

#### About this newsletter

This newsletter provides information about the education pathway for pharmacists and pharmacy technicians employed as part of the NHS England Primary Care Network (PCN) Contract Directed Enhanced Service (DES) Additional Roles Reimbursement Scheme. The *Primary care pharmacy education pathway* (PCPEP) builds on the previous CPPE extended education pathways and aligns with the NHS Long Term Plan and the PCN Contract DES.

Newsletter 1, which you can download from our **website**, has more background information about the pathway and information about how to enrol.

If you have any queries about the pathway that are not answered on our website, please email:  
**primarycare@cppe.ac.uk**

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#### Update on the pathway

##### **Cohort 11 enrolment process is open**

Enrolment opened in mid-May for the eleventh cohort of pharmacy professionals to start their pathway in September 2023. There are over 750 places for pharmacists and pharmacy technicians. Enrolment will close at the end of August or sooner if the cohort fills. When pharmacy professionals enrol on the pathway they need a current CV **and this form** completed by the employer ready to upload during the process

Please make sure that when you are recruiting into these PCN pharmacist and pharmacy technician positions you mention the pathway in the job advert and the commitment for the pathway is explained at interview. If you are not sure what this involves please attend one of your regular pathway information employer and stakeholder webinars (see later). Managing the pharmacy professionals' expectations at this early stage will give them the best possible start to their pathway, and ensure they engage and thrive throughout their learning. Job descriptions should be based on the roles and responsibilities set out in sections B1 and B2 of the PCN DES **Contract specification 2022/2023** so that the compulsory pathway is relevant to their role.

#### Feedback from pharmacy technicians on the pathway

We know that some pharmacy technicians find the pathway a challenge and they don't see its relevance to their role. We work hard to support them with extra support webinars, extra one-to-ones and additional pharmacy technician clinical mentor sessions. If you are receiving feedback from your pharmacy technicians that the pathway is not relevant please refer to the previous paragraph where we have advised that job descriptions need to reflect the roles and responsibilities as set out in the PCN DES.

As we explain in the pathway information webinars for employers and stakeholders, the pathway was written specifically for pharmacists and pharmacy technicians to learn together as they will be working closely together. If you would like more information or would like to request a meeting with us to discuss your concerns, please email [primarycare@cppe.ac.uk](mailto:primarycare@cppe.ac.uk)

To illustrate how well pharmacy technicians can do on the pathway we found these quotes on the Primary Care Pharmacy Association (PCPA) Telegram group in response to a request from one of its members about how pharmacy technicians found the pathway:

- *“I have had pharmacy technicians describe it as the best training they have had.”*
- *“I have techs doing this and have said from the beginning that you will be learning alongside pharmacists, don’t feel overwhelmed if something seems more detailed than you think you need to know. I’ve said that it helps you learn more widely around an area. Extra knowledge also helps develops confidence in recognising clinical issues for reviewing/referring that they may not have before.”*
- *“I’ve got a tech who has really enjoyed the course, has come on in leaps and bounds since she started it.”*

**If you have a pharmacy technician on the pathway please make sure that they are accessing the online pharmacy technician induction and support sessions run throughout the pathway.**

### **Exemption process reflection**

If you have pharmacists who you think should be applying for exemption from the pathway, please read this **blog** by Clair Huckerby who talks about her role in her GP ‘Superpartnership’. Clair was a pharmacist who went through CPPE’s exemption process where her previous experience was recognised.

### **Clinical Supervisor Corner**

The clinical supervisor training sessions are having a facelift. After feedback at the recent CPPE stakeholder reference group meeting we are including more information from the clinical supervisor handbook and including specific actions on ‘Where do I start with my learner?’ New materials will be used in training sessions from September onwards.

### **Clinical supervisor training dates**

The two 1.5-hour online workshops help clinical supervisors understand the pathway, following on from the national pathway information (or employer) webinars. In the training, we explore their role in supervision and the competency and capability of pharmacists and pharmacy technicians. This will help manage expectations of what the pharmacy professional can and can’t do. The second session is an assessor standardisation using a bespoke consultation observation tool.

All details, including booking links and keycodes can be found on the *Clinical supervisor* pages on the CPPE website: [www.cppe.ac.uk/career/pcpep/clinical-supervisor](http://www.cppe.ac.uk/career/pcpep/clinical-supervisor).

Here are the upcoming dates.

Clinical supervisor online workshop 2	Tuesday 24 May 7:00pm-8.30pm
Clinical supervisor online workshop 1	Thursday 16 June 12.30pm–2:00pm
Clinical supervisor online workshop 2	Thursday 30 June, 7:00pm–8.30pm
Clinical supervisor online workshop 2	Wednesday 6 July 12.30pm–2:00pm

### Pathway information webinar for employers

This is a bi-monthly webinar for employers, clinical supervisors and interested parties outlining the PCPEP pathway. For clinical supervisors, this is in addition to the clinical supervisor training. Although there is a little repetition, we advise all employers, clinical supervisors and interested parties to attend one of these or listen to a recording to get the basic information about the pathway.

They all run from 1:00pm–2:00pm. To register for an upcoming date, click on the link in the table below.

Date	Registration link
Thursday 16 <sup>th</sup> June	Register in advance for this meeting: <a href="https://cppe.zoom.us/webinar/register/WN_xfq8tvJuTtq5DDKutvgOgw">https://cppe.zoom.us/webinar/register/WN_xfq8tvJuTtq5DDKutvgOgw</a>
Wednesday 7 <sup>th</sup> September	Register in advance for this meeting: <a href="https://cppe.zoom.us/webinar/register/WN_ashCkV94SCKAfixdMymZZg">https://cppe.zoom.us/webinar/register/WN_ashCkV94SCKAfixdMymZZg</a>

If you are unable to make this date, then a recording of a previous webinar is available. Please email: [emma.wright@cppe.ac.uk](mailto:emma.wright@cppe.ac.uk)

### More time needed for structured medication reviews

In a **recent article** the national clinical director for prescribing in England has recommended structured medication reviews (SMR) in more patients. Tony Avery said SMRs are an 'ideal tool' to help people with problematic polypharmacy, but stated that more than ten minutes was needed.

### Pharmacist Defence Association warning document

CPPE, HEE and NHSE/I developed a policy at the start of the PCPEP to explain the rationale for not undertaking independent prescribing too early in the pharmacists' training. This was intended to keep patients and the pharmacists safe. It is concerning that the Pharmacist Defence Association (PDA) has recently issued a guidance letter following recent developments involving cases of pharmacists being referred to the GPhC as a result of incidents involving questionable prescribing and non-prescribing practice and patient risk or harm. While these pharmacists may not have been funded by the PCN additional role reimbursement scheme, it is worth reading the **PDA document**. It will also be helpful for pharmacists who are working remotely. The closing comment in the document is:

*The PDA would also specifically advise any pharmacists working in remote settings to give serious consideration to whether there are appropriate policies and processes in place and whether they would be able to justify their prescribing practice should their place of employment be subject to GPhC or CQC inspection, or should they personally be the subject of a referral to a regulator. If there is resistance to adhering to professional standards or implementing improved safety measures, it would be advisable to reflect on whether continuing to work in such an environment may result in risk of patient harm and regulatory sanctions against individuals involved.*

**Some of the key points in the document are**

- *Pharmacists must take responsibility for their learning – experience in one sector cannot be assumed to confer competence in another. Continuing Professional Development should also evidence ongoing learning in relevant areas.*
- *Paper qualifications and completion of training workshops alone are not sufficient to confirm competence.*
- *It cannot be assumed that qualifications/modules aimed at community pharmacy practice will provide the depth of knowledge required for general practice pharmacy.*
- *Supervised prescribing practice and review discussions with a senior clinician to gain experience in agreed areas of prescribing (extending beyond the IP training period), together with access to a peer group are essential to maintain good practice. Poor practice across a sector will not be accepted as justification for poor practice by an individual registrant. For example, questionable prescribing practice in online settings such as a failure to communicate with a patient's GP or other relevant clinician providing care cannot be justified by stating that the patient declined to allow the GP to be contacted; or that this practice is common amongst other online providers.*

**Independent prescribing places from September**

HEE has been going through a procurement process for new providers for independent prescribing. The next batch of places will be available from September and the list will be available around the end of July. Pharmacists who have recently finished the pathway and missed the last patch of IP places or those due to finish soon will be able to apply in early August. CPPE needs to authorise the places and we are currently updating our processes. We will be telling pharmacists how they get this authorisation from us as soon as we have the list of providers.

In late June, we will also be reopening the early IP request process for those pharmacists who meet the criteria and wish to do IP after nine months on the pathway, with a break in the pathway. This pause is only available to those who are taking up an HEE funded place and meet the criteria. The criteria (agreed with HEE and HHSE/I) are listed below.

All pharmacists who request early IP must:

- be working in a clinical patient-facing role, seeing patients in clinic and/or conducting clinical medication reviews in a care home or domiciliary visits for 50 percent or more of their time
- have support from their employer to do IP early and a DMP to support their IP course
- demonstrate one or more of the following previous experience criteria:
  - experience of working in a patient-facing role in primary care (GP practice, care homes, domiciliary visits or similar) for a minimum of one year (0.5 FTE post or above) before starting the pathway
  - diploma or postgraduate certificate in clinical pharmacy
  - other experience that would provide a solid foundation for IP training
- have successfully completed the minimum pathway learning and assessments requirements:
  - Module 1 assessments completed
  - Module 2 assessments completed
  - all Module 2 study days booked.
- All the Module 2 study days that have taken place by the end of month six have been attended.

### **Employer responsibilities going back face-to-face**

Before the pandemic started all the workshops were face-to-face, but CPPE have been running as much as we have been able to online with the full agreement from HEE and NHS England that we would return to doing the events that don't work well or can't be run online as face-to-face when it was safe to do so. We have clearly explained this in the learner and employer information webinars we regularly run.

We are very pleased to have started doing this over the last couple of months, as so much of the networking that is beneficial to the PCNs, practices and individual learners has been lost during the pandemic.

It is the responsibility of employers to support the learners in these training posts to be able to attend the training. This support includes giving them the study time and, paying any travelling expenses and other incidental expenses required (eg, an extra night's hotel stay) if your learners have to travel a long way for an event. Otherwise, most learners would struggle to attend. This is, in part, what the additional role reimbursement scheme funding is for. The proof of employment form, which would have been signed and submitted to CPPE upon enrolment, provides more information.

We do run workshops in most parts of the country, but if learners are slow to book when we advertise the events they may miss out on a local place. Our education supervisors work hard to make sure all the learners have the information they need but the learner does need to make the booking.

If employers have any concerns about this, please get in touch.

### **How to contact us**

If you have any queries about the pathway, you can contact **primarycare@cppe.ac.uk**

Please also visit our website to find the **Frequently asked questions** documents for learners and employers, as well as the dedicated clinical supervisor pages and the pathway handbooks.