

# How reforms are affecting recruitment

In this special feature, **Debbie Andalo** looks at how recent reforms in pharmacy have affected recruitment in different sectors

During the past 12 months some of the long-awaited reforms to pharmacy have started to affect professional recruitment. Hospitals report that pharmacists are staying put until the regrading of posts created by Agenda for Change is complete, and they predict that recruitment will pick up again, probably by the end of the year.

The Department of Health's annual hospital pharmacist recruitment survey, which gives a detailed picture of jobs movement, was put on hold last year because of the re-grading of posts brought about by Agenda for Change. Regional training pharmacist for Thames Valley and co-ordinator of the annual survey, David Scott, told *The Journal* that data for the next recruitment survey would now be collected later in the year.

Recruitment in the community sector is also in a state of flux because of the new community pharmacy contract for England and Wales and the changes to the Royal Pharmaceutical Society's Register — where pharmacists must register as either practising or non-practising pharmacists regardless of the hours worked — and retention fees. There is confidence that the new contract will help employers retain community pharmacists, although it could take a year before the full implications of the contract are known. However, the community sector also reports it is already noticing differences in recruitment created by the changes to professional registration. Although the new rules for registration and fees apply to all sectors, their biggest impact appears to be in the community. There are fears that the number of available locums is shrinking — many frightened off by the increased retention fees and the statutory commitment to continuing professional development. There are also reports that established locums are beginning to look for permanent posts because some employers will pay the retention fee for employees.

## Plenty of students in the system

According to Dr Scott, the problems created by the fallow year (the year when there were no pharmacy graduates because the three-year pharmacy degree became a four-year course) have peaked. "Hospitals are getting a lot of preregistration trainees now and applications from trainees are on the increase.



**Until they know the grades of the jobs designated by Agenda for Change, pharmacists interested in middle-ranking posts are reluctant to start job hunting**

There are far more students in the system and they are applying to hospital in greater numbers," he said. With more young pharmacists coming through there is greater competition and choice, which, Dr Scott said, "has got to be good".

But hospital chief pharmacists say that although there are more preregistration trainees it is difficult to find them placements with enough senior pharmacists available to provide the appropriate training. This is particularly a problem where hospitals are facing a squeeze on budgets and having to fund more pharmacy posts because of the reduction in the working week (from 39 to 37.5 hours) created by Agenda for Change.

Jenny Dorey, chief pharmacist and clinical director of medicines management at Oxford Radcliffe Hospitals NHS Trust and secretary of the Association of Teaching Hospital Pharmacists which represents 40 teaching hospitals, told *The Journal*: "There are more people coming into pharmacy but the big clash is finding the placements for them at undergraduate and preregistration levels. That is where the bottle-neck is at the moment. In

our trust, for example, as in others, the big challenge is having enough staff to support the training." There are also the additional training pressures on senior pharmacists who have to support the professional development of pharmacy assistants and technicians as well as helping pharmacists who want to become supplementary prescribers. "People are keen to provide training and they see it as part of their role, but it is a question of balancing that against all their other demands. When the wards need support, that comes first," Ms Dorey said.

## Need for more experts

Hospitals are also having difficulty filling experienced pharmacist posts. One reason is that people who would previously be interested in senior- or middle-ranking posts are reluctant to start job hunting until they know the grades of jobs designated by Agenda for Change.

In addition, there are fewer pharmacists with this level of experience because of the fallow year, according to Tony West, head of pharmacy at Guy's and St Thomas' NHS

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### Services under the new community contract may attract pharmacists from other sectors

Foundation Trust and president of the Guild of Healthcare Pharmacists. "I think we are still reaping the effects of the fallow year — it had a big impact on junior pharmacists and now it has moved up a level. The real problem is finding experienced clinical profes-

sionals with six or more years behind them. We have got the jobs but we do not have the people out there because younger pharmacists have not reached that level yet because of the implications of the fallow year," Mr West told *The Journal*.

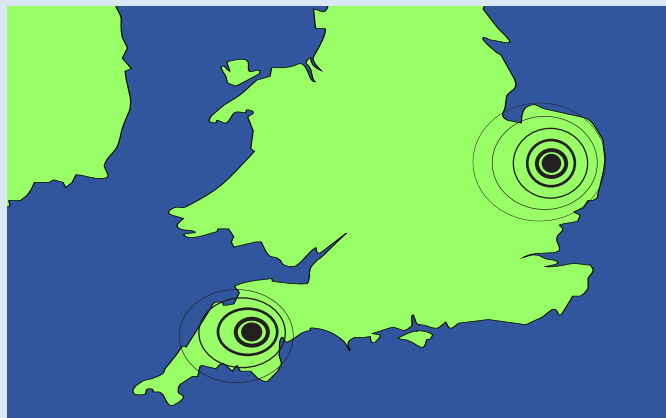
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### Primary care pharmacists: joint pharmacy initiatives may be the answer

The role of primary care pharmacists is still evolving, according to Sue Carter, chairman of the Primary Care Pharmacists Association. Ms Carter was unable to talk about any national recruitment trends but believes both secondary and primary care could benefit from joint pharmacy workforce initiatives. "This is already starting to happen to some degree. In my own primary care trust and local hospital we have D grades appointed as interface pharmacists who work a week in hospital and then a week in the PCT," she explained. "I do not see why we cannot have some kind of mature development where people can share workforce initiatives — it makes increasing sense to join together as much as possible and to have joint policies, whether these are in prescribing, medicines management or hospital discharge," Ms Carter added.

There is also some concern among chief pharmacists that they may lose some of their experienced staff to the community sector — hospital pharmacists might be tempted by the clinical opportunities of the new pharmacy contract. "I think some of the services which community pharmacy will be able to offer under the new contract may appeal to some-

## Large multiples: some areas still present a workforce problem



### Pharmacy recruitment blackspots include parts of the West Country and East Anglia

Lloydspharmacy has a current vacancy rate of 10 per cent, which includes pharmacy managers, pharmacists and relief pharmacists. If staffing trends seen in the first quarter of this year continue the company predicts staff turnover will be down by 35 per cent at the end of the year. "We would like to think this represents a seal of approval from our pharmacists for the direction Lloydspharmacy is heading both as a company and as an employer," Andrew Hainge, resourcing manager at Lloydspharmacy, told *The Journal*. Recruitment problems tend to be linked to geographical areas — there is an acute shortage of local pharmacists in some parts of the UK. These include some rural parts of Scotland, the Isle of Man, Devon and Cornwall. Lloydspharmacy, like other multiples, pays the registration and continuing professional development costs of its pharmacist employees. However, the changes to retention fees have had an impact on locums. "Locums are expressing an interest in joining us as employees because of the support we can offer them in Society fees and both training needs and training costs associated with the new contract," Mr Hainge said.

Alliance Pharmacy told *The Journal* that it is seeing a "steady decrease" in the number of pharmacy vacancies. According to its resourcing manager, Niki Thompson, there has been an improvement in recruitment during the past year but the company is still seeing some geographical blackspots as a challenge. "Occasionally we have to pay higher salaries for the best candidates in some hard-to-fill locations but we have stayed away from incentivising via golden handshakes as a common policy because experience has indicated a greater negative impact on loyal, longer serving employees," she said. Like other companies, Alliance has also noticed more interest from locums seeking permanent posts because of the changes to professional registration. But Ms Thompson said that it is too early to notice any real trends at the moment.

Staff turnover at Boots The Chemists has been around 16 per cent in the past year but this figure includes movement created by internal promotion. The company says that there have been no more problems this year in recruitment compared with last year. Paul Stretton, talent management leader for professionals at Boots, told *The Journal*: "The UK is under supplied with pharmacists so it is always difficult. There are still some tricky areas, like East Anglia, which are under supplied, and the South West, as well as some pockets of the North East. Scotland and London are over supplied particularly in areas around the pharmacy schools." Boots, like other companies, is increasingly looking to the EU to help with recruitment. "Although Spain and Portugal have been traditional areas of recruitment there is also a lot of interest being expressed in Poland, Hungary and Sweden." Many of the EU pharmacists are more flexible about working in parts of the UK where it is been traditionally difficult to recruit because they do not have the personal ties or commitments that UK pharmacists face, he added.

Superdrug refused to give detailed information about its vacancy rates, saying that the information is commercially sensitive. But the company did say that the rates vary across the country with some areas posing more of a challenge than others. The company reports that staff turnover has remained consistent over the past 12 months and it has yet to notice any effect on recruitment created by the new community pharmacy contract.

body who has worked in hospital for a few years," Mr West explained.

### Moving into management

Both Boots The Chemists and Asda have restructured their pharmacy workforce in the past year and this has had a small knock-on effect on recruitment. In the past 14 months Boots has created a new pharmacy hierarchy. The company now has 270 group pharmacy managers who have responsibility for a number of pharmacies but who are also expected to spend at least 50 per cent of their time working in a pharmacy. The tier above includes 30 area pharmacists who have overall responsibility for a larger geographical area and above them are four regional pharmacists.

All managers are now expected to develop links with primary care trusts to develop the role Boots can play in helping to deliver some of the changes in the new contract. They are also expected to support pharmacists working with the new contract. Paul Stretton, talent management leader for professionals at Boots, told *The Journal*: "The difficulty we have had is finding replacements for those promoted pharmacists involved in the restructuring."

Specialist resourcing manager for Asda, Caroline Mutton, said the company has also lost a number of practising pharmacists when they took up senior management opportunities following internal reorganisation in the

past year. The company has created the post of specialty manager to take over responsibility for joint clinical services, such as pharmacy and optical services. Under the old structure each service had its own individual manager. "A lot of our pharmacists decided to become specialty managers because there is such an opportunity for management progression. We found that quite a lot of them are willing to step outside their profession and take another career route," Ms Mutton said.

The introduction of the new contract has focused minds across the different community pharmacy companies. Boots predicts it will influence pharmacist retention because it will bring "interest and variety to the pharmacist role", according to Mr Stretton. But resourcing manager at Lloydspharmacy, Andrew Hainge, said the new contract is already boosting recruitment with interest expressed in the new clinical roles, including screening for diabetes and blood pressure checks.

### Push into employment

The changes to the Register and retention fees introduced in January by the Royal Pharmaceutical Society are also having an impact on the community workforce. Both Lloydspharmacy and Alliance Pharmacy report that locums are increasingly asking about the possibility of permanent posts. While Boots says it has seen a higher turnover

### Supermarkets: still attractive

Asda's vacancy rate is almost the same this year compared with 12 months ago. However, the company has noticed a higher turnover of staff since last September. Specialist resourcing manager for pharmacy and optical at Asda, Caroline Mutton, told *The Journal*: "Turnover has been dramatic but we are filling vacancies as quickly as people are leaving us." Pharmacists leave for various reasons, including to become a locum, to leave pharmacy altogether or to go travelling. "I think it is positive for us because we are still able to attract a large number of pharmacists," Ms Mutton said.

in locums. "Changes to registration has been a bone of contention for part-time pharmacists and has caused a lot of noise both internally and externally," Mr Stretton said. The company policy is to pay for retention fees so it is picking up the increased bill faced by its part-timers. "We have a significant number of part-timers and do not want to lose them," he added. Changes to the Register and retention fees have also had an impact on the locum market and Boots has noticed that it has lost a number of regular locums. "Locum suppliers have said they have lost some part-timers which has created problems for them," he commented.

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### Hospitals: preregistration trainees are a good workforce resource

Sheffield Teaching Hospitals NHS Trust traditionally retains 50 per cent of its preregistration trainees and 50 per cent per cent of its basic grade pharmacists also stay on. "We retain a high number of pharmacists," Ron Purkiss, clinical director for medicines management and pharmacy at Sheffield, said. However, like other hospitals, Sheffield has had difficulty filling specialist pharmacist posts this year. "We have had problems filling posts in infectious diseases and cancer. We have got money for dermatology and rheumatology posts, as well as for two discharge pharmacists. There is no problem getting the money. The difficulty is recruiting quality staff with the necessary experience," he said. However, Professor Purkiss is optimistic that government proposals to create a new pharmacy consultant post will boost recruitment and retention in the sector. "This is a huge development," he added. According to recent advertisements, hospital pharmacy consultants can attract salaries in the region of £80,000.

### Locum agencies: introducing loyalty schemes

Some locum agencies are introducing loyalty schemes where locums can collect points which go towards "rewards", such as payment of retention fees or the costs of continuing professional development. Health Care Locums has become the latest agency to sign up to this kind of recruitment initiative. The company decided to bring in a loyalty scheme where locums gain a point for every hour worked after its focus group of locums expressed concern about the increased retention fee. Adrian Kingwell, general manager of marketing at Health Care Locums told *The Journal*: "This is one way of helping our locums with that financial hurdle. The more loyal locums are to us the more points they receive."

Mr Kingwell estimates that would take about six months before a locum would earn enough points to meet retention fee costs. "My perception is that the retention of locums is a problem. We spend a lot of money on advertising for them and I think it is valid to spend money on retaining them," he said.