

# Declaration of Competence for pharmacy services

## Vaccination Services

with the use of patient group directions (PGDs) and national protocols

**This Declaration of Competence (DoC) applies to the Community Pharmacy Seasonal Influenza Vaccination Advanced Service and other vaccination services commissioned at a local level, where specified within the service requirements.**

### The Declaration of Competence system

A separate document entitled *A guide to using the Declaration of Competence (DoC) system* is published on the CPPE website. It contains more information about the DoC system, how to use it and how to complete the DoC statement. If you are new to DoC or would like a reminder of this information, visit the [CPPE website](#).

### Practical training

To administer vaccines, you must have undertaken practical training that meets the requirements of the National Minimum Standards and Core Curriculum for Immunisation Training for Registered Healthcare Practitioners. This includes practical training in vaccination, basic life support and administration of adrenaline for anaphylaxis. **This is mandatory training.**

It is likely that your commissioner will have determined how frequently you will need to attend practical training; this may be annually. Please refer to the PGD, service specification or national protocol (as appropriate) for this information.

### Supervised clinical practice

The National Minimum Standards and Core Curriculum for Immunisation Training for Registered Healthcare Practitioners note that in addition to acquiring knowledge through a theoretical taught course, practitioners need to develop clinical skills in immunisation and apply their knowledge in practice. A period of supervised practice with a registered healthcare practitioner who is experienced, up to date and competent in immunisation, is therefore strongly recommended to allow acquisition and observation of clinical skills and application of knowledge to practice when a practitioner is new to immunisation.

If you are a new vaccinator we recommend the following steps:

1. Complete the face to face training
2. Complete the DoC
3. Undertake a period of supervised practice with a registered healthcare practitioner who is experienced, up to date and competent in immunisation and should any additional training need be identified during the supervised practice, undertake the further training and then review your DoC.

If you have vaccinated patients in the past and consider yourself to be an experienced vaccinator, supervised practice would only be required if you felt it would benefit your professional practice, e.g. if a long duration has passed since you last vaccinated patients.

### Annual update training

When providing vaccination services, you have a professional responsibility to complete annual update training. This annual refresher training to update your knowledge can be self-directed learning and need not be face-to-face training.

### Reassessment of competence

Pharmacists are responsible for reassessing their competence on an ongoing basis by responding to new guidance, standards and any relevant new learning programmes and assessment.

In addition, if use of the DoC is specified within service requirements, you should complete the DoC system at least once every **two years**. This should involve revisiting the self-assessment of competencies, reflecting on each competency and identifying personal learning needs to assure self-declaration again at this point.

Where changes are introduced to vaccination services, pharmacists will need to update themselves as part of their usual CPD.

If you have completed the DoC and wish to provide an additional vaccination service at a later date, you have a professional responsibility to revisit the DoC and complete it in relation to the new vaccination service.

### Revalidation

Working through this DoC framework encourages self-reflection on practice and peer review and provides a structured approach to supporting pharmacy professionals with CPD and revalidation requirements. For more information about revalidation and to record your entries, visit [www.mygphc.org](http://www.mygphc.org)

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## Section A – Declaration of Competence framework

This document allows you to self-declare the knowledge element of the relevant vaccination service that you intend to provide.

You **must** also have completed the practical training (as detailed on page 1) before declaring your competence to provide vaccination services by signing the DoC statement.

### Core competencies for Vaccination Services

1. Do you meet or are you **actively**<sup>1</sup> working towards the Consultation Skills for Pharmacy Practice: Practice Standards for England, as determined by Health Education England?

*Yes, because I have:*

2. Do you meet the competencies expected of all healthcare professionals with regard to safeguarding children and vulnerable adults?

*Yes, because I have:*

<sup>1</sup> If you confirm that you are 'actively working towards' the standards, you are declaring that you are undertaking the relevant learning and CPD to meet the standards. It is expected that you will have accessed the standards and associated learning to meet this requirement and that you will complete the assessment within 12 months of signing the Declaration of Competence statement.

As a pharmacy professional you should continuously seek to develop your consultation skills throughout your career and, therefore, this topic should regularly feature in your CPD plan. To access the assessment, go to the [CPPE website](#). If you have not yet completed the assessment, you should be able to provide evidence of the consultation skills learning you have undertaken.

### Service-specific competencies: Are you/Do you?

Statements should be supported by appropriate evidence whenever possible. If the learning you have completed applies to more than one competency you do not need to repeat this information.

Before you complete the DoC, determine which vaccination service(s) you plan to provide and complete the relevant evidence for each one. You must work through and reflect on the competencies within this DoC framework for each different vaccination service you plan to provide.

The rationale for asking you to consider each service individually is to ensure you are familiar with the requirements of the different patient group directions (PGDs) or national protocols for each service, you fully understand the pharmacotherapy for each individual vaccine and you are competent to administer the different vaccines.

You should indicate the specific services you are declaring your competence for by ticking the relevant boxes below.

If you wish to provide an additional vaccination service at a later date, you have a professional responsibility to revisit the DoC and complete it in relation to the new vaccination service.

You can use this table for your own self-assessment purposes; you only need to submit this part of the DoC if your commissioner asks for it.

#### SERVICE-SPECIFIC COMPETENCIES

**This section covers administration of vaccines by or under the supervision of a pharmacist in a community pharmacy setting.**

**If you wish to provide off-site vaccinations, i.e. vaccinations not in the pharmacy, you must meet all the service-specific competencies as well as the additional competencies for off-site vaccinations later in this DoC framework.**

**Please tick the box for the service(s) you plan to provide (add the names of the vaccines you will be administering, if this is not obvious from the name of the service).**

- NHS Seasonal Influenza Vaccination Advanced Service
- Locally commissioned influenza vaccination service
- Pneumococcal vaccination service
- .....
- .....
- .....

<p>a. Can you communicate the benefits of vaccination versus the risks of disease? <i>Yes, because I have undertaken the following:</i></p>
<p>b. Are you able to provide reassurance to the patient/parent*/carer* and correctly position the patient prior to vaccination? (* where applicable) <i>Yes, because I have undertaken the following:</i></p>
<p>c. Are you able to advise on the identification and management of potential adverse reactions? <i>Yes, because I have undertaken the following:</i></p>
<p>d. Are you able to establish if a person meets the criteria for vaccination as stated in the service specification, PGD or national protocol? <i>Yes, because I have undertaken the following:</i></p>
<p>e. Are you able to explain to patients who fall outside the criteria why this is and describe what other options are available to them? <i>Yes, because I have undertaken the following:</i></p>
<p>f. Can you describe the service to the patient (and where appropriate, also the carer or parent/guardian) to obtain informed consent and document this as stated in the service specification, PGD or national protocol? <i>Yes, because I have undertaken the following:</i></p>
<p>g. Can you demonstrate the correct technique for reconstituting a vaccine*, drawing up vaccine* or adrenaline from a vial or ampoule and the correct injection technique at the appropriate site of administration as stated in The Green Book, PGD or national protocol? (* where applicable in relation to the service being offered) <i>Yes, because I have undertaken the following:</i></p>

h. Are you able to complete relevant records and documentation including Yellow Card reports?  
*Yes, because I have undertaken the following:*

i. Can you recognise and manage/provide advice on management of minor adverse reactions to vaccines and vasovagal syncope associated with administration of a vaccine? Can you also recognise and act on the signs of anaphylaxis and provide basic life support?  
*Yes, because I have undertaken the following:*

j. Are you able to take appropriate action in the event of a needle stick injury or spillage of blood or vaccine?  
*Yes, because I have undertaken the following:*

k. Do you understand how to dispose of sharps, vials and other vaccine equipment safely?  
*Yes, because I have undertaken the following:*

l. Are you able to support, develop and (where appropriate) supervise the pharmacy team in the provision of a safe and effective service?  
*Yes, because I have undertaken the following:*

m. Are you able to demonstrate the knowledge of the clinical content of the PGD and/or national protocol?  
*Yes, because I have undertaken the following:*

n. Do you understand the pharmacotherapy for the vaccine used within the service and the appropriate clinical guidance for that vaccine (eg, The Green Book), including on co-administration of vaccines?  
*Yes, because I have undertaken the following:*

- o. Can you satisfy the NICE competency framework for health professionals using PGDs, including understanding the legal implications and professional responsibility of using a PGD, where applicable?

*Yes, because I have undertaken the following:*

## Practical training

It is likely that your commissioner will have determined how frequently you will need to attend face-to-face training for both injection technique and basic life support; this may be annually. Please refer to the service specification/PGD or national protocol (as appropriate) for this information and complete details of practical training below.

Training / learning / competencies / assessment (list below)	List competencies covered from DoC framework
Title(s) of practical training:  Practical training provider(s):  Date(s) practical training completed:	b, c, d, e, g, i, j, k, l, p, q

## Commissioner requirements

Consider the following commissioner requirements. You can then move on to the competencies for off-site vaccinations if you wish to provide the service in locations other than the community pharmacy as defined in the service specification.

Action	Competency	Date completed
Have a working knowledge of the most recent service documents relating to provision of the service, including: <ul style="list-style-type: none"> <li>the service specification</li> <li>administration and claims procedures, etc.</li> </ul>	d, f, m,	
Have a working knowledge of the current PGD or national protocol and agree to work under its provisions	d, e, f, m, o	
Where appropriate, review and/or develop relevant standard operating procedures (SOPs) and policies in your practice	l	



## Additional competencies – Off-site vaccinations

This section covers off-site administration of vaccines in locations other than the community pharmacy (e.g. patient's homes, care homes, schools, prisons, workplaces, etc.). If the service allows or requires this, complete this section of the DoC in addition to the service-specific competencies.

p. Can you apply the relevant legislation which applies to off-site vaccination, for example, the Health and Safety at Work etc Act 1974 and regulations when undertaking off-site administration of vaccines?

*Yes, because I have undertaken the following:*

q. Do you understand the importance of, and take responsibility for, maintaining the cold chain during vaccine transit?

*Yes, because I have undertaken the following:*

r. Do you understand the importance of, and take responsibility for, the safe disposal of clinical waste created during provision of the service and compliance with the relevant waste legislation?

*Yes, because I have undertaken the following:*

## Section B – Recommended learning and assessment

Table 1.1 contains details of the learning and assessment available to support you in meeting the core professional competencies within the self-assessment framework.

Table 1.2 contains details of CPPE learning programmes and assessments you can use to help develop your skills and knowledge to satisfy the service-specific competencies in the self-assessment framework.

Table 1.3 provides information on other associated learning.

Information relating to learning acquired from other training providers can be entered in Table 1.4.

### 1.1 Learning and assessment to support you to meet core competencies

Training/learning	Core competencies linked to the DoC framework
CPPE <u>Consultation skills for pharmacy practice: taking a patient-centred approach</u> distance learning	1
CPPE <u>Consultation skills: what good practice looks like</u> e-learning	1
<u>Consultation Skills for Pharmacy Practice</u> website	1
CPPE <u>Consultation skills for pharmacy practice</u> e-assessment	1
CPPE <u>Culturally competent communication in person-centred care</u> e-learning	1
elearning for healthcare <u>Safeguarding adults Level 1</u>	2
elearning for healthcare <u>Safeguarding adults Level 2</u>	2
elearning for healthcare <u>Safeguarding children Level 1</u>	2
elearning for healthcare <u>Safeguarding children Level 2</u>	2
Health Education England <u>Spotting the signs of child sexual exploitation</u>	2

### 1.2 CPPE programmes, workshops and assessments you could access if required

Training/learning	Service-specific competencies linked to the DoC framework
CPPE <i>Immunisation in pharmacies – developing your service (Part 1)</i> e-assessment	a, c, d, f, h, i
CPPE <i>Immunisation in pharmacies – extending your service (Part 2)</i> e-assessment (for administration of vaccines other than seasonal inactivated influenza vaccine)	c, d
CPPE <i>Influenza</i> e-learning programme	a, c, d, e, l

### 1.3 Other associated learning you may wish to access

Training/learning	Service-specific competencies linked to the DoC framework
NICE MPG2: <i>Patient group directions</i>	o
NICE competency framework for health professionals using patient group directions	o
Public Health England <i>Immunisation against infectious disease (Green Book)</i>	a, c, d, e, f, g, o, n, q
elearning for healthcare: Flu Immunisation 01 Core knowledge	a, d, e, n
elearning for healthcare: Flu immunisation 02 Inactivated Flu vaccines	c, h, n, q
elearning for healthcare: Patient Group Directions	m, o

### 1.4 Learning and assessment completed from other training providers

In addition to the mandatory practical training you have completed in Section A, you may have completed additional learning and assessment from other training providers, e.g. e-learning courses. You can complete training courses and workshops delivered by other trainers, provided that they deliver the equivalent knowledge and learning outcomes to meet the competencies in Section A (as with the CPPE programmes listed). You should list non-CPPE learning and assessments you have completed in the table below.

<b>Training/learning/competencies/ assessment (list below)</b>	<b>List competencies covered from DoC framework</b>

SPECIMEN

## Specimen Declaration of Competence statement to provide a vaccination service

Pharmacy professional:	John Smith
GPhC number:	20202020

### CPPE learning and assessment

The above pharmacy professional has accessed the following learning and successfully completed the listed assessment(s) from the Centre for Pharmacy Postgraduate Education (CPPE).

### Vaccination service

This section will list personalised information on CPPE learning programmes and assessments and dates accessed and completed.

NB: e-learning and distance learning programmes are verified by successful completion of the associated assessments.

### Learning and assessment completed from other providers (please add below)

**Declaration by pharmacy professional:** I declare that (please complete and tick, as appropriate):

This declaration applies to the provision of (select the vaccination service you are competent to provide in this box):

- NHS Seasonal Influenza Vaccination Advanced Service
- Locally commissioned influenza vaccination
- Pneumococcal vaccination

.....  
 .....  
 .....

**Declaration by pharmacy professional:** I declare that (please tick, as appropriate):

I meet <b>BOTH</b> the underlying professional core competencies outlined in statements 1 and 2.	
I am a pharmacist and have completed the self-assessment framework of service-specific competencies for a community pharmacy-based vaccination service(s) and answered yes to ALL of the statements a to o.	
I am a pharmacist and have been commissioned to provide a vaccination service(s) off the pharmacy premises and have answered yes to statements a to r.	
I have reviewed the policies and documentation from commissioners for this service(s) and reviewed and/or developed relevant SOP(s) in my practice.	
The information above is a true representation of my learning and assessment.	

I have the necessary knowledge and skills to provide the vaccination service(s) and can demonstrate these skills.	
I am a pharmacist and have signed and attached a copy of the relevant PGD(s) or national protocol for this service(s)	
My practical training for basic life support, administration of adrenaline for anaphylaxis and injection technique is fully up to date as outlined in the <u>National Minimum Standards and Core Curriculum for Immunisation Training for Registered Healthcare Practitioners</u> and was last completed on (insert date):.....	
I am a pharmacist who has not vaccinated patients before or I have identified a need to undertake supervised clinical practice and I commit to undertake a period of supervised clinical practice.	

Signature of pharmacist: .....

Date:.....

SPECIMEN