

Pharmacy Quality and Innovation in Practice Review 2019



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Executive summary

The HEE London and South East Pharmacy (HEE LaSE Pharmacy), working across London and Kent, Surrey and Sussex, quality and innovation in practice report aims to provide Chief Pharmacists, Educational Programme Directors, educational and practice supervisors and trainees with an overview of the feedback received through the Local Faculty Group (LFG) reporting process. 43 LFG reports were received and reviewed.

This report is comprised of four main sections;

1. Utilising LFG feedback to inform Future Quality Strategy
2. Themes emerging across the region
3. Asks of the HEE LaSE pharmacy team around future support and workforce transformation
4. Examples of innovative practice from organisations across London and Kent, Surrey and Sussex.

Utilising LFG report feedback to inform future quality strategy

In this section of the LFG report, we looked at all of the comments received through the reporting process and mapped these against the [HEE quality framework](#). In general, we found that;

- The LFG and the LFG reporting process supports improvements to the quality of education and training for pharmacy departments across the region.
- The LFG is seen as central to robust educational governance and leadership, along with creating a positive learning environment and supporting and empowering learners.
- A lower number of reports talked about the LFG supporting and empowering educators.
- Few LFG reports highlighted specifically that the LFG was a forum which pharmacy departments utilised to look strategically at sustainability of their workforce, recruitment and retention of staff or making the NHS or pharmacy [“the best place to work”](#).

Leading on from the above, we will continue to support educational leadership and governance process and learners generally, however we will also aim to provide further support to EPDs and educational supervisors, along with focusing more attention on the pharmacy workforce transformation agenda, department culture, recruitment and retention of staff.

Themes emerging across the region from the LFG reports:

- A need for greater support for development of education and practice supervisors (ESs/PSs).
- Wide variability in educational governance processes and educational infrastructure in pharmacy departments in London and Kent, Surrey and Sussex.
- An ask for more detailed, individualised LFG report feedback
- Assistance for streamlining quality in pharmacy educational programmes.
- Sustainability and succession planning for education and training teams.
- Variation in the ways in which rotations are managed.
- The value of opportunities to network and share best practice face to face and virtually.
- Support for learners and educators around the TRAS process
- Quality Visits and their role in supporting improvements to the quality of education and training offered by pharmacy departments across the region.

LFG reports highlighted four specific asks of the HEE LaSE pharmacy team:

- Clarity and guidance to pharmacy leaders around funding and salary support.
- Pharmacy Technician Workforce Development Support.
- Vocational Training Scheme and Foundation Pharmacist support.
- Assistance with workforce transformation, recruitment and retention of staff, along with support relating to pharmacy workforce integration across sectors.

The detail of these findings and next steps are outlined in the report below, along with examples of innovative practice occurring across the region that relate to these, and other asks of the HEE LaSE pharmacy team.

Examples of good practice within the region

Trust	Title of practice	Page no.
Barts Health NHS Trust	Pre-registration Trainee Pharmacist GP Experience	22
Brighton and Sussex University Hospitals NHS Trust	Flipped Learning	23
Central and North West London NHS Foundation Trust	Educational and Practice Supervisor Support Groups	24
Chelsea and Westminster Hospitals NHS Foundation Trust	Buddy system for PTPTs	25
Dartford and Gravesham NHS Trust	Cross Sector Placements	26
East London NHS Foundation Trust	Recovery College	27
East Sussex Healthcare NHS Trust	Submissions of posters to UKCPA Making every contact count MECC)	28
Imperial College Healthcare NHS Trust	Test patients with test pods	29
Lewisham and Greenwich NHS Trust	Department Staff Champions	30
London North West University Healthcare NHS Trust	Person Centred Care (PCC)	31
Maidstone and Tunbridge Wells NHS Trust	All clinical pharmacy assistants undertake MOP (POD checking module)	32
Medway NHS Foundation Trust	Improvement Huddles Trainee in Action Group (TIA)	33 34
North Middlesex Hospital NHS Trust	Multi-professional Preceptorship Training	35
The Royal Marsden NHS Foundation Trust	Embedding apprenticeship pathways	36
Royal Surrey County Hospital NHS Foundation Trust	Learning from errors and near misses	37

A review of Pharmacy LFG reports from across the London and Kent, Surrey and Sussex Region in 2019.

1. Introduction

As part of the ongoing quality monitoring process for pharmacy education and training provision across the region, Health Education England London and the South East (HEE LaSE) Pharmacy collates Local Faculty Group (LFG) reports from all NHS Trusts hosting commissioned trainees. 43 reports were received at the end of March 2019.

This report aims to provide Chief Pharmacists, Educational Programme Directors, LFG Chairs, educational and practice supervisors and trainees with an overview of the feedback received through the LFG reporting process and is comprised of four main sections;

- 1. Utilising LFG feedback to inform Future Quality Strategy**
- 2. Themes emerging across the region**
- 3. Asks of the HEE LaSE pharmacy team around future support and workforce transformation**
- 4. Examples of innovative practice from organisations across London and Kent, Surrey and Sussex.**

It has been created to support HEE LaSE Pharmacy and NHS Organisations in the region explore the current education and training landscape and to consider next steps in terms of pharmacy education and training strategy across London and Kent, Surrey and Sussex. The review aims to support the share and spread of what is going well across the region (innovations), what is not going so well (themes emerging) and what we can do collaboratively moving forward to continuously enhance the delivery of high-quality education and training to the current and future pharmacy workforce.

To support this work moving forward, we are holding a Pharmacy Workforce and Quality Day on the 27th November 2019 in London in addition to support from the various Educational Programme Directors (EPD) Networks. Further information is available [here](#).

2. Utilising LFG report feedback to inform future quality strategy

This section of the LFG reports provided the HEE LaSE Pharmacy team with an overview from across the system as to;

- How the LFG process supports improvements to the quality of education and training locally.
- Key asks of the HEE LaSE Pharmacy team in terms of future support around embedding quality in education and training.
- Overarching asks of HEE LaSE Pharmacy team to support the development and retention of a sustainable future pharmacy workforce.

Feedback received in the first part of the LFG report, informing future quality strategy, was thematically analysed, with key themes emerging further reviewed and stratified accordingly. An overview of the findings of this review can be found below.

2.1 Describe how LFG reporting process supports improvements to the quality of education and training in your department?

In this section of the LFG report, we received 131 comments from across the 43 reports. Each individual comment was reviewed and mapped against the [HEE quality framework](#) which focuses on six key domains;

- HEE Quality Standard 1 – Learning Environment and Culture
- HEE Quality Standard 2 – Educational Governance and Leadership
- HEE Quality Standard 3 – Supporting and empowering learners
- HEE Quality Standard 4 – Supporting and empowering Educators
- HEE Quality Standard 5 – Developing and Implementing Curricula and Assessments
- HEE Quality Standard 6 – Developing a sustainable workforce.

It is evident that across the London and Kent, Surrey and Sussex region, the LFG and reporting process provides organisations with an opportunity to reflect on what has gone well over the year regarding delivery of education and training locally.

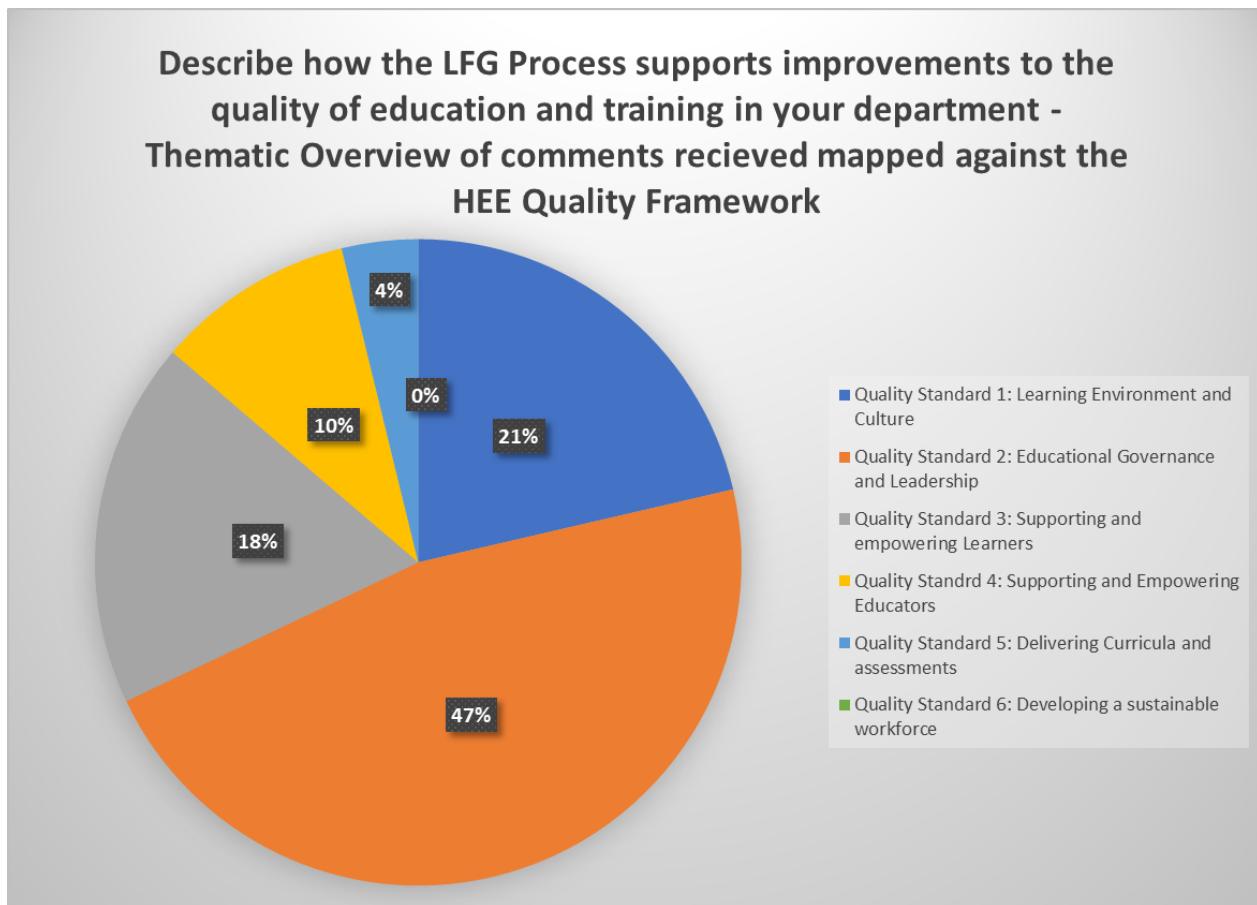


Figure 1: Thematic review and aggregation of comments (n=131) received as part of the LFG report process mapped against the 6 domains of the HEE quality framework.

Through review and aggregation of the comments received (Fig 1), it is evident that completion and submission of the LFG report provides organisations with;

- A dedicated means to continue to develop and strengthen the learning environment and culture (HEE Quality Standard 1)
- An opportunity to focus on enhancement of local pharmacy educational governance and leadership structures (HEE Quality Standard 2).
- An opportunity to continue to support and empower learners (HEE quality standard 3).

A smaller number of comments received talked about using the LFG as a forum to support and empower educators (HEE quality standard 4). This finding is not echoed in local quality visits, where we have heard that learners, educational supervisors (ES) and EPDs seem to generally be well represented at, and able to input into the LFG. However, practice supervisors (PS) seem generally to be less involved with, or sighted on discussions had at LFG's, actions generated and the subsequent follow up and monitoring of these actions.

We encourage organisations to reflect on;

- The current level of PS engagement with the LFG,
- Whether or not this group locally is fully empowered to input into the delivery and governance of education and training
- Whether there are sufficient communication channels to and from the LFG that ensure that all educators are sighted on the workings of, and actions generated through the LFG.

HEE Quality Standard 5 relates to delivering curricula and assessments. Although fewer comments were received that talked about using the LFG generally for the development of curricula and assessments in detail, many of the comments around overarching educational governance and leadership overlapped with discussions around training programmes design and review of learning objectives held at the LFG. That said, linked to the comments above around HEE Quality Standard 4, trusts are encouraged to continue to ensure that both learners and educators are empowered to input into the development of local training programmes and learning objectives generally.

With regard to HEE Quality standard 6, developing a sustainable workforce, very few LFG reports received highlighted specifically that the LFG was a forum which pharmacy departments utilised to look strategically at sustainability of their workforce, recruitment and retention of staff or making the NHS or pharmacy “[the best place to work](#)”. Alongside the HEE quality framework, the [Interim NHS people plan](#) highlights this as a specific area of focus for the coming months and years.

Moving forward, we encourage pharmacy departments to consider whether education strategy across organisations aligns succinctly with wider department strategy around recruitment and retention empowerment of staff, and any work ongoing around department and system culture.
(See below for examples of innovative practice in this area)

North Middlesex Hospital NHS Trust	Multi-professional Preceptorship Training
Medway NHS Foundation Trust	Improvement Huddles
Lewisham and Greenwich NHS Trust	Department Staff Champions

2.2 Key asks of the HEE LaSE Pharmacy team in terms of future support around embedding quality in education and training.

In this section of the LFG report, we received 116 individual comments as to what support would be useful from us to help facilitate the delivering of high-quality education and training across the region, with six broad themes emerging (see section 3 for detail):

1. ES/PS Support LFG report feedback and LFG governance development support.
2. LFG report feedback and LFG governance development support
3. Opportunities to network and share practice face to face
4. Opportunities to share best practice virtually
5. Learner support, particularly around the TRAS process
6. Quality Visits

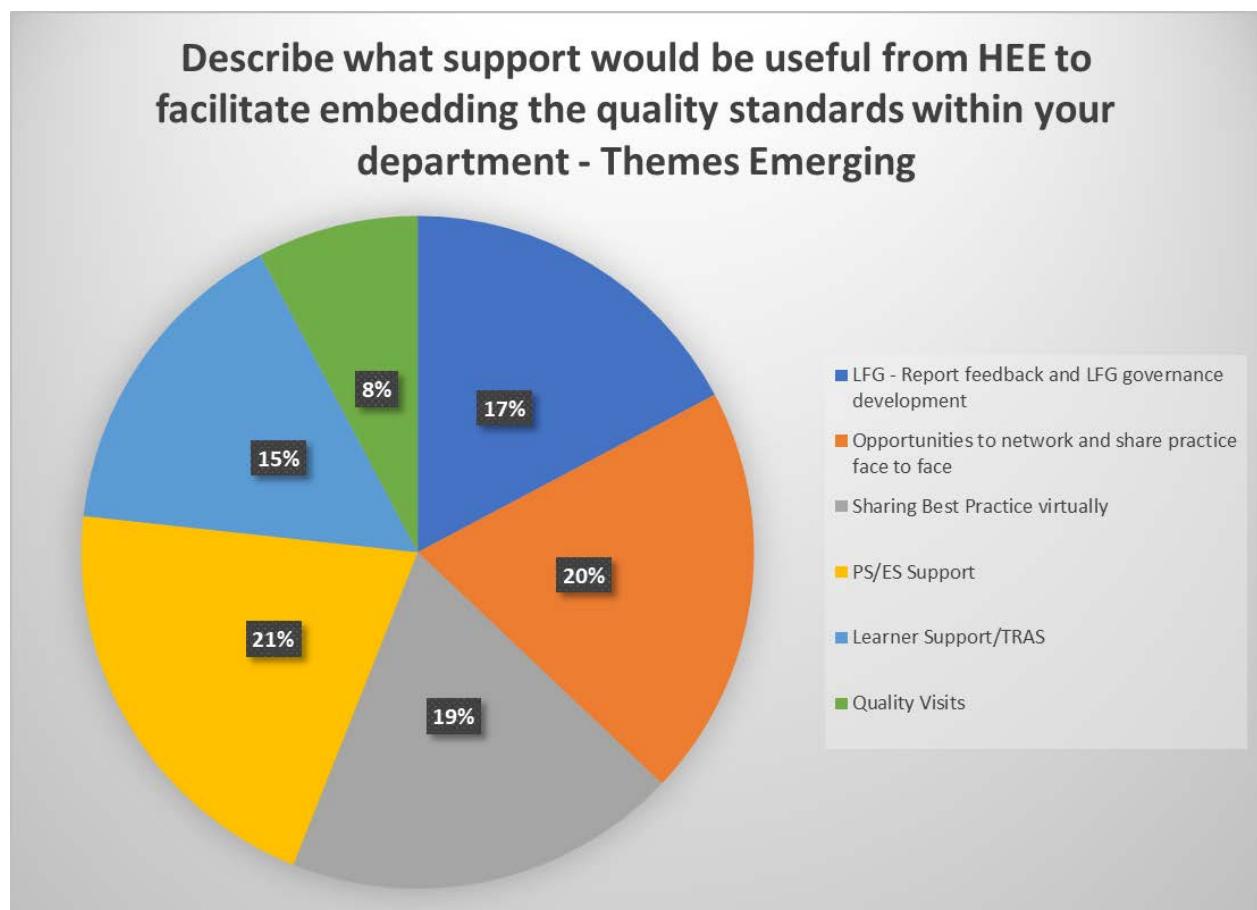


Figure 2: Overview of themes emerging in terms of areas of support requested by organisations from HEE LaSE Pharmacy (n=116 comments).

2.3. Overarching asks of HEE LaSE Pharmacy team to support the development and retention of a sustainable future pharmacy workforce.

As part of this section of the LFG report, we received 67 individual suggestions for support.

These suggestions broadly fell under the following 4 categories;

- Funding and salary support
- Pharmacy Technician workforce development support
- Vocational Training Scheme and Foundation Pharmacist support
- Workforce transformation.



Figure 3: Themes arising from LFG report regarding the nature and level of support you would find beneficial from HEE to enable you and your teams to develop and retain a sustainable workforce. (N = 67 comments).

Funding and salary support

HEE LaSE Pharmacy wrote to Chief Pharmacists on 7th January 2019 and advised of HEE's decision to review funding arrangements for staff groups currently funded through a salary support funding mechanism. However, following feedback from stakeholders nationally, this review process has been 'paused' until 2021/22 to enable full and comprehensive engagement, confirm any reinvestment and ensure coherence with the Long-Term Plan (LTP) and LTP People Plan. Our aim is to work collaboratively with all colleagues across London and Kent, Surrey and Sussex to ensure we develop, support and retain the future pharmacy workforce, and any future discussions around salary support will be undertaken in collaboration with all stakeholders across the region.

Pharmacy Technician workforce Development Support

As highlighted through the LFG reports received, NHS Long term plan³, APET⁴ review, interim people⁵ plan, there is a recognised need to increase the numbers of pharmacy technicians being trained across pharmacy sectors and upskill existing staff, to enable pharmacy workforce transformation and achieve the ambitions of the NHS Long Term Plan.

In 2017 the GPhC reviewed the initial education and training (IET) standards for pharmacy technicians. The new standards are aligned to the standards for pharmacy professionals and place a clear emphasis on ensuring that pharmacy technicians have the necessary knowledge and skills to demonstrate their professionalism and deliver person-centred care from day one of practice.

HEE LaSE Pharmacy currently commissions education provision for pre-registration trainee pharmacy technicians consisting of two qualifications to meet the former GPhC IET standards:

- Diploma in Pharmaceutical Sciences (Underpinning Knowledge)
- Diploma in Pharmaceutical Services (QCF/NVQ assessment)

It has been identified that these qualifications no longer meet the reviewed IET standards required for registration and practice as a pharmacy technician and that a new single qualification meeting the IET is required.

As such from February 2020, HEE LaSE will be commissioning education provision that meets the new IET standards for pharmacy technicians. PTPT EPDs and Chief Pharmacists have been

involved in discussions around this change across spring and summer 2019, and we will ensure that these and any other key stakeholder groups, including trainees themselves are involved in the development of this new programme over the coming months.

We also acknowledge that the current workforce will still require elements of upskilling in order to meet the new IET standards, as historically aspects of the new IET standards were undertaken post registration as a pharmacy technician. This may include;

- Final accuracy checking of dispensed medication
- Assessment of patients own medication (PODs) for use in hospital
- Transcribing for supply
- Medicines reconciliation

We are committed to working to continue to upskill the current workforce and will continue our current upskilling offers for pharmacy technicians, however, anticipate that as the new IET qualifications becomes embedded over the next 12 to 24 months, these additional upskilling offers will be scaled back.

Foundation Pharmacist Vocational Training Scheme (VTS) Development

Through the LFG reports, we heard overwhelming requests for guidance and information around the changing foundation landscape and how this will impact on the wider pharmacy workforce moving forward. As such, we are in the process of refining our regional Foundation Pharmacist Vocational Training Schemes Strategy, with a view to scope the current infrastructure in place and prepare the region for the roll out of a National Foundation Pharmacist programme over the coming years. This work supports the HEE Mandate for 2019/2020, (point 3.13) “Develop the infrastructure that will underpin a new foundation training programme for pharmacists to ensure all pharmacists are able to work across the full range of healthcare settings.” Linked to work already undertaken in the region, the HEE LaSE Pharmacy team has been given a national remit to explore scale up of VTS models and foundation programmes and will be engaging with colleagues across the region in the development of these over the coming months.

Pharmacy Workforce Transformation

Although not stated explicitly, the LFG reports highlighted several asks of the HEE LaSE Pharmacy team broadly around workforce “transformation” as follows:

- Support for trainees around interview preparation and job application writing.
- Support with navigating HR processes and visa applications.
- Wellbeing and mental health awareness amongst staff.
- Support for education leads, service leads and chief/deputy chief pharmacists around strategic pharmacy workforce planning across a region, ICP, ICS/STP footprint etc. and how the pharmacy workforce in secondary care fits with the evolving primary care landscape, particularly in relation to Primary Care Networks and Pharmacists working in GP practice.
- Supporting trainees and educators around career progression and career paths within pharmacy and the wider NHS

To help address and support organisations with some of the above challenges, and in light of other asks of the HEE LaSE pharmacy team around workforce transformation linked to the NHS long term plan, Interim people plan and Advancing Pharmacy Education and Training (APET) review, we are currently in the process of reviewing our core programmes of work in a bid to ensure that our future offer supports you to address some of the challenges highlighted above, meeting the needs of our diverse stakeholder groups, learners, educators and patients and aligns with the vision for pharmacy set out in the NHS long term plan. We will be sharing progress made in these areas at EPD network and Chief Pharmacist meetings and would welcome your thoughts on how best we can work with you to progress in these and other areas.

3. Themes emerging across the region from the LFG reports

3.1 LFG Governance and ES/PS development

There are varying levels of support available to both Practice Supervisors and Educational Supervisors locally, and organisations would like additional support from HEE in this area.

There are several ways in which Practice Supervisors (PS) and Educational Supervisors (ES) can be supported in practice, below are a few examples:

- Buddying systems (experienced ES/PS with and inexperienced ES/PS),
- Sharing of practice and standardisation through ES/PS forums,
- Implementing processes such as meeting checklists for ES / trainees,
- Peer observations / support.

As noted earlier in the report, it is important that all ES and PS can contribute to the Local Faculty Group and development of educational programmes, but we acknowledge that it is not viable to have all present within an LFG, nor should issues only be raised at LFGs if they are urgent. Therefore, it is often beneficial for there to be a support network or system for practice supervisors and educational supervisors to meet as a group on a regular basis, outside of the LFG and use this forum to capture group inputs into the LFG in a more efficient way. Where possible Educational Programme Directors (EPDs) should consider the use of IT/communication systems to make this process more streamlined.

To aid in support all PS and ES should formally have their role recognised within their job description and their line manager, in collaboration with the EPD, discuss their developmental and support needs to deliver their educational role in practice at appraisals.

Work is currently being undertaken to review the HEE LaSE Pharmacy PS and ES Frameworks which can support development of new and existing PSs and ESs. The HEE LaSE Pharmacy PS Framework is now [available](#) for use and it is envisaged that the ES Framework will be ready for use early September (2019). Alongside this piece of work HEE LaSE Pharmacy have worked with stakeholders to generate course curricular for PS and ES training and will be procuring training providers to deliver this to the region. (See below for examples of innovative practice in this area)

Brighton and Sussex University Hospitals NHS Trust	Flipped Learning
Central and North West London NHS Foundation Trust	Educational and Practice Supervisor Support Groups
Medway NHS Foundation Trust	Improvement Huddles Trainee in Action Group (TIA)

3.2 LFG Report feedback

A consistent theme from across the LFG reports we received was an ask to provide individualised feedback and support to organisations following review of individual LFG reports. Whilst this report outlines some broad themes from across the region, moving forward we are planning to review our quality support offer to the region and where practical offer more bespoke, individualised feedback to organisations, in a bid to better utilise the skills and knowledge within our team to help support you in the delivery of high-quality education and training. We are planning on using the upcoming HEE quality day and other forums to engage partners in the co-design of these support systems.

3.3 Streamlining quality in pharmacy educational programmes;

It was observed that there were several trusts where there are separate LFGs for different trainee groups. There may be for several reasons for this however to encourage streamlining quality, we recommend that EPDs attend each group, the advantages of this include:

- To share and encourage joint learning across programmes. This will generate a learning community between PRP/PTPT and also reduce duplication e.g. Medicines Management – medicines reconciliation training, device counselling etc.
- To identify and jointly action issues arising that cross different trainee programmes
- To share innovative practice e.g. OSCE exposure to both PRP / PTPT
- To prevent inequalities in programmes e.g. access to training applicable to both trainee groups.

3.4 Educational Infrastructure, sustainability and succession planning

It is recognised that there is a high turnover of staff within the NHS and that ensuring trusts have the correct staff with the correct skills to support educational activity and infrastructure is a challenge. We expect these issues to be identified, raised and actioned through the LFG.

HEE LaSE Pharmacy is currently reviewing the Educational and Practice Supervisors training, so that we can support trusts by offering a flexible programme that will fulfil the training requirements of staff. However, the courses are not the panacea for resolving all educational infrastructure issues. Alongside the training requirements of individuals, consideration to succession planning of supervisors must be considered.

In addition, if service requirements change, it is imperative that educational programmes should be reviewed to identify potential risks to their sustainability. An up to date educational strategy should incorporate the issues above, and we expect that all organisations have one

3.5 Managing rotations and Educational Plans

HEE LaSE Pharmacy expect when trainees are starting a rotation, that there is an educational plan for the rotation that includes:

- Service Delivery requirements for the rotation (for registered staff, e.g. Foundation Pharmacists)
- Expectations of roles and responsibilities of the trainee and PS
- Who the practice supervisor is: including contact details and protocol when issues arise
- Learning objectives
- Learning activities
- Learning / rotation mapped to relevant training frameworks / competencies

Rotational plans are only effective if they are enforced and supported in practice by PS and ES'. Regular meetings between the trainee and the practice supervisor are vital to ensure:

- Adherence to plan
- Monitoring of learning objectives
- Satisfactory completion of activities
- Review of general progression
- Identification of TRAS issues, when and if they arise.

Meeting regularity and use of review documentation is at the discretion of the practice supervisor and will depend on length and complexity of rotation. However, we would expect as a minimum there is a start and end of rotation review.

HEE LaSE Pharmacy expect that rotation plans, including for those rotations that are outsourced / provided by another organisations, are regularly updated based on feedback from trainees, PS and ES via LFG / other educational governance systems.

3.6 Opportunities to network and share best practice face to face and virtually.

The LFG reports highlighted the enormous value placed on EPD network meetings and other forums where education leads from across the region can come together to network, collaborate and share innovative practice. Moving forward we plan to continue to enhance the quality of these face to face network days, along with continuing to improve virtual networks and communities of practice across the region. This will be an ongoing piece of work the HEE LaSE pharmacy team will be doing across Autumn 2019 and we will work with colleagues across the system in the co-design of any future iterations of these forums.

3.7 TRAS process and learner support

Several LFG reports received outlined the continued support required from HEE in terms of trainees requiring additional support (TRAS), support for learners with learning difficulties and dyslexia and clearer guidance on expectations around study time and professionalism.

A detailed overview of the TRAS process and accompanying considerations can be found on the HEE LaSE Pharmacy website here;

<https://www.lasepharmacy.hee.nhs.uk/training-1/supervisor-training/trainees-requiring-additional-support/>

In addition, we will be undertaking work to further enhance the TRAS process and will be seeking your views on how best to do this at upcoming networks days and at the upcoming quality day.

Regarding study time and guidance around professionalism, we acknowledge the ask for greater clarity around these areas and will be working collaboratively with EPD's at upcoming network events to gain greater consensus across the region around best practice in both areas.

3.8 Quality Visits

A small number of comments received in this section of the LFG reports were regarding the quality visit process. Several reports commented on the value of these visits and how they have helped to develop and improve local education and training provision. HEE LaSE Pharmacy team is in the process of undertaking a range of baseline quality visits across London in Autumn 2019 and Spring 2020. Trusts will be contacted directly by the HEE London Quality team to agree these dates, and additional visits will be arranged over the following 12 months.

In addition, the HEE Quality team in Kent, Surrey and Sussex are in the process of working with medical, nursing, AHP and Pharmacy leads to improve the structure the quality visit process within organisations across KSS. We will be supporting pharmacy quality visits in KSS organisations over the next 12 months and will contact Chief Pharmacists accordingly to arrange.

4. Innovative Practice

In the next section you will find examples of innovative practice from across the region, however this is not an exhaustive list and we have heard of many other ideas and innovations happening across the regional generally. To capture and share the innovations being undertaken in specific trusts we asked them to submit further information to be shared more widely.

NB: 24 trusts were asked to submit and 10 responded

4.1 Good Practice Provided Across Multiple Organisations within the Region

- ✓ Joint working across NHS Organisations

There were examples of trusts working together to provide joint sessions of training for trainees, such as clinical sessions, OSCEs, specialist topics. This reduces educational burden across the system and reinforces communities of practice of the participating trainees. Buddying across organisations was highlighted as good practice along with trusts who collaborated with local / outsourced community pharmacy organisations.

- ✓ Careers fairs within Local Schools

Ensuring there is a future workforce for pharmacy is as important as training them. We were pleased to see so many teams reaching out to the budding pharmacy workforce in their local population, highlighting the careers possible within pharmacy and training routes.

- ✓ Preparing trainees for recruitment and career progression

Many trusts provide support to prepare their trainees for recruitment for their first registered post. However, many (but not all) provide support on career progression. There were some great examples of trusts encouraging the use of the APTUK and the RPS Foundation Pharmacy Framework with trainees, to highlight and embedded learning and development approach post registration.

- ✓ Use of technology to communicate across sites

Most multiple site trusts have utilised the use of technology to communicate across sites, to reduce travel burden and increase efficiency. We recognise that access to technology may be limited but we would encourage its use where possible.

- ✓ Encouraging trainees and educational team members to present work (e.g. Audits) at conferences

There are some trusts that actively encourage their trainees and members of staff to present work at conferences, we highly recommend this, because of the numerous developmental opportunities it gives to individuals. Across the region there were examples of PTPT, PRPs and members of the educational team presenting posters of their work at various conferences, including local trust events. For PTPTs these opportunities were available as they participated in quality improvement / audits.

- ✓ Work to develop the wider pharmacy workforce

Although the LFG reports focus on the training of commissioned trainees there were examples of work being undertaken to develop the wider workforce to become practice supervisors and contribute to education within the department.

- ✓ Widening Network and Educational Opportunities

The landscape of pharmacy workforce is changing with the evolution of pharmacist's roles in response to the Five Year Forward View¹, development of STPs² and more recently the NHS long term plan³. HEE LaSE Pharmacy is encouraged to see many trusts expanding their networks and the educational opportunities they can offer their trainees and staff, which aligns to national policy and direction of travel. Examples include expanding networks with local pharmaceutical committees, local non-acute NHS organisations and community pharmacy. Educational opportunities have been expanding across the region with trusts exposing trainees to new and emerging roles, such as those in integrated care setting and advanced clinical practitioners (ACPs).

- ✓ Working with local Schools of Pharmacy

Many trusts work with local Schools of Pharmacy to provide undergraduate placements and some have teacher practitioner roles within educational teams. Collaboration with Schools of Pharmacy offers developmental opportunities for staff and provides additional advertisement of pre-registration places within the trust.

¹ <https://www.england.nhs.uk/five-year-forward-view/>

² <https://www.england.nhs.uk/publication/delivering-the-forward-view-nhs-planning-guidance-201617-202021/>

³ <https://www.england.nhs.uk/long-term-plan/>

⁴ <https://www.hee.nhs.uk/our-work/pharmacy/review-education-training>

⁵ <https://www.longtermplan.nhs.uk/publication/interim-nhs-people-plan/>

Pre-registration Trainee Pharmacist (PRP) GP Experience

To ensure trainees get a varied experience during their pre-reg training year we have been organising placements within the community sector and clinical commissioning groups for a number of years, which have been received well. With the increased number of split training posts within general practice, community and hospital as well as increased numbers of pharmacists working in general practice we wanted to broaden the training experience and incorporate as much exposure to the ever expanding roles of pharmacists.

The GP practices could only accommodate certain days due to their own capacity and the decision was made to allow all trainees a one day experience with the plan to expand the following year.

All trainees were asked to review and provide feedback on their experience. All 12 trainees found the experience beneficial and provided the following comments:

"The GP placement was very positive. It was really inspiring to shadow a pharmacist with their own clinic and patient list and to see this new type of work that pharmacists are becoming involved in and the difference that they can make in primary care. Very much enjoyed this placement"

"I think it's incredibly valuable to be exposed to all sides of Pharmacy"

"I thought the GP placement was extremely interesting and I learnt a lot about a side of pharmacy I had never experienced before. I think it may be of benefit if the placement could have been a bit longer"

"I really enjoyed shadowing a pharmacist in GP. I enjoyed the direct patient to pharmacist interaction"

The GP experience has allowed trainees to understand and appreciate the importance of communicating information effectively between different sectors as well as the positive impact that pharmacists bring to a shared decision making process with the patient at the heart of a consultation.

As a large teaching trust we are always looking at ways of improving the Pre-registration programmes for both learner groups by horizon scanning and keeping up to date with national drivers. This has helped to develop a workforce that is prepared for the future. We have been fortunate to have existing links and networks within General Practice and would advocate that for those who are interested in incorporating a GP element in the future to get in contact with your local CCG who will be able to put you in touch with a GP pharmacist.

For more information then please contact:

Fateha Al-Emran, Lead Pharmacist- Education, Training & development

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Key Innovations - Flipped Learning

The concept of flipped learning is embedded within the Joint BSUH ESHT and SASH Preregistration Pharmacist Training Programme. This is a local programme underpinned through an Educational Agreement between Trusts. Facilitators engage with flipped learning with support sessions and resources on the use of this methodology provided by BSUH. PRPs attend a session explaining the concepts of flipped learning and its integration within the study day programme. PRP evaluation has highlighted an appreciation of benefits of flipped learning methodology, with didactic teaching less positively evaluated. Flipped learning is now incorporated into the BSUH PTPT monthly training sessions

2018-19 BSUH, ESHT and SASH PRPs attending a Joint Training event using Flipped Learning Methodology



This is an excellent example of collaboration between local Trusts. Other examples include a Joint Recruitment Event for Undergraduate Work Experience Placements and the shared organisation and delivery of the HEE LaSE Autumn Formative OSCE, all of which have been shared at local and national conferences.

Other examples of innovation are Joint BSUH ES training with medics and pharmacists with future plans to include AHP ES, the development of a quality educational infrastructure for band 6-7 Pharmacist and Band 4-5 Technicians progression posts, and the establishment of Peer Review of Teaching which provides an opportunity to develop and enhance teaching skills by exchanging ideas with others.

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Jenny Stevens Principal Pharmacy Technician Pharmacy Support Staff Education and Development Lead Chair of PTPT LFG Jenny.Stevens11@nhs.net

HEE LaSE Pharmacy – Innovative Practice:
Educational and Practice Supervisor Support Groups

Information on good practice:

The facilitation of Local Faculty Group (LFG) meetings enabled us to identify that more support was required for Practice Supervisors (PS's) and Educational Supervisors (ES's) to carry out their role in training successfully. Over the past few years there has been much change in the way training programmes are delivered and it was important for us to ensure that existing and new staff, involved in training, were equipped with the right resources and knowledge to do this successfully. Being a large trust spread across different boroughs, clinical teams were often working in isolation, and the feedback from trainees suggested that there were some inconsistencies in the structure of rotations and the level of support provided by different PS/ES's. One of the ways to help improve this was to set up a face-to-face meeting to create a networking opportunity for PS/ES's across sites to share good practice, with the aim of standardising the quality of training provided across rotations, and to enhance communication between them. This meeting would also serve purpose to provide information about the training programmes, outline of roles and responsibilities, highlight key updates and upcoming changes, and to give an opportunity to raise any concerns about the programme or trainees, which would also help towards identifying Trainees Requiring Additional Support (TRAS) at an earlier stage.

How innovation was generated:

The meeting was predominantly initiated for PS/ES's involved in Foundation Pharmacist (FP) training as not everyone was familiar with the diploma programme endorsed by the Trust and as mentioned above training expectations differ amongst rotations. To ensure feedback from trainees was not overlooked, they were involved in developing the agenda for the support group meeting to ensure key areas of improvement were discussed and areas of notable practice were highlighted and shared across supervisors. As the initial meeting was a success we decided to continue these meetings approximately every 3-4 months in line with the LFG meetings, so that key outcomes of the support group could be fed back. Since then we have created a similar meeting for our PS/ES's involved in training Pre-Registration Pharmacists (PRP) and Pre-registration Trainee Pharmacy Technicians (PTPTs). In the near future we also wish to use this meeting to feedback key issues discussed at the quarterly HEE EPD network days so that PS/ES's can be kept in the loop.

Positive impact on trainees/pharmacy team/pharmacy workforce:

The development of these support group meetings has positively impacted trainees by making them feel more supported, rotations have become more structured and they have clearer guidance of what is expected of each rotation with defined objectives and learning outcomes. PS/ES's feel more confident in delivering training and are reassured knowing there is additional support available. For the pharmacy team this is a step towards standardising quality of training provided across sites and rotations which will benefit the developing pharmacy workforce.

Positive impact on patient care:

Providing further support to supervisors who are crucial for the training and development of trainees will enable PRPs, PTPTs and FP's to feel more supported in their roles which will aid towards the development of their confidence and competence when carrying out patient facing activities.

Written by Reema Patel,
Education and Training Lead Pharmacist, Advanced Specialist in Mental Health
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Buddy system for PTPTs

Information about the good practice

Two years ago we introduced a Pre-registration Pharmacy Technician buddy system. The system was largely developed in response to feedback received from trainees as part of the LFG process. Our PTPTs spoke openly about their experience during the first few weeks of joining the pharmacy department and expressed a need for additional support from an assigned and experienced member of staff. As a result, we implemented a buddy system for new technician trainees. Trainees are assigned a buddy for the first two weeks of joining the department. The buddy identified is the most appropriate member of staff and is assigned by the Dispensary Operational Manager to aide their development.

The positive impact on the trainees / pharmacy team /pharmacy workforce

Trainees feel welcome and supported. They are able to develop confidence working as part of the pharmacy team and this also opens the lines of communication with new colleagues and other health care professionals. The buddy system ensures that trainees are inducted effectively as part of the training process. Trainees feel confident to approach their buddy with queries on a daily basis and this facilitates the learning process for new trainees

The positive impact on patient care

Having appropriately trained staff improves patient care, reducing the number of errors and ensuring our workforce is equipped with skills required to meet the needs of our patients.

How you got involved / how the innovation was generated? – and how others could do so in their local trusts?

We became involved due to trainee feedback. The E&T team researched effective buddy systems and discussions, regarding resources and implementation, took place at LFG and PS meetings. The system was introduced and evaluated by the E&T time at subsequent PS and trainee meetings.

Specialist Week for PRPS and PTPTs

Information about the good practice

PRPs and PTPTs are able to identify areas of personal interest and observe practitioners in these areas. Areas that have been observed include A&E, Ambulance Services, Sexual Health Services, Pharmacist led clinics and theatres.

The positive impact on the trainees / pharmacy team /pharmacy workforce

These observations have a positive impact on trainees, as they gain a greater understanding of different areas of the NHS, they build relationships with the wider MDT and the roles and responsibilities of others. This is also a great opportunity to inspire our trainees and for CPD and reflection from their learning.

The positive impact on patient care

The trainees gain an appreciation of the patient's journey through the hospital beyond pharmacy ensuring MDT involvement maximises patient care.

How you got involved / how the innovation was generated? – and how others could do so in their local trusts?

The innovation was generated via trainee feedback, rotational paperwork was created and trainees contact areas of interest directly or via specialist pharmacists. A timetable is produced that is then approved by their educational supervisor before training commences.

Contact Details

Dean Selway – Highly Specialist Pharmacist Education & Training

Karen Benjamin – Chief Pharmacy Technician Education & Training

Email – dean.selway@chelwest.nhs.uk & karen.benjamin@chelwest.nhs.uk

Tel - 0203 315 8491

Cross sector placements (Darent Valley Hospital)

Cross sector placements are both informative and enjoyable experiences. Trainees will have an improved appreciation of how different sectors operate and this is invaluable for the future. Trainees are asked to confirm their placements with the practice supervisor via email two weeks prior to the placement start date.

Mental Health Placement

PRPs have a two week placement at the Littlebrook hospital in Dartford; at present PTPT's have a minimum of two days, we are looking to extend this as all PTPTs have found this placement both enjoyable and informative. Trainees are asked to familiarise themselves with the learning objectives for mental health before they attend this placement.

Placements cover the acute wards, both male and female, the elderly care ward including dementia patients. Trainees spend time in the Clozapine clinic, the drop-in clinic within the acute psychiatric ward. The placement may also cover the mother and baby unit. Trainees may observe ECT treatment; attend ward rounds and the Forensic unit.

Trainees are given a named practice supervisor who will complete the practice supervisor feedback form after the visit has taken place. Trainees are also asked to complete an evaluation form regarding the external placement asking for specific feedback on length of placement, were objectives met, how would they rate this placement experience, are there any improvements that could be made etc. which is useful when planning for the next cohort.

Learning Record for PTPTs and PRPs

The learning record for PTPT's and PRPs is a valuable tool that lists each area and rotation with objectives and target dates for completion of the tasks to be covered during their training. The record gives information on induction, college attendance (if appropriate) and allocated study time to be given. It also provides evidence that training has taken place, that the trainee has covered the required objectives and has been signed off as competent by the practice supervisor. Comments can be made by the PS in the learning record on objectives completed well, but also make comments on areas to work on and develop. These comments are picked up at the monthly meetings with the Educational Supervisor who can feed back to the EPD.

Information on learning from other health care professionals is also documented; current PTPT's have spent time in Theatres, Osteoporosis clinic, dialysis unit, mouth care, and dieticians. Where possible these sessions are linked to the college timetable of studies. Feedback is obtained on the value of each experience to ensure that the learning is beneficial.

PTPTs assist with PRP OSCE's

We ask the PTPTs to take the part of actors for the PRP OSCE's which gives them valuable insight into the OSCE process and preparation for their own OSCE with the MOPs course



Making Your Medication Work For You



- **Information about the good practice**

ELFT run a recovery college, this is a co-produced selection of short sessions aimed at understanding topics around mental health and its recovery. Although aimed for service users, it is open to everyone in the community. The Recovery College is open for three 10 week terms a year (Autumn, Spring and Summer) and delivers at least 20 courses per term. The educational workshops and courses are co-designed and co-delivered by trained tutors who have lived experience of mental health challenges and trained tutors who work in mental health and wellbeing services (co-production).

- **The positive impact on the trainees / pharmacy team /pharmacy workforce**

Pre-registration pharmacists and technicians are encouraged to attend the recovery college. A section of short sessions are co-produced by a pharmacist and a service user (trained tutor). It allows for the pharmacy workforce to interact with service users, to have a better understanding of the challenges they face and also improves their confidence and overcomes any notion of stigma in talking to service users. It enables the pharmacy workforce to have a better understanding of a service user's experience and journey within mental health services.

- **The positive impact on patient care**

Tower Hamlets Recovery College supports service users' mental health wellbeing and recovery through education and training. The co-production with pharmacy evolves around the common medications used in mental health, managing adverse effects and how pharmacy can help support a service user's recovery journey. The college helps people in their recovery as well as promote positive mental health education in the community.

- **How you got involved / how the innovation was generated? – and how others could do so in their local trusts?**

Some mental health trusts do run a recovery college as it is important to a service user. ELFT has a People Participation Lead in each locality who co-ordinates service users getting involved with initiatives within the trust, for example partaking in interview panels. The Pharmacy team got involved with college via our People Participation Lead and they provided a rota on a revolving basis. A service user and pharmacist meet prior to the session to develop their training plan.

- **Contact details of the lead within your department for information, and your preferred contact method.**

Simmy Daniel- Education and training lead – simmy.daniel1@nhs.net

Notable Practice for commissioned trainees at ESHT

EPDs: Audrey Haddon (audrey.haddon@nhs.net) & Tracy Hedley (tracy.hedley@nhs.net)

Submission of posters to the UKCPA

Pre-registration Pharmacists from ESHT attend monthly joint teaching sessions held collaboratively between ESHT, BSUH and SASH. These are delivered as flipped learning and cover a variety of clinical topics and mock assessments. This is an excellent learning opportunity and a chance for the PRPs to network. This initiative was chosen by the UKCPA to have a poster presenting the joint work and flipped learning at the conference. Joint study days mean that the 3 Trusts can pool together resources such as Specialist Pharmacists to provide high quality and varied training. The use of flipped learning maximises what is gained from each session as the trainees can utilise the time spent with the Specialist Pharmacist more efficiently with questions and cases as they will have already read up on the topic beforehand. This also makes sessions more interactive meaning that trainees will be more engaged and retain the information better. More competent practitioners are being produced which impacts positively on patient care.

Pre-registration Pharmacists at ESHT are encouraged to submit their audit abstracts to the UKCPA. In the 2018/19 cohort, 3 were chosen to present a poster at the UKCPA conference.

This was an excellent opportunity for the PRPs to showcase the Trust and their hard work and it also looks good on their CVs.

All audit recommendations must have a named person allocated to action them and they must be SMART to enable improvements to be made which positively impact patient care.

Historically, HEE LaSE used to ask PRPs to submit audit abstracts to showcase at an HEE event and they would present awards for these. This stopped in 2016/17 and at this point ESHT began to encourage PRPs to submit abstracts to the UKCPA. This helps them to gain some wider recognition for their work, it helps to share good practice and to network.

All Pre-reg Pharmacists and Pharmacy Technicians attend Making Every Contact Count (MECC) training.

The aim of the ESHT MECC approach is in line with the Kent Surrey and Sussex (KSS) MECC approach to support public facing workers to “make every contact count”. This is about starting healthy conversations either as brief advice or as a slightly more developed brief intervention and signpost. MECC is appropriate across the lifespan and involves:

- Stopping smoking – in all age groups, including pregnant women.
- Fuel, Poverty and Health awareness.
- Physical activity – Healthy Weight
- Alcohol awareness – Sensible drinking



Pre-registration trainees and apprentices at ESHT support the MM team so responsibility for referrals to services endorsed by MECC reducing the workload for the team and enabling them to work on more clinically focussed needs of patients.

they can take workload for the team

This has a positive impact on the trainees as they are able to take ownership of a task which can be time consuming but is incredibly rewarding and appreciated by patients if they are able to make a positive difference to their lives and improve health outcomes. In turn this can prevent hospital re-admissions which can reduce the workload for the trust but is also beneficial for the wellbeing of people living in East Sussex.

Having an understanding of MECC early in their career helps embed the importance of using consultations to support patients more holistically so when they continue their career, they don't think twice about the process and recognise the bigger picture in providing excellent patient care.

The Pharmacy E & T Team invited the MECC team into the department to share learning and extend knowledge to trainees.

The NVQ L2 and L3 trainees are required to evidence their knowledge of services available to patients to support the NHS healthy living objectives as laid out in the NHS plan so undertaking this training contributes to their off the job learning hours and ability to gain knowledge of other services.

Good practice identified: Preparation for PRP clinical rotations forms part of induction with practical pharmacist led practical workshops. Training programme for PTPTs with prior knowledge/experience/NVQ adjusted.

Information about the good practice

The Pre-registration trainees have done lots of work at university around medication history taking, pod checking and transcribing or seen this during their hospital placements but not many had actually done the task itself. As much as we wanted the trainees on the wards as soon as possible we recognised this can be overwhelming and so we created ‘test’ patients with ‘test’ pods so that we could get the trainees to check them as if they were on the ward for a real patient.

The positive impact on the trainees / pharmacy team /pharmacy workforce

Having the trainees in a safe environment to ask questions about pod checking and allowing them to create check lists they can use on the wards made the trainees feel much better prepared for their ward rotations.

The positive impact on patient care

As the trainees felt more confident on the ward this also instilled confidence with patients as they could get on with ward based tasks.

How you got involved / how the innovation was generated? – and how others could do so in their local trusts?

We had previously had lecture based sessions which didn’t seem to be helping trainees when they were up on the ward actually faced with real patients and real medicines in their hands. We created the workshops to encourage trainees to ask questions about what they should/can do.

Contact details of the lead within your department for information, and your preferred contact method.

Depinder Birdi, Depinder.birdi@nhs.net

Lewisham and Greenwich NHS Trust Departmental Staff Champions

The Pharmacy department at Lewisham and Greenwich NHS Trust (LGT) undertook a piece of work in early 2018 looking at improving the culture within the department as behaviours were being demonstrated by some staff that were not conducive to an effective working and learning environment. Unfortunately this feedback on behaviours was mainly being received at exit interview and as a team we felt we should have been more aware of and had the chance to address the issues raised far before someone was at the stage of leaving. From this work a behavioural charter was developed outlining how we should treat and respect others within the department as well as other actions which included creating pharmacy champions as a route for staff to discuss and raise issues informally.



The new chief executive for the Trust also commissioned an independent report into 'Bullying and Harassment' which was released in December 2018. In it there were a number of recommendations that included the need for more informal staff discussion arrangements about behaviour. By this time LGT's pharmacy department had already independently conducted its own review of staff behaviours and had started the process of introducing departmental staff champion volunteers. A behavioural values lead was appointed from within the department's senior management group to drive the development and implementation of the champions.

From the outset it was clear from staff feedback that these champions would need some form of structure behind them. To that end a terms of reference for the champions was produced which helped to formalise this approach. In addition, a champions job description has recently been produced which has helped to attract volunteers. The number of champions is currently at 8 staff. The job description assisted in providing clarity about what a champion can offer and where the boundaries lie between them and other routes of seeking assistance within the department and Trust. In terms of training each champion has a one to one discussion with the behavioural values lead who outlines the responsibilities and requirements of the role.

In broad terms, the roles of the champions are to:

- Act as confidential and independent 'sounding boards' for staff issues/concerns;
- 'Signpost' where to go to or how to raise an issue (i.e. HR policies etc.) if appropriate; and
- Act as a liaison for guidance or simply provide 'moral support' at a given time of need for pharmacy staff.

Since the implementation of the departmental champions, the opportunity for pharmacy staff to discuss or raise matters informally with colleagues across both departmental sites has grown. All departmental staff are familiar with the role and availability of the champions is discussed as part of all new staff inductions. The current mix of champions covers a broad range of pharmacists, technicians and non-clinical staff. Staff are free to choose who they would like to speak to and these individuals are highlighted via our department "who's who" board.

In addition, monthly departmental reporting includes a measure on the number of champion meetings held (not who or the detail) so that the department has an idea of the level of uptake, with a view that the encouragement of more informal meetings of this nature will lead to a reduction in inappropriate behaviour. In short, the very option of speaking to a champion may help to resolve more amicably and faster, matters or behavioural issues between staff or colleagues, because of these prior 'preparatory' conversations.

The aim is that by having champions in place, issues can be talked through and resolved more readily by empowering staff to be open about issues. In turn the hope is that we have a more motivated and in essence happy workforce which should have a positive effect on patient care.

Contacts within the department about the Pharmacy Champions:

Roy Ebanks – Pharmacy Transformation Programme Manager - roy.ebanks@nhs.net
Richard Pudney - Principal Pharmacist, Education and Training – richardpudney@nhs.net



Person Centred Care (PCC) Training at London North West University Healthcare NHS Trust

We acknowledge that good patient interaction or making a difference to patient is what constitutes a “good day at work”. Additionally, we acknowledge that a patient is also a person, and often it is the label of “Patient” that stops us seeing the person. At LNWUH we wanted to prepare/train all our patient facing staff to have meaningful conversations with patients, where the information needs of the patient are addressed in a very time deficient environment.

The training comprises of a small group interactive introductory session, where we explore what Person Centred Care is and how it can practically be applied in the following situations:

- During Medicines Reconciliation
- When discussing High risk medicines
- When discharging patients
- When giving out medicines at the Patient Services outpatient hatch.

At the end of the session all staff are encouraged to practice the techniques discussed and bring at least ONE example of this to discuss at a follow up session 3-4 weeks later.

Staff that have attended the sessions have found them eye opening and realise that by focusing the conversation on the patient’s needs first it is possible to have shorter conversations where the patient receives maximum benefit. Staff are also encouraged to share experiences of using PCC with the rest of the department via email. In many cases patient have been very grateful that they have been able to speak to some-one that has addressed or allayed their concerns rather than having to listen to an unfocused stream of information about medicines.

The plan is to have a rolling programme of training every month to capture all current staff including Pre-registration pharmacists, whilst also adding the training to the department induction checklist to ensure all new staff are trained in the LNWUH way of speaking to patients.

This method of engaging with patients has been developed by Professor Nina Barnett, consultant Pharmacist for Older People (nina.barnett@nhs.net) who has also published work to evaluate the effect of PCC on patients and their care.

Minal Shivaanand, Principal Pharmacist, Education and Training. minal.shivaanand@nhs.net

All clinical PAs undertake MOP (POD checking module only)

- **Information about the good practice**

- At MTW we have clinical pharmacy support staff who undertake ward duties including returns and checking patient own medication.
- The Medicines Optimisation Programme had the option for module 1 to be undertaken by clinical pharmacy support staff which, alongside MTW in-house training, would enhance the skills and knowledge of this staff group.
- We were able to implement this on both sites in our Trust.

- **The positive impact on the trainees / pharmacy team /pharmacy workforce**

- To provide a nationally recognised qualification to our support staff was an excellent opportunity.
- Provides them with the good quality information and knowledge about the background behind Medicines Optimisation, in particular, the benefits of using Patient Own Drugs (POD) and the importance in checking them correctly.
- Supports the ward Pharmacy teams with undertaking POD checking. This allows them to undertake other clinical duties which improves patient care and supports the pharmacy team.
- Reducing unnecessary dispensing within the dispensary setting therefore releasing time and producing cost reductions.

- **The positive impact on patient care**

- Improved patient care by using PODS which have been checked by a member of staff who understands the POD process clearly and will check the medicines for suitability to use at a high standard.
- Reduced incidence of missed doses and dispensing waiting times due to re-use of PODs.

- **How you got involved / how the innovation was generated? – and how others could do so in their local trusts?**

- Our Clinical Lead Technicians both had the opportunity to employ clinical pharmacy support staff at each site. Both had an insight in to the MOP course and checked that module 1 of the course was suitable and accessible for clinical pharmacy support staff.
- The course is a funded course but needed ES support. This was planned within the teams and all clinical pharmacy support staff currently in post have achieved the qualification with another person waiting to undertake module 1.

Clare Williams, Chief Pharmacy Technician, Maidstone and Tunbridge Wells NHS Trust

Improvement Huddles

- 1.1 Quality Improvement Huddles were launched in pharmacy as a tool to encourage participation from the entire pharmacy workforce in developing new ways of working using quality improvement methodology. This huddle not only promotes leadership capability across all members of the pharmacy team, but adopts a bottom up approach to developing the pharmacy service; it allows all staff, including trainees, to have a voice in a structured, supportive and encouraging environment.



All pharmacy staff are able to raise an improvement idea through a “ticket” that is placed on the Quality Improvement Board, visible to all staff within the department. The pharmacy team will meet by the board twice a week for 15 minutes, and as a team will collectively review each idea, identifying the impact of the idea on patient care and to the pharmacy team and then review how easy it is to achieve.

The team will review which ideas to move forward with and assign a project lead. This may be one member of the team or a number of people working on the project, allowing collaborative leadership. Each improvement project will have SMART aims and objectives, allowing achievable and timely outcomes that can be reported at each huddle.

The huddle is run by a member of the team, using agreed process guidance, another member will time the huddle and another will record progress of improvements with agreed actions and time frames. Once 15 minutes is complete, the meeting will come to an end.

It is vital that every huddle closes with a celebration, providing positive reinforcement, acknowledgement and motivation to the team.

- 1.2. The Improvement Huddle has provided a positive impact on the pharmacy culture, as it not only provides pharmacy staff with a voice, but allows everyone to take ownership in developing the pharmacy service. Staff feel empowered and are engaged in making these improvements to better improve their working practices, but also to collaborate with the multidisciplinary team and provide the best of care for our patients.
- 1.3. Staff are able to make a positive contribution to patient care through improved pharmacy processes, better use of technology and through innovation.
- 1.4. Medway Hospital transformation team first suggested this improvement huddle as a forum to implement quality improvement. With the support from the transformation team in setting up the boards and providing guidance on the process, the pharmacy team were the first department in the Trust to successfully implement these huddles.



Contact details for lead: Lead Pharmacist Education & Quality Development: Nichola Baker (Nichola.Baker@nhs.net) & Principal Pharmacy Technician Education & Training: Suzi Hawthorn (Susanhawthorn@nhs.net)

Trainee in Action Group (TiA)

- 1.1 The Trainee in Action (TiA) group is a forum dedicated to trainees and led by the trainees. This group was implemented in 2017 following concerns raised by the trainees and has been embedded to provide a safe and confidential environment to raise concerns. Through peer discussion, the group will review ways to deal with these concerns collectively, or escalate the concerns collectively, reducing the pressure on individual trainees and allowing concerns to be addressed or escalated in a timely fashion.

This group provides the trainees with structured and dedicated time to meet and review their training programmes respectively and forms part of the educational governance infrastructure ensuring high quality training provision.

The group meets three times a year and is scheduled 4 weeks prior to the pharmacy Local Faculty Group meeting. The meeting is fully endorsed and supported by medical education and includes a rolling agenda, minutes and an action log. A Key Issues Report is submitted to the Pharmacy Local Faculty Group as a process of providing assurance and a process for escalation.

An education lead will sit on the group, to ensure there is senior representation and allows trainees to be able to ask questions or to seek clarification on matters arising around training provision. Trainees are proactive in chairing this meeting and collectively identifying ways to resolve any concerns through identifying actions to take; but trainees also have a clear mechanism for escalating these actions, if these fall outside the trainee's control or influence.

- 1.2 This innovative practice has significantly improved the learning environment for pharmacy trainees as they have a dedicated forum to have a collective voice to raise concerns and they have a formal structure to report into. This ensures that no problem will be left unresolved, as education leads and senior management are held to account.

This forum does not remove mechanisms that are already in place for individual trainees to report concerns or provide positive feedback in between meetings, but this process allows for a holistic review of training programmes and allows for an environment that encourages trainees to take ownership and share learning experiences to resolve some of the issues, before these issues escalate out of control. The richness comes from different trainee groups sharing their experiences and offering support across the different programmes.

- 1.3 Medway pharmacy is an advocate for growing their own pharmacy workforce that is able to meet the needs of the pharmacy service and the changing needs of the patients. By providing trainees with high quality training provision through feedback and development and by providing assurance through this educational governance, pharmacy are providing trainees with the skills, knowledge, ability and behaviour to provide high quality patient care.

- 1.4 The Trainee in Action Group was developed using the medical model within Medway Hospital and was supported through medical education. The group was set up with guidance from the Director of Medical Education, who first sat on the group to ensure the aim of the group was clear, but is now fully run by the trainees and agenda and minutes are supported by medical education facilitators.

Contact details for lead: Lead Pharmacist Education & Quality Development: Nichola Baker (Nichola.Baker@nhs.net) & Principal Pharmacy Technician Education & Training: Suzi Hawthorn (Susanhawthorn@nhs.net)

Multiprofessional Preceptorship training at the North Middlesex Hospital

Following the introduction of the nurse preceptorship training at the North Middlesex University Hospital and a Health Education England review in which multidisciplinary learning was highlighted as an area needing improvement, the Trust Education and Training Team decided to implement a Multiprofessional Preceptorship programme.

Preceptorship training is a commonly used term amongst nursing, midwifery and allied healthcare professions to describe the first year of qualification, in which support is provided to help bridge the gap between student and professional. Initially there were questions about how this could be developed for a multiprofessional group including pharmacists given the pre-registration training year already dealt with the bridging from student to professional. However there are some aspects of professional life that aren't covered by the existing requirements for pre-registration pharmacist year, and it was felt that this is the same for other professions.

To develop the course structure, focus groups with educational leads across the Trust were arranged, using the Trust aim of 'providing outstanding care for local people' as the starting block.

The resulting Multiprofessional Preceptorship programme was created around the following key themes:

- Professionalism – involving documentation, accountability, communication and teamwork
- Patient safety and experience – involving quality improvement, duty of candour, whistle blowing, risk management and dealing with complaints
- Developing skills in working with people with mental health problems
- Professional development – involving assertiveness, emotional resilience, leadership and career development

The participants, a mixture of Occupational Health Therapists, Physiotherapists, Nurses, Radiographers, Midwives and Pharmacists, were given a preceptorship pack to work through over the year and were assigned a mentor to meet up with for quarterly progress reviews.

They also attended 'Action Learning set' study days which explored the various topics, with presenters and interactive workshops enabling the participants to share experiences and knowledge and gain support as they developed in their roles.

Overall the programme has been a great success given it allows new members of the team to gain an insight to areas that aren't covered by the preregistration year, nor the diploma, and gives time for the participants to reflect on events or incidents in a safe environment. One of the most common remarks from the participating pharmacists has been that the study days allowed them to interact with other professions to a greater depth than they had previously, and it has increased awareness of the different roles within the hospital. This enables improved multidisciplinary working and therefore better care for patients. To date, it has also appeared to have helped with retention of our foundation pharmacists.

We have had the benefit of a Preceptorship Lead in the Trust

Education Department who manages the programme overall and whom I liaise with closely. We will continue to review the programme, considering benefits of the programme for new pharmacists in line with the workforce and education strategy as these are further developed, and are likely to keep supporting this method of multidisciplinary learning amongst others.

For further information – see the Capital Nurse Preceptorship Framework. September 2017

<https://www.hee.nhs.uk/sites/default/files/documents/CapitalNurse%20Preceptorship%20Framework.pdf>

Laura Morgan, Lead Pharmacist for Education and Training, North Middlesex University Hospital

The ROYAL MARSDEN

NHS Foundation Trust

Opportunity

In 2018 the Trust launched its Five-Year Strategic Plan outlining an ambitious Workforce Strategy in line with the National Cancer Workforce Agenda. Education and training (E&T) was crucial for achieving this strategy and the Apprenticeship Levy presented an excellent opportunity to invest in new and existing staff across clinical and non-clinical teams.

Need

The need to embed apprenticeship pathways to support education and development is well recognised and has become a key component to the delivery of excellence in education.

Strategy

In line with the Trust's Workforce Strategy the Pharmacy E&T team created a comprehensive learning and development programme which coordinates all the training needs for all pharmacy staff. This programme incorporates a number of opportunities, including weekly educational sessions, professional development courses and apprenticeships.

Procurement

Following competitive procurement processes, the Trust selected a number of apprenticeship training providers, specialising in developing NHS staff.

Design

The E&T team work with the providers to design and deliver tailored apprenticeship programmes that focus on two key areas:

1. Supporting current staff to gain new skills whilst building on existing skills and knowledge
2. Recruiting people from local communities

Kulpna Daya, Deputy Governance Lead & Education & Development Technician



"What's been great about working with apprenticeship training providers is that whilst our prime concern is always patient care, they have been able to think out of the box and provide expertise from an external point of view, so we can come up with the best possible training solutions for our staff."

Success

Since the introduction of the apprenticeship levy we have been able to create development opportunities for a number of our existing support staff by enrolling them onto the pharmacy services level 2 apprenticeships.

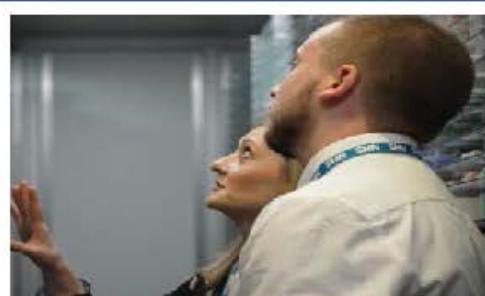
Additionally, we are using apprenticeships as a route to employment. Our training providers' specialist recruitment services shortlist high-calibre candidates who are then being interviewed by respective line managers. Last year we recruited five new apprentices in pharmacy support, business and administration and quality improvement roles.

The apprentices have already made an impact within the workplace and are keen to progress within their role. They have become confident and have demonstrated strength in ability to communicate with people and provide excellent patient care.

Daniel Lake, Pharmacy Assistant,
Business Administration Level 3 Apprentice

"The Apprenticeship has enabled me to get stuck into more projects, areas and tasks than somebody in my position normally would, meaning that my skills are more varied and I am a more valuable asset to the team."

"The trainer assessors have also been very helpful and are always there if I have a question."



Open culture in relation to errors and learning from errors evidenced by-near miss dispensary register which acts as a prompt for discussion at weekly meetings, star rating system to manage dispensary errors and reflections, risk rotation for PRPs/PTPT

Information about the good practice

At the RSCH dispensary, a monthly intervention audit is undertaken to record data about near misses that are occurring. This audit looks at information obtained through our Pharmacy Tracking System. This replaced the permanent near miss register due to the confidence of trainees and qualified staff being negatively impacted. The audit is carried out on different days of the week to help identify trends which are then discussed at senior leadership team meetings. These trends are also discussed with the dispensary team at their team meetings. If a staff member is regularly making near misses, they are asked to reflect on this trend.

Any errors that have been identified are documented through the DATIX system and highlighted to the staff involved. Each staff member then carries out a reflection on the error which is discussed as part of the Medicines Safety Group meeting. If a staff member has made two errors in the space of 6 months, this is discussed with the staff member and their line manager. In this discussion, the line manger should review what support is needed for that staff member. If a trainee is involved in any error, they must complete a reflection form and this is then reviewed by the educational programme director (EPD). The EPD identifies any potential causative factors and supports the trainee in avoiding these factors in the future.

The pre-registration pharmacists (PRP) and foundation pharmacist (FPs) have rotations through medicines safety. The 2018/2019 cohort for PRPs completed a two week rotation and the FPs completes a three month rotation with a clinical commitment. As part of this rotation, the trainees gain an understanding around the Medicines Safety Officer role as well as attend department and Trust governance meetings, investigate errors, reviews error trends and prepares a pharmacy medication safety newsletter. The trainee may also undertake an audit, deal with a temperature excursion enquiry or respond to national safety alerts. In the 2018-2020 cohort of pre-registration trainee pharmacy technicians, we will be trialling a 4 week rotation with similar objectives. This will be part of their second year.

The positive impact on the trainees / pharmacy team /pharmacy workforce

- Trainees understand how to write adverse event reports on DATIX
- Trainees see importance and understand why we report all errors
- Trainees see consequences of errors
- Gain an understanding of the importance of governance and medicine safety
- Trainees are able to seek solutions to problems

The positive impact on patient care

- Newly qualified staff are better prepared for practice
- Understand the importance of reporting errors and risks
- Able to support incident investigation

How you got involved / how the innovation was generated? – and how others could do so in their local trusts?

- Feedback obtained from trainees, highlighted want to go through medicine safety rotation.
- Rotations for PRPs were enjoyed and support their development in becoming a registered pharmacist
- Good relationship with medicines safety team who were willing to trial the rotation and identified benefits from exposing trainees to governance and medicines safety

Contact details of the lead within your department for information, and your preferred contact method.

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