

Shaping your future — a programme to support hospital pharmacy learning

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Recent discussions of possible changes for hospital pharmacists arising as a result of Agenda for Change and the move to a competency-based framework (the Knowledge and Skills Framework, or KSF) for practitioners focus on the need for a career structure for pharmacy services in the NHS and on the potential to create several distinct

phases of practice leading to the role of consultant pharmacist. The move to the KSF is, therefore, cast in terms of offering an opportunity to redefine NHS pharmacy careers. Part of this redefinition also involves the creation of pharmacy services in which new ways of multidisciplinary working will be central.

To facilitate movement through the proposed career ladder, the KSF provides a framework for the development and review of all staff. The process of review is linked to a cycle of continuous improvement which also links an individual's skills and knowledge with the needs and demands of work within the NHS. This means that fundamental to the KSF is the cultural shift within which the NHS delivers its organisational performance via a process of development and review of individual members of staff.

With staff development positioned as critical to the delivery of high quality patient care and to the development of a modern NHS workforce, it is timely to consider the kinds of educational opportunities available to support the learning that addresses the wider modernising and managing NHS organisational agenda. A recent review of postgraduate pharmacy education found that continuing education and continuing professional development opportunities exist in many formats, but overall provision is, at best, piecemeal. (*PJ*, 21 August 2004, pp256–7). Yet the need for a unified framework providing a clear and logical pathway for practitioners has never been greater, and the introduction of the KSF brings with it an opportunity to embed a standard competency approach that is matched to job profiles and pay.

Despite this need for training and education to support the KSF, much of the training currently offered is directed at one particular area of practice (such as postgraduate courses covering specialist, but strictly clinical, programmes offered by the schools of pharmacy)

rather than training and education which can support the development of practice-based skills needed to demonstrate the required level of competencies for a post.

However, for training resources to be effectively targeted at developing practice-based skills, it is necessary to explore in more detail the perceived and anticipated learning

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needs of the hospital pharmacy workforce. Earlier this year, the Centre for Pharmacy Postgraduate Education (CPPE) was allocated funding specifically to support the learning and development needs of the hospital pharmacy team limited, in the first instance, to pharmacists and technicians.

To achieve this, the CPPE held a series of focus groups in July 2005 at the University of Manchester. Using consensus methods to determine the agreed outcomes, a learning needs scoping exercise was undertaken. From an analysis of the data generated by these focus groups we have found that pharmacy technicians and pharmacists favour an approach to learning and development that complements their two main drivers for learning: that is, learning that can be allied to the continuing professional development recording format ("Plan and record") developed by the Royal Pharmaceutical Society as a framework for keeping pharmacists and pharmacy technicians up to date through learning; and learning that supports the development of the KSF competencies underpinning Agenda for Change.

We also found strong support for a modular and flexible approach to learning with in-house delivery using competent facilitators or subject experts delivered at a local level (that is, at a particular trust or hospital base). This preference mirrors the guidelines produced for CPD by the Department of Health in its 1998 White Paper "A first-class service: quality in the NHS", which also emphasises the importance of relating individual learning or development needs to those of the NHS by adding: "CPD programmes are best managed locally to meet both local service needs and those of individual professionals."

Choices for learning resources were broadly categorised as either relating to practice-based skills or clinical knowledge-based subjects. The target audience for these modules will be post-diploma pharmacists and

those technicians moving into a more clinical role on the wards.

It was also recognised that learning in diverse groups would bring benefits in terms of team-building and that different staff would bring in varying levels of expertise to the situation. The participants of our focus groups thought that practice-based skills and management training might lend themselves most easily to joint training.

Responding to these needs, the CPPE plans to produce a variety of tools and resources, including:

Learning at lunch Each of the "Learning at lunch" modules will be able to be completed within an hour and will be provided in a flexible format to ensure maximum access. Cardiology and diabetes were chosen as the preferred topics for these modules.

Regional "skills forum" meetings The programme for skills forum meetings will include a range of practical workshops for skills development in influencing and negotiating skills, shaping services (writing business plans), communication skills and assertiveness and managing conflict.

The CPPE will also be exploring the possibility of working in partnership with some specialist groups to assess the feasibility of developing an introductory learning module for non-specialists, in the first instance in oncology or mental health.

Readers who would like more information about this learning programme, are invited to e-mail Janice@cppe.man.ac.uk.

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