Medicines optimisation in care homes training pathway for pharmacy professionals

Pathway and role progression handbook

Version 2
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Acknowledgments

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Welcome and contents
Congratulations on your new role as a pharmacy professional in a care home setting and welcome to the Medicines optimisation in care homes training pathway for pharmacy professionals.

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Section 1
Background to the NHS England Medicines Optimisation in Care Homes programme

In March 2018 NHS England announced the introduction of the Medicines Optimisation in Care Homes programme. The programme aims to focus on care home residents across all types of care homes and aims to:

- provide care home residents with equity of access to a clinical pharmacist prescriber as a member of the multidisciplinary team, with the supporting infrastructure for achieving medicines optimisation according to need
- provide care homes with access to pharmacy technicians who will ensure the efficient supply and management of medicines within the care home, supporting care home staff and residents to achieve the best outcomes from medicines.

The programme has been funded by the Pharmacy Integration Fund (PhIF), the purpose of which is to develop schemes which integrate pharmacists and pharmacy technicians into the wider primary care workforce. This will improve access for patients, relieve the pressure on GPs and accident and emergency departments, ensure best use of medicines, drive better value and improve patient outcomes.

“The Medicines Optimisation in Care Homes programme will see pharmacists and pharmacy technicians trained to support older frailer people and other people living in care homes, to get the best from medicines and by doing so, reduce risk of harm, improve quality and save NHS and care home resources”.

Wasim Baqir, national lead, NHS England Medicines Optimisation in Care Homes programme

Learning pathway

Following an open procurement process, Health Education England (HEE) has commissioned CPPE to deliver the training pathway for medicines optimisation in care homes programme.

The 18-month Medicines optimisation in care homes training pathway for pharmacy professionals has been developed to equip pharmacists and pharmacy technicians with the knowledge and skills necessary to meet the objectives of the NHS England Medicines Optimisation in Care Homes programme. The programme will have five joining points:

- April 2018
- September 2018
- January 2019
- April 2019
- September 2019
Medicines optimisation in care homes training pathway for pharmacy professionals
Pathway and role progression handbook

Vision
The intended outcomes of the Medicines optimisation in care homes training pathway for pharmacy professionals are:

For care home users and their families
- Improved quality of life for people using care home residential or nursing care services.
- Medicines are prescribed and administered as intended.
- All medicines prescribed for people living in a care home are optimised for their individual needs, as part of their holistic care.

For pharmacists and pharmacy technicians
- Enhancement of knowledge, skills and behaviours to work effectively in care homes.
- Greater capability to deliver care in changing care home service models.
- Improved confidence and resilience, demonstrate leadership in approach to patient care in care homes and care home services.
- Become part of the integrated multidisciplinary team in care homes and work with partners who support care homes.
- Ability to train other members of the multidisciplinary team in care homes.
- Greater visibility and recognition of the pharmacy professions’ contribution to care homes.
- Greater opportunity for career progression and advancement in clinical pharmacy service delivery.

For the NHS
- Improved continuity of care through the care home programme.
- Improvements in patient outcomes, safety and wellbeing.
- Promote and facilitate early identification of pharmaceutical care needs as part of holistic integrated programme.
- Improved communication between professionals providing healthcare to care home users or residents.
- Reduced hospital and A&E admissions.
- Reduced reliance on hospital care.

For the care homes
- Enhanced knowledge and skills of care home staff through training.
- Improved policies and procedures for the safe and effective use of medicines.
- Safer administration of prescribed and non-prescribed medicines (homely remedies).
- Supporting residents to look after their own medicines.
- Raised awareness of safeguarding issues to keep residents safe.
Core principles
The core principles supporting this pathway will ensure both pharmacists and pharmacy technicians will:
- take part in a work-based care home education and training programme
- be given protected learning time (up to 28 days over the 18-month pathway) to attend residential courses, study days, learning sets and webinars. Study time is the same for full time and part time staff; not pro-rata
- commit to self-directed learning in their own time as required during the pathway
- be supported by an education supervisor, clinical supervisor, clinical mentor and peers
- build on existing models of pharmacy professionals working in care homes in the Enhanced Health in Care Homes vanguards
- be encouraged to integrate themselves into the wider health and social care teams supporting the care homes
- work with pharmacy professional colleagues in community pharmacy, primary and secondary care.

Pharmacists on the pathway will also:
- work towards an independent prescribing qualification at an appropriate time, if not already held.

Pharmacy professionals will make use of relevant established frameworks alongside this pathway:
- Consultation skills for pharmacy practice: practice standards for England\(^2\)
- Enhanced health in care homes\(^3\)
- NHS Healthcare Leadership Model\(^4\) and associated Royal Pharmaceutical Society (RPS) Leadership Development Framework 2015\(^5\)
- RPS: a competency framework for all prescribers.\(^6\)

The Medicines optimisation in care homes training pathway is comprised of a number of different component parts:

<table>
<thead>
<tr>
<th>Component parts</th>
<th>Led by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education and training programme – Medicines optimisation in care homes training pathway</td>
<td>Led and delivered by CPPE or partner organisations. All training has been reviewed by the Care Quality Commission.</td>
</tr>
<tr>
<td>Education supervision from a trained pharmacy professional supervisor</td>
<td>Led and delivered by CPPE</td>
</tr>
<tr>
<td>Clinical supervision from a clinical supervisor from the learners employing organisation</td>
<td>Managed by the learners employing organisation</td>
</tr>
<tr>
<td>Clinical mentor support from a senior clinical pharmacist</td>
<td>A senior clinical pharmacist, trained by CPPE to offer individual, local support and mentorship on a sessional basis</td>
</tr>
<tr>
<td>Independent prescribing</td>
<td>Procured by HEE</td>
</tr>
</tbody>
</table>
About CPPE
The Centre for Pharmacy Postgraduate Education (CPPE) is part of the Division of Pharmacy and Optometry, within the Faculty of Biology, Medicine and Health at the University of Manchester. Our team of staff are committed to offering continuing professional development opportunities through high-quality services and learning materials. CPPE is leading the Medicines optimisation in care homes training pathway for pharmacists and pharmacy technicians on the NHS England Medicines Optimisation in Care Homes programme.

CPPE’s mission statement
Provider of educational solutions for the NHS pharmacy workforce across England, to maximise their contribution to improving patient care.
We have made a commitment to meet the aims set out in our mission statement by:

- providing high-quality professional learning programmes
- delivering an excellent customer-focused service
- working successfully as part of the CPPE team.

CPPE’s corporate governance and how we operate is explained in CPPE: A guide to governance and quality which you can find under the About CPPE tab on the homepage of our website. To underpin our mission statement we have developed five core values.

CPPE values
- Commitment to improve and achieve
- Commitment to communication
- Commitment to encouraging others
- Commitment to openness and honesty
- Commitment to working together

Have a look at our CPPE values document to find out more:
www.cppe.ac.uk/wizard/files/about_cppe/cppe_values.pdf

FAQs
As well as this pathway handbook there is a frequently asked questions section about the Medicines optimisation in care homes training for pharmacy professionals pathway on the CPPE website:
www.cppe.ac.uk/wizard/files/carehomes/moch-faqs.pdf
Section 2
Your learning pathway
The 18-month pathway will equip you with the necessary knowledge, skills and experience to work within care homes as part of a multidisciplinary team in a patient-facing role. The pathway includes a range of different study methods to suit a range of learning styles, three stages of assessment and support from a CPPE education supervisor. Local support is also available from a clinical supervisor and clinical mentor and the structure of the pathway is designed to develop strong networks and peer support.

The figure below shows an overview of the pathway.
### Module approach

The *Medicines optimisation in care homes training pathway* has a range of modules linked to learning outcomes. The pathway has been designed to be flexible to meet all the learning needs and experiences of both pharmacists and pharmacy technicians, while also recognising existing capabilities and offering learners a continuous, relevant learning experience.

The pathway consists of five modules. All modules are compulsory, and the final module offers a choice to the learner based on their learning and development needs. The separate curriculum document gives full details.

You will have an early supportive induction meeting with your CPPE education supervisor to agree the learning contract, discuss your role and review your previous experience and learning to determine your development needs in relation to the curriculum. You will be sent a copy of the self-assessment personal development planning (PDP) tool in your welcome pack and you must send your completed self-assessment PDP tool to your education supervisor before your meeting to help inform your learning and development needs. A copy of this PDP tool can be found in the *Medicines optimisation in care homes training pathway* section on Canvas.

The self-assessment PDP tool will support you to develop a personal development plan (PDP) for the 18-month learning pathway. You can find information on how to write a PDP in Appendix 1 of this handbook.

At this early meeting you will also indicate your preference for the choices in Module 5 and discuss a suitable time and provider for your independent prescribing (IP) course (if needed).

### Overview of the modules for the pathway

<table>
<thead>
<tr>
<th>Modules</th>
<th>Length of module</th>
</tr>
</thead>
<tbody>
<tr>
<td>Module 1: Essentials for medicines optimisation in care homes</td>
<td>13 weeks</td>
</tr>
<tr>
<td>Module 2: Clinical pharmacy knowledge and its application to people living in care homes</td>
<td>26 weeks</td>
</tr>
<tr>
<td>Module 3: Clinical assessment skills</td>
<td>13 weeks</td>
</tr>
<tr>
<td>Module 4: Leadership and management</td>
<td>13 weeks</td>
</tr>
<tr>
<td>Module 5: Choice of units for advanced skills development</td>
<td>13 weeks</td>
</tr>
</tbody>
</table>

The modules will be studied in order and pharmacists who are not independent prescribers will also complete an independent prescribing course. This should be towards the end of the training programme or can be undertaken after Module 2 with a break in the pathway depending on the cohort start date. 

More details about the content and delivery of induction and the modules can be found in the curriculum document on the Canvas platform.
Throughout the pathway pharmacists and pharmacy technicians will work together in order to enhance the multidisciplinary approach.

Learning sets
You will attend regular learning sets which are facilitated by your education supervisor. Each learning set will last two hours followed by a one hour group supervision meeting. The learning sets will bring together pharmacy professionals of different levels of experience and capability, offering support for each other's learning and the opportunity to critically review and improve practice. We use structured learning materials to meet learning outcomes not met elsewhere in the pathway. You will be expected to complete pre-workshop activities prior to attending learning sets so the face-to-face time can be used to discuss cases and apply knowledge.

The learning sets also provide protected time for reflection on the pharmacy professional’s own practice and develop a local support network which can be continued once the pathway has ended.

During assessment stage 2 and assessment stage 3 the clinical mentors will facilitate the case-based discussion learning sets.

Online learning
We use online learning throughout the pathway, in the form of e-courses over a few weeks, webinars, e-assessments and your e-portfolio.

Portfolio
You will build your online portfolio of evidence which demonstrates your education and practice achievements. A well-constructed portfolio should describe your learning journey towards the attainment of professional competence. The e-portfolio is an important part of the Medicines optimisation in care homes training pathway. The information in your portfolio is used to track your progress throughout the pathway and provides evidence of how you meet the learning outcomes, core capabilities and competences within the curriculum.

Assessment
There are three stages of assessment during the Medicines optimisation in care homes training pathway. We have provided a summary of the assessments at each stage of the pathway. More detail of the assessments is provided in the assessment handbook. You must complete all CPPE assessments and you cannot substitute these with local assessments or assessments completed as part of a diploma or independent prescribing course.

You should record your progress with assessments on the pathway progress tracker for the Medicines optimisation in care homes training pathway on the CPPE website. Some assessments will be automatically populated in the pathway progress tracker. You must sign up for all series of the pathway progress trackers to initiate the automatic recording of the assessments on the CPPE website.
Assessment stage 1
You will complete assessment stage 1 as part of your induction within three months of starting the pathway.

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Format</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care homes – Medicines optimisation essentials e-assessment</td>
<td>e-assessment</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.cppe.ac.uk/programmes/l/moch-a-01">www.cppe.ac.uk/programmes/l/moch-a-01</a></td>
</tr>
<tr>
<td>Safeguarding children and vulnerable adults level 2 assessment*</td>
<td>e-assessment</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.cppe.ac.uk/programmes/l/safegrdingl2-a-01">www.cppe.ac.uk/programmes/l/safegrdingl2-a-01</a></td>
</tr>
<tr>
<td>Consultation skills e-assessment</td>
<td>e-assessment</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.cppe.ac.uk/programmes/l/consult-a-01">www.cppe.ac.uk/programmes/l/consult-a-01</a></td>
</tr>
<tr>
<td>e-Learning for health equality, diversity and human rights e-assessment</td>
<td>e-assessment</td>
</tr>
</tbody>
</table>

*The purpose of completing this assessment is to prepare pharmacy professionals for their patient-facing role in care homes. All clinical staff must pass a level 2 safeguarding assessment. The CPPE Safeguarding children and vulnerable adults e-assessment is level 2. Safeguarding assessments should be repeated every two years as a minimum to ensure knowledge is kept up to date.

Assessment stage 2
You will start assessment stage 2 within nine months of starting the *Medicines optimisation in care homes training pathway* and complete this within 14 months of starting the pathway.

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Format</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case-based discussion (CbD)</td>
<td>CPPE CbD assessment tool. Assessed by clinical mentor during the learning sets.</td>
</tr>
<tr>
<td>Multisource feedback (MSF)</td>
<td>Online questionnaire – feedback provided by clinical and non-clinical staff in the pharmacy professionals care home setting. Professional discussion with education supervisor.</td>
</tr>
<tr>
<td>Clinical examination and procedural skills assessment record (CEPSAR)</td>
<td>Direct observation in the care home setting by GPs, nurses, and senior pharmacy professionals, to complete a clinical examination and procedural skills assessment record (CEPSAR) logbook, two case studies and a reflective essay.</td>
</tr>
<tr>
<td>Reflection on patient feedback from the patient satisfaction questionnaire (PSQ)</td>
<td>CPPE patient satisfaction questionnaire (PSQ) and reflective essay on the pharmacy professional’s learning from feedback from the PSQ.</td>
</tr>
</tbody>
</table>

Assessment stage 3
You will start assessment stage 3 between 6 and 12 months of starting the *Medicines optimisation in care homes training pathway*. You need to complete all of the stage 3 assessments within 16 months of starting the pathway.
### Assessment and Format

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Format</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case-based discussion (CbD)</td>
<td>CPPE CbD assessment tool. Assessed by clinical mentor during the learning sets.</td>
</tr>
<tr>
<td>Multisource feedback (MSF)*</td>
<td>Online questionnaire – feedback provided by clinical and non-clinical staff in the pharmacy professional's care home role. Professional discussion with education supervisor.</td>
</tr>
<tr>
<td>Consultation skills assessment</td>
<td>Direct observation of practice by clinical supervisor using the Medicines Related Consultation Assessment Tool (MR- CAT).</td>
</tr>
</tbody>
</table>

*You should complete your second MSF approximately six months after your first MSF to allow sufficient time to action development needs identified in the first MSF.

### CPPE statement of assessment and progression

There will be a process towards the end of the *Medicines optimisation in care homes training pathway for pharmacy professionals* for you to receive a statement of assessment and progression (SoAP) from CPPE. The SoAP measures your role progression and progression with the learning and assessments.

You will submit your SoAP and portfolio for review towards the end of your pathway. Your education supervisor will review your SoAP and portfolio and provide feedback and suggestions for further development.

When your education supervisor has completed the review they will release your SoAP and you will be able to access a PDF copy via the CPPE website. Your SoAP will confirm that you have completed the *Medicines optimisation in care homes training pathway* and the front page of your SoAP will include the badges for completion of assessment stage 1, 2 and 3.

You can use your SoAP and portfolio entries when applying for jobs to demonstrate your progression with learning and assessment and evidence of how you have applied your learning to develop you as a pharmacy professional working in a care home.

### Independent prescribing (pharmacists only)

Independent prescribing (IP) is a key part of the role of the pharmacist working in the care home setting. If you are not already an independent prescriber you will need to achieve IP status within a year of finishing the CPPE pathway. Independent prescribing training has been commissioned separately by Health Education England (HEE) and your place on an IP course will be funded by HEE. If you are a qualified IP but not currently prescribing you will be offered a return to prescribing short course.
Role progression
Pharmacy professionals on the *Medicines optimisation in care homes training pathway* come from a variety of backgrounds and bring a range of different skills and experience to their role. Their progression in the role through their training is outlined in a role progression model. Please note this is only a guide to illustrate what progression might look like. Your progression will vary depending on your prior knowledge and experience and the care homes roles that you are undertaking.

### Core clinical care

Roles that pharmacists should be able to perform immediately or once **module 1** is complete

<table>
<thead>
<tr>
<th>Pharmacists</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work with care home to ensure compliance with Care Quality Commission (CQC) standards regarding medicines issues</td>
</tr>
<tr>
<td>Work with care home staff to improve safety of medicines ordering and administration</td>
</tr>
<tr>
<td>Identify potential safeguarding issues in the care home setting, as well as their underlying causes and methods of prevention</td>
</tr>
<tr>
<td>Apply appropriate actions when raising concerns regarding the safeguarding of a resident</td>
</tr>
<tr>
<td>Understand the roles and responsibilities of service providers, eg, who can give out medicines, who has responsibility in the care home, etc, who can be involved in decisions about medicines if the person cannot make their own decisions – understanding the Deprivation of Liberty Safeguards (DoLs)</td>
</tr>
<tr>
<td>Provide expertise in clinical medicines advice</td>
</tr>
<tr>
<td>Work as part of a multidisciplinary team in a patient-facing role</td>
</tr>
<tr>
<td>Carry out medicines reconciliation on admission and at transfer of care</td>
</tr>
<tr>
<td>Conduct medication reviews</td>
</tr>
<tr>
<td>Field medicines and prescribing queries from patients/relatives/staff</td>
</tr>
<tr>
<td>Improve patient and carer understanding of, confidence in and adherence with their medicines</td>
</tr>
</tbody>
</table>
### Extended clinical care

Roles that pharmacists should be able to perform once they have completed **module 2** of the CPPE training pathway

<table>
<thead>
<tr>
<th>Tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establish a programme of regular medicine reviews</td>
</tr>
<tr>
<td>Provide oversight of psychotropic medicines prescribed in care homes</td>
</tr>
<tr>
<td>Facilitate staff training</td>
</tr>
<tr>
<td>Develop bespoke medicines treatment plans for patients (particularly complex patients and those at high risk of admission)</td>
</tr>
<tr>
<td>Provide a clear and active link with community pharmacists and other stakeholders in the medicines supply chain to improve patient experience and manage issues</td>
</tr>
<tr>
<td>Promote self-management and develop patient support systems</td>
</tr>
<tr>
<td>Provide expertise in clinical medicines advice while addressing both public and social care needs of care home residents and patients</td>
</tr>
<tr>
<td>Work as part of a multidisciplinary team in a patient-facing role, promoting shared decision-making</td>
</tr>
<tr>
<td>Manage therapeutic drug monitoring systems and recall of patients taking high-risk medicines</td>
</tr>
</tbody>
</table>

### Advanced clinical care

Roles that pharmacists should be able to perform once completed **all the modules** of the CPPE training pathway

<table>
<thead>
<tr>
<th>Tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide leadership on person-centred medicines optimisation (including shared decision-making) and quality improvement while contributing to enhanced services and quality of care</td>
</tr>
<tr>
<td>Lead a programme of regular medicine reviews (level 3)</td>
</tr>
<tr>
<td>Provide pharmaceutical consultations to patients with long-term conditions including using clinical examination skills for diagnostic and monitoring purposes</td>
</tr>
<tr>
<td>Take responsibility for bespoke medicines treatment plans for patients (particularly complex patients and those at high risk of admission)</td>
</tr>
<tr>
<td>Take responsibility for areas of chronic disease management within the care home; undertake clinical medication reviews to proactively manage patients with complex polypharmacy</td>
</tr>
<tr>
<td>Deliver person-centred consultations, promoting shared decision-making as part of the multidisciplinary team approach for acute illness, including using clinical examination and diagnostic skills</td>
</tr>
</tbody>
</table>

Roles that pharmacists should be able to perform once completed **all the modules** in the CPPE training pathway and **independent prescribing training**

<table>
<thead>
<tr>
<th>Tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deliver person-centred consultations and prescribing, promoting shared decision-making as part of the multidisciplinary team approach for acute illness, including using clinical examination and diagnostic skills</td>
</tr>
</tbody>
</table>
### Pharmacy technicians

<table>
<thead>
<tr>
<th>Role Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ensures allergy information for residents and patients in the care home is accurate and information shared as appropriate with the wider multidisciplinary team including community pharmacy.</td>
</tr>
<tr>
<td>Review medication administration record (MAR) charts for any discrepancies, missed doses and directions which do not comply with the legal requirements.</td>
</tr>
<tr>
<td>Ensures clear and accurate guidance on PRN (as and when necessary) medicines (PRN protocol is placed in the MAR chart file. Does the home have a 'homely remedies policy'?).</td>
</tr>
<tr>
<td>Support the care home with the implementation of ‘homely remedy policy’ and bulk prescribing.</td>
</tr>
</tbody>
</table>
| Conducts stock checks on medicines which includes:  
  - reviewing overstocked items and where appropriate reduce quantities  
  - reviewing the homes returns book checking all medicines have a valid reason for returning for destruction, identify any avoidable waste, discuss any avoidable waste found with the care home manager, ensure stock is carried over to the next cycle where appropriate  
  - ensuring the home is aware of the expiry dates for creams/drops, etc. |
| Ensures controlled drugs are all stored in cupboards that comply with legislation. |
| Ensures medicines are stored safely and securely at the right room temperature and fridge temperature. |
| Ensures clear guidance on appropriate use of covert administration of medicines in care homes. |
| Ensures medicine policies are up to date and reviewed regularly by senior managers/pharmacists. |
| Carries out audits and check medication records are up to date. |
| Work with care home staff to improve safety of medicines ordering, storing and administration. |
| Work as part of a multidisciplinary team moving towards a patient-facing role. |
| Carry out medicines reconciliation on admission and at transfer of care. |
| Identify potential safeguarding issues in the care home setting, as well as their underlying causes and methods of prevention. |
| Apply appropriate actions when raising concerns regarding the safeguarding of a resident. |

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### Core clinical care

Roles that pharmacists should be able to perform immediately or once module 1 is complete.
**Extended clinical care**

Roles that pharmacy technicians should be able to perform once completed **module 2** of the CPPE training pathway

- Work with care home to ensure compliance with CQC standards regarding medicines issues and labelling requirements
- Ensures records are in place to offer staff guidance:
  - when people exhibit pain
  - when variable doses are prescribed the number of tablets given is annotated on the MAR
  - when and where to apply topical cream and patches.
- Ensures care plans for the management of conditions describe when to use the prescribed medicines for people’s safety
- Carry out medication review level 1

**Advanced clinical care**

Roles that pharmacy technicians should be able to perform once completed **all the modules** of the CPPE training pathway

- Investigates, and escalates appropriately, medication incidents and safeguarding incidents within care homes connected to medicine processes and procedures
- Supports care home managers to conduct competency checks for care home staff on administering medicines and that there are systems in place to ensure staff received an annual check of their competency
- Reviews all aspects of implementation of medicine management in the home, from ordering, storage, administration, recording and disposal and ensures it complies with CQC and NICE standards and NICE SC1 guideline on medicines management
- Carry out medication review level 2 (and moving to level 3 depending on competence and previous experience)
- Deliver person-centred consultations as part of the multidisciplinary team approach for acute illness, including using appropriate clinical examination and diagnostic skills

**Integration with the wider healthcare team**

It is intended that pharmacy professionals working as part of the NHS England Medicines Optimisation in Care Homes programme will integrate themselves into the wider health and social care system and they should be aligned to the framework for enhanced health in care homes.

They must engage with the GP practices that are responsible for the primary healthcare of the people they review who live in the care homes and they should work alongside the clinical pharmacists working in general practice. They should be allowed access to the care home residents’ GP care records and independent prescribing pharmacists should have access to prescribing capability with a supporting prescribing budget.

Pharmacy professionals working in care homes should work closely with local community pharmacies as well as other healthcare professionals providing care in care homes and local social care providers and commissioners.
Section 3
Support for the pharmacy professional throughout the pathway

A strong support structure underpins the learning pathway. Support will be provided by a CPPE education supervisor, clinical mentor and workplace-based clinical supervisor.

You will have a named **CPPE education supervisor** who will ensure that you have an effective learning experience throughout the pathway. Your education supervisor will support you to develop your initial and ongoing education plan (for example for pharmacists this will include deciding the most appropriate time for you to start your independent prescribing qualification if you are not yet a prescriber). The education supervisor will review your progress with the learning pathway, assessments and role progression during each module. Initial induction meetings will be face-to-face, and subsequent meetings will be by phone or Skype. Your education supervisor will also facilitate regular group contact within the learning sets as described above. As part of their modular contact education supervisors will also conduct professional discussions with you to support you to learn and reflect on your MSF feedback reports.

The **clinical mentor** is employed by CPPE on a sessional basis. Your clinical mentor will be a senior pharmacy professional who will either have experience in working in a care home setting or relevant clinical responsibilities in a primary care position. Clinical mentors will provide group mentoring during the first module of the pathway to support you to understand the safeguarding requirements in the care home environment and they will assess your case-based discussions during learning sets. Your clinical mentor will provide support for role progression for you via referral from the education supervisor. Your clinical mentor does not need to be immediately available or local, and will use standard communications tools such as email, phone and Skype.

You will have a named **clinical supervisor**, arranged by your employing organisation who will provide supervision through regular discussions with you to reflect on your care home role. They will provide rapid
responses to issues as they arise. The clinical supervisor will support your role development and integration into the care home, and work with you to ensure safe patient services and management of workload. The clinical supervisor will provide guidance and feedback in relation to your immediate clinical work. They will provide support for workplace-based assessments, acting as an assessor when required, and will provide feedback on your progress to your education supervisor. The clinical supervisor must have knowledge of the working environment and the service and be easily contactable. They should also be able to introduce you to the relevant GP practices to explain the programme and to ensure integration of these new roles. There is a clinical supervisor and clinical mentor handbook which provides more details of these roles for you and for your clinical supervisor and clinical mentor. You should ensure that they have received an electronic copy of this document.

**Pharmacy professionals requiring additional support (PPRAS)**

The CPPE ‘pharmacy professionals requiring additional support’ (PPRAS) system ensures consistent responses by education supervisors across a wide variety of learners and geographical locations. The PPRAS system provides a consistent framework to identify and address variation in practice, an early alert to support requirements and an assurance that patient safety is maintained. The CPPE education supervisors will work with clinical supervisors, employers, care home managers and clinical mentors to support pharmacy professionals requiring additional support. Additional local support will be accessed as appropriate.

The education supervisor will identify pharmacy professionals requiring additional support and will assess the key and associated factors contributing to the issues the pharmacy professional requires support for. These issues are often multifaceted; for example, a pharmacy professional who has health issues alongside challenges developing their role in the care home. The education supervisor will work with the pharmacy professional to develop a support plan and will ensure regular reviews to monitor the effectiveness of the plan. This may include referral to external organisations, eg, Pharmacist Support, the employer’s occupational health service, or may involve referral to the clinical mentor for additional support and guidance. Pharmacy professionals may also be referred to the CPPE coaching service: www.cppe.ac.uk/support/need-support.

Common reasons for PPRAS are when pharmacy professionals:

- are not integrated into the care home team and are working in isolation
- are not integrated into the wider healthcare teams supporting the care homes and are working in isolation
- cannot establish or progress their patient-facing role in their place of work
- have a lack of awareness about their professional competence
- are not receiving regular or honest clinical supervision
- have poor clinical knowledge leading to errors/patient safety concerns
- are experiencing issues of a personal nature, for example, relationship issues, bereavement or ill-health
- are struggling to progress with the education pathway
- have personal conduct issues.
While the CPPE education supervisor can provide initial triage and resolution of issues, significant issues regarding organisational concerns may need to be referred to NHS England. Significant issues impacting learners may require more specialist support.

**How to deal with issues of concern in the workplace**

Things don’t always go smoothly when you move to a new job or take on a new role. The care home teams might never have worked with a pharmacy professional before and may not know what to expect of your role. You may struggle to engage the team, have concerns about safe practice or feel that you don’t have sufficient support locally for your learning and development.

The table below lists some possible concerns that you might have in the workplace. Pharmacy professionals who identify an issue listed below should follow the suggested course of action initially and then seek further support from the following people as appropriate:

- clinical supervisor
- care home manager
- CPPE education supervisor.

<table>
<thead>
<tr>
<th>Example issues</th>
<th>Suggested initial course of action</th>
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| Pharmacy professional has concerns that there has been little induction to the care home setting, e.g., reporting procedures are unclear to the pharmacy professional or care home team. | ▪ Speak to the care home manager and/or clinical supervisor in the first instance and show them the induction checklist you need to complete.  
▪ Speak to your clinical supervisor. |
| Pharmacy professional has concerns regarding a lack of clarity amongst the care home team in relation to their role. | ▪ Remember your ‘lift pitch’ – make sure you can articulate the benefits of your role.  
▪ Consider showing a video about the role of a pharmacy professional in the care home setting at a team meeting: [www.youtube.com/watch?v=1uK2metDgPo](http://www.youtube.com/watch?v=1uK2metDgPo)  
▪ Share the pathway handbook with the team to help them understand what your training involves.  
▪ Talk to all members of the care home team about your role and find out about their roles too so that you can work effectively together. |
| Pharmacy professional has concerns about their training needs, need for protected time for learning sets and study days – resulting in a lack of support or engagement. | ▪ Seek support from the clinical supervisor.  
▪ Talk to your CPPE education supervisor.  
▪ Ask your education supervisor about referral to the clinical mentor. |
| Pharmacy professional has concerns regarding poor rapport and/or lack of support from the wider healthcare team. | ▪ Seek support from the clinical supervisor.  
▪ Talk to your CPPE education supervisor. |
<table>
<thead>
<tr>
<th>Situation</th>
<th>Strategy 1</th>
<th>Strategy 2</th>
</tr>
</thead>
</table>
| Pharmacy professional has concerns that they are not managing to achieve an effective working relationship or rapport with their clinical supervisor. | - You need to work on building rapport and a relationship with this person so whilst you might want to talk to someone else and ask them to intervene this could make things worse.  
- Arrange to speak to the person and discuss your concerns and work together to try and resolve the issues; make sure you listen to their point of view.  
- Speak to your care home manager for support.  
- If unresolved speak to your education supervisor. | |
| Pharmacy professional has concerns that the scope and/or the quantity of work expected of them is unrealistic, unsafe or unachievable. | - Speak to the care home manager and your clinical supervisor.  
- Agree a training plan to develop your skills to take on new roles.  
- If the quantity of work is too much review what you are currently doing. Are there things you could stop doing and delegate to someone else?  
- Seek support from your senior clinical pharmacy professional. | |
| Pharmacy professional has concerns that their inexperience or unfamiliarity with the care home environment is limiting their confidence and progress. | - Complete the *Care homes: medicines optimisation essentials for pharmacy professionals* e-course.  
- Arrange to spend some time shadowing another care home pharmacy professional and other members of the care home team. | |
| Pharmacy professional has concerns that the care home is not supporting them to become patient facing. | - Seek support from your care home manager or clinical supervisor. | |
| Pharmacist is concerned that they are being asked to prescribe in areas outside their scope of practice. | - Explain your concerns to your clinical supervisor and/or care home manager regarding legal and safety implications of prescribing outside your scope of practice.  
- Agree a plan with your clinical supervisor for how to develop competence and confidence to expand your scope of practice. | |
| Pharmacy professional has concerns that the clinical supervisor seems unable to allocate regular and protected time for reviewing progress and providing support. | - Speak to your clinical supervisor and care home manager about your concerns first to try to resolve the issue.  
- Seek support from your education supervisor if the situation is not resolved. | |
<p>| Pharmacy professional has concerns about personal safety whilst in the care home. | - Speak to your care home manager about your concerns first to try to resolve the issue. | |</p>
<table>
<thead>
<tr>
<th>Situation Description</th>
<th>Resolution Steps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacy professional has concerns that workplace supervision is insufficient to</td>
<td>• Speak to your clinical supervisor and care home manager about your concerns first to try to resolve the issue.</td>
</tr>
<tr>
<td>develop competence and confidence.</td>
<td>• Seek support from your education supervisor if the situation is not resolved.</td>
</tr>
<tr>
<td>Pharmacy professional has concerns about or is aware of inappropriate behaviours by</td>
<td>• Speak to your clinical supervisor and care home manager about your concerns first to try to resolve the issue.</td>
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<tr>
<td>other care home team members that could undermine professional confidence.</td>
<td>• Seek support from your education supervisor if the situation is not resolved.</td>
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<tr>
<td>Pharmacy professional has concerns regarding a personal issue (such as their own</td>
<td>• Pharmacist self-referral to pharmacist support <a href="http://www.pharmacistsupport.org">www.pharmacistsupport.org</a></td>
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<td>or a family member’s health or relationship issue) that may affect their work or</td>
<td>• Pharmacy professional self-referral to own GP.</td>
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<tr>
<td>learning performance.</td>
<td>• Pharmacy technicians can refer to the CPPE pharmacy technician fact sheet: <a href="http://www.cppe.ac.uk/wizard/files/supporting_you/technicians-ps-cppe-joint-factsheet.pdf">www.cppe.ac.uk/wizard/files/supporting_you/technicians-ps-cppe-joint-factsheet.pdf</a></td>
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<tr>
<td>Pharmacy professional has concerns that the learning environment is not appropriate,</td>
<td>• Speak to your clinical supervisor and care home manager about your concerns first to try to resolve the issue.</td>
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<tr>
<td>eg, learning from critical incidents and near-misses is not shared openly and</td>
<td>• Seek support from your education supervisor if the situation is not resolved.</td>
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<tr>
<td>transparently.</td>
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<tr>
<td>Pharmacy professional has concerns regarding local opportunities within their</td>
<td>• Speak to your clinical supervisor and care home manager about your concerns first to try to resolve the issue.</td>
</tr>
<tr>
<td>training programme, eg, that they have limited access to multidisciplinary events or</td>
<td>• Seek support from your education supervisor if the situation is not resolved.</td>
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<td>meetings at the practice.</td>
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<tr>
<td>Pharmacy professional feels that they are falling behind with their learning.</td>
<td>• Seek advice from your education supervisor.</td>
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Appendix 1
Personal development planning

A personal development plan (PDP) is “a structured and supported process undertaken by an individual to reflect upon their own learning, performance and/or achievement and to plan for their personal, educational and career development”.

The purpose of the PDP is to encourage you to develop and plan for the future by becoming more aware of your capabilities and the opportunities around you. You will work through the self-assessment PDP tool at the beginning of the pathway and create a PDP. You should revisit your PDP self-assessment tool at regular intervals to see if the learning you have undertaken has helped you to meet your learning objectives.

The Medicines optimisation in care homes training pathway curriculum document that is available to learners on the Canvas platform shows you which modules will help you to meet each of your learning objectives.

The personal development planning cycle

Self-evaluation: where am I now?
Your learning needs will be influenced by your previous experience, your role as a pharmacist or pharmacy technician and the priorities of the care home setting where you are working. Therefore it is important to develop a PDP to prioritise your learning throughout the duration of the training pathway. Your first meeting
with your education supervisor will include discussing the self-assessment PDP tool you will receive in your welcome pack. This self-assessment tool will be used to identify specific learning and development needs for your PDP. Another useful method to help you identify your learning needs is undertaking a SWOT (strengths, weaknesses, opportunities and threats) analysis in relation to your job description.

**Target setting: where do I want to be?**

The curriculum for the *Medicines optimisation in care homes training pathway*, which you can find on the Canvas platform, describes the learning outcomes and core capabilities and competences for pharmacy professionals working in the care homes setting. You will be working towards achieving these capabilities and competences throughout the 18-month training pathway. Think about your role as defined in your job description and identify what you can do now and which aspects of the role are developmental. Use the pharmacy professional role progression section to set targets for your learning and development to support your role progression.
References


