request / one off supply
* Antibiotic Guidelines / policies including IV antibiotic to oral switch policy
* Relevant clinical protocols
* Use of named patient & unlicensed drugs
* Administration on IV drugs
* Therapeutic Drug monitoring policies and procedures
* Ward stock locations
* Safe and secure handling of medicines
* High Cost Drugs
* Home IV procedures (where available)
* Self-administration policies (where available)
 |  |  |  |
| 12.9 | Follows local procedures for writing in the patients’ medical records |  |  |  |
| 12.10 | Understands and follows local procedures for communication of clinical interventions including documentation.  |  |  |  |
| 12.11 | Understands and follows local procedures for providing written advice for patients and their carers to aid compliance. |  |  |  |
| 12.12 | Demonstrates awareness of local discharge processes, including planning for discharge patients with compliance aids |  |  |  |
| 12.13 | Understands and follows local procedures for participating in controlled drug stock checks |  |  |  |
| 12.14 | Demonstrates awareness of the Drugs & Therapeutics Committee (or equivalent) and the processes to approve clinical guidelines and medication approval. |  |  |  |
| 12.15 | Understands the importance of Data protection & confidentiality within their daily practice and has received local training.  |  |  |  |

**Medicines Information**

Through local induction the Foundation Pharmacist should have had an induction within a current local Medicines Information Department (within the department or those that provide the service as part of a service level agreement). Within this induction the Foundation Pharmacist should have:

| **Pre-requisite Number** | **Learning outcome / Competence achieved** | **Date** | **Comments** | **Signature / Initials** |
| --- | --- | --- | --- | --- |

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| --- | --- | --- | --- | --- |
| **13** | **Medicines Information Orientation** |  |  |  |
| 13.1 | Is able to describe local Medicines Information provision  |  |  |  |
| 13.2 | Has been given access to and orientation information sources available within their local medicines information service. (If no direct access to information, available signposting of resources should be provided as a minimum). |  |  |  |
| 13.3 | Awareness of and access to a local Medicines Information practice supervisor |  |  |  |
| 13.4 | Is aware of and accessed local information access outside of Medicines information e.g. Library registration and Athens account |  |  |  |
| 13.513.613.713.813.913.1013.1113.1213.13 | As a minimum has completed the following tutorials on Medicines Learning Portal\* [[http://www.medicineslearningportal.org/](http://www.medicineslearningportal.org/p/about_3.html) ]* Administration
* Adverse reactions
* Interactions
* Drug Handling
* Children
* Communication
* Critical evaluation
* Decision making
* Managing Medicines
 |  |  |  |
| **14** | **Local Enquiry procedures** |  |  |  |
| 14.114.214.3 | Understands and follows local procedures for Documenting enquires received and answered:* Out of hours
* Within Patient services
* Within Clinical practice
 |  |  |  |

\*Or equivalent training e.g. using the MI Training Workbook. Trainees who have not had a medicines information placement before should undertake a placement / induction before starting the programme. Work completed as part of the pre-registration year can be used as evidence; this should be checked and documented on induction.

**Clinical Governance and Patient Safety**

Through local induction the Foundation Pharmacist should have read relevant SOP, received relevant training and undertaken relevant competency programmes to ensure they can:

| **Pre-requisite Number** | **Learning outcome / Competence achieved** | **Date** | **Comments** | **Signature / Initials** |
| --- | --- | --- | --- | --- |
| **15** | **Patient Safety** |  |  |  |
| 15.1 | Has awareness of local clinical governance / risk structures. |  |  |  |
| 15.2 | Follows local procedures for reporting an Incident.  |  |  |  |
| 15.3 | Demonstrates awareness of Safe handling and disposal procedures for cytotoxic medications. |  |  |  |
| 15.4 | Demonstrates awareness of Procedure for dealing with chemical spillages including Use of protective clothing.  |  |  |  |
| 15.5 | Demonstrates knowledge of COSHH Regulations applied locally. |  |  |  |
| 15.615.715.815.915.1015.1115.1215.1315.1415.15 | Demonstrates awareness of local polices relating to NPSA alerts including:* NPSA – Never Events List
* Wrong route & Oral Syringes
* IV Potassium policy and guidelines
* Methotrexate
* Intrathecal policy
* High dose morphine/Diamorphine
* Epidural infusions
* Anticoagulation
* Injectable medications
 |  |  |  |
| 15.16 | Demonstrates awareness of high risk drugs and the policies and procedures that are associated with the prescribing, screening, dispensing, checking and administration of them, including extravasation. |  |  |  |
| 15.1715.18 | Demonstrates awareness of local policy, procedures and standards relating to:* Issuing and advising use of unlicensed medications (e.g. crushing medications etc.)
* Screening, Dispensing, checking of Total Parental Nutrition.
 |  |  |  |
| 15.19 | Demonstrates awareness of local procedures for safe transportation of medications (internally and to external clients). |  |  |  |
| **16** | **Cancer services\*** |  |  |  |
| 16.1 | Demonstrates knowledge of the cancer services provided locally. |  |  |  |
| 16.2 | Demonstrates awareness of how to manage patients who have been admitted to hospital with oral anticancer medications. |  |  |  |
| 16.3 | Demonstrates awareness of local procedures regarding the legality of extemporaneously prepared prescribing e.g. oncology prescriptions can only be prescribed by a consultant or SPR of oncology. |  |  |  |
| 16.4 | Demonstrates awareness of local procedures regarding the Screening, dispensing and checking of chemotherapy prescriptions (all types, oral, injectable etc.). |  |  |  |
| 16.5 | Demonstrates awareness of local intrathecal policy (where applicable) |  |  |  |

\*We recommend that all foundation pharmacists, whether they are based in a department that has an aseptic department or not, have a working knowledge of the mechanisms of the provision of anticancer medications and the associated risks. Trainees who have not had an aseptic department placement before should be provided with an opportunity to understand its functions and legalisation before starting the programme. Work completed as part of the pre-registration year can be used as evidence; this should be checked and documented on induction.

# FINAL DECLARATION

**I declare I have completed all the learning outcomes within the prerequisites that are applicable to the trust I am currently based.**

**Date completed: Foundation Pharmacist Signature: Name (PRINTED)**

**Date completed: Educational / Practice Supervisor Signature: Name (PRINTED)**