

Foundation Pharmacist Programme Development Workshops: On-call: 15th October 2019

Katie Reygate Foundation Pharmacist Training Programme Director Health Education England, London and South East Pharmacy

Overview of Event and Findings

Aim

Each of the workshops aimed to:

- Identify common induction requirements and activities for each rotation
- Identify pre-requisite requirements needed for Pharmacists to be able to work
- Create a minimum standard for each clinical rotation that would be acknowledged across organisations and reduce training burden
- To formulate the minimum content requirements of a regional vocational Foundation Pharmacist Programme.
- Discuss the barriers and enablers required for this approach to work across the region
- Identify further work streams required and next steps.

List of Participants can be found in appendix one.

Reviewing Service Delivery, Foundation Pharmacist Capability & the Developmental Gap

During this section of the workshop there were three activities used to encourage discussion and debate.

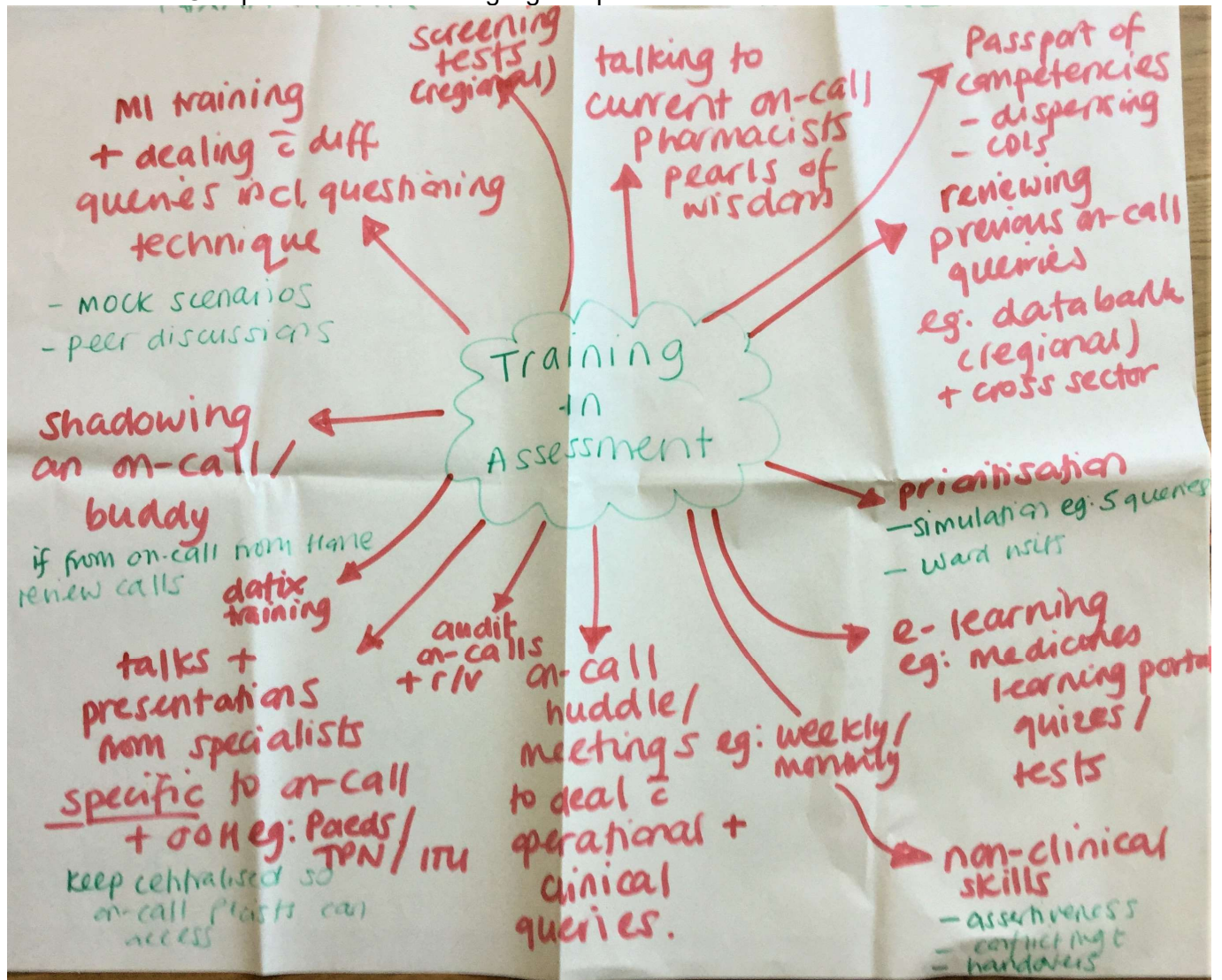
The first activity asked participants to consider what the Foundation Pharmacist (FPs) are expected to deliver as part of the on-call service and on reflection what knowledge, skills and experience is required to enable delivery. The group discussed the following:

<p><u>Skills:</u> Decision making skills Good communication Prioritisation Time Management Conflict Knowing your limitations Operational: stock and dispensing Escalation / referral Confidence Medicines information query answering (Basics): access and review information Challenging appropriately Basic IT skills Knowledge of pharmacy systems</p>	<p><u>Knowledge</u> Common issues in specialist areas: paediatrics and critical care Key drugs for areas Medical team structure / multidisciplinary team What questions to ask (enquiry taking) Clozapine Rapid tranquilisation Resources available IV administration IVIG Know who and when to refer to Location of stock RUM Recalls / shortages Poisons / TOXbase TPN Chemotherapy TDM Controlled Drugs Policies Major incidence Clinical Trials Organ Transplant treatment</p>
<p><u>Experience</u> Acute admission / general medicine in hospital Completed orientation Medicines information exposure Lone working and team working</p>	

The second activity required participants to discuss the preparation of Foundation Pharmacists to deliver the on-call service, including:

- How do you best prepare them for service delivery?
 - When / how?
- How can you assess they are ready / safe?
- Would you accept a passport system?
- Is there training that could be done earlier in their training journey?

The chart from Group one is below and highlights options.



Group two suggested:

- Period where FPs are supernumerary to the team, in which they:
 - o Undertake targeted questions to complete
 - o Induction / orientation to areas
 - o Sign off by each team lead for area
- Structure programmed
- Buddy system – two people on-call
- Extended weekend, longer late nights and 7-day working would support on-call service
- Mock on-call session using regular queries across trusts.
- WhatsApp group
- Backup system
- Flexible working

It was discussed that FPs are registered pharmacists, responsible for own judgement and decision making.

In the third activity it was discussed, in practice when are the FPs ready – and if not, what is the biggest barrier to being service ready?

- Training time, due to the variety of staff to be seen and orientation to systems and process
- Lack of on-call procedures
- FPs are delivering service so training for on-call is fitted in as and when time is available
- The start dates of FPs are variable so training can be delayed due to timing
- The variation in on-call services
- Lack of confidence and anxiety of undertaking on-call
- Lack of understanding of the job and role
- Pre-registration training; on-call is not considered
- Issues with finance:
 - o Buddying system is costly (pay for buddy and FP)
 - o Inconsistency in payments across system
 - o Resistance in back up system (cost issue and lack of volunteers)
- On-call coordinator (lead) – lack of recognition in the role and time allocated to provide support and training to FPs
- Well-being of FPs (especially residents)

It was suggested that there could be a framework for on-call training, on-call assessment at recruitment would be useful. The role of the on-call coordinator should include aspects of ensuring handover and feedback to FPs that would support the FPs in addition to directing training required.

It was raised that in Trusts where there a high number of pharmacists on the rota for on-call, a FP may only undertake two on call duties over a 6-month period. It was questioned if there is return on investment in training the FPs for this service, if they are only to be placed within a trust for a short rotation.

Developing Foundation Pharmacists in current climate

The participants were asked to reflect on current training provision and discuss what is done well and what can be improved, whilst considering

- Is there any good practice that can be shared?
- Are there any shared weaknesses that can be resolved collaboratively?

Good Practice	Improvements
On-call policies and procedures Standard operating procedures: operations (opening / locking up /codes) and checklist Training checklists for on-call Common query examples & scenario questions Key contact lists Back up rota Training – half day Shadowing Specialist tasks on 1 day <ul style="list-style-type: none"> - Regular huddles - Review of on-call database / feedback Review of ACAT	Rebrand on-call to “Emergency Duty Pharmacist” Train site coordinator Training the wider department Give time to train Set expectations of FP and department Robust back up system Practice based activities e.g. scenarios Standardised competency

Reflections of discussion and actions arising

The participants were asked to reflect on individual and collaborative group actions from the workshop the following actions were discussed:

	On-call Workshop 15.10.19	Responsible	Due date
1	Share Scenarios (SPS MI portal) - Specialist review - General enquiry basic MI	Participants	March 2020
2	On-call coordinator role - Escalating discussion - Collaboration with local trusts	Participants	Locally set date
3	Develop an FP lead workbook for development of on-call; containing scenarios and signpost further learning	Collaboration facilitated by HEE	March 2020
4	Review on-call remuneration	Participants	Locally set date

Next Steps

Actions from workshops to be discussed at the next Foundation Pharmacist Programme Development Network on 15th January 2020 with educational leads.
Creation of further working groups and timelines to be decided in January 2020.

Appendix One: Participants

- Fateha Hannan Al-Emran, Lead Pharmacist- Education, Training & Development, Barts Health NHS Trust
- Emma Bond, Education and Training Pharmacist, Royal Surrey County Hospital NHS Foundation Trust
- Lily Chong, Specialist Pharmacist – Clinical Services, King's College Hospital NHS Foundation Trust
- Simmy Daniel, Clinical Lead & Education and Training Lead, East London NHS Foundation Trust
- Sairah Mukhtar, Lead Acute and Emergency Pharmacist, East Kent Hospitals University NHS Foundation Trust
- Reema Patel, Advanced Specialist Pharmacist – Education & Training Lead, Central & North West London NHS Foundation Trust
- Sunny Patel, Lead Pharmacist Patient Services, University College London Hospitals NHS Foundation Trust
- Manka Ramachandran, Associate Director of Pharmacy: Clinical Services, Lewisham and Greenwich NHS Trust
- Tomi Tommy-Uffang, Operational Site lead Pharmacist, Queens, Barking, Havering and Redbridge University Hospitals NHS Trust