

Development of a clinical pharmacy technician training course

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This article describes the implementation of a pilot project to assess the feasibility of training pharmacy technicians for ward-based clinical roles



Julie Thomas (left), the pharmacy technician who was entered into the pilot training course, with Tracey Foss, senior clinical pharmacist and course organiser

Essex Rivers Healthcare Trust covers north-east Essex and has approximately 850 beds spread over several locations. Colchester General Hospital is the largest site with 61 per cent of the beds.

Accredited pharmacy technicians have been working within the dispensary for several years to provide the final check for dispensed items. This has enabled pharmacists to spend more time at a clinical level with far greater patient contact. However, on review of the pharmacy department's systems and practices, it was considered that pharmacists were still spending a disproportionate amount of time performing the core function of supplying medicines. The same applied to other functions, including the provision of medicines information and patient counselling, and undertaking medication history reviews. Additionally, pharmacists were increasingly being asked by doctors to be involved in direct patient care within their teams. This situation was not sustainable within the current staffing structure.

Many of these functions (eg, taking medication histories and patient counselling) could be performed by suitably trained technicians. However, the technicians would need to prove both their competence and confidence in clinical areas. The pharmacy service would benefit from extending the role of technicians as it would allow pharmacists to optimise their resources. It would also

enable a higher level of pharmaceutical care to be provided to patients before, during and after admission to hospital.

It was decided that a pilot project should be undertaken looking into the feasibility of a clinical technician. A large part of the project entailed the education and training of a technician and the assessment of such training. The technician who was entered into the pilot project, Julie Thomas, subsequently received the AAH Hospital Pharmacy Technician of the Year Award 2001 for her account of the pilot project. It was clear from the pilot project that a new phase of technician development had been reached that was going to be beneficial for patient care. It was also clear that an important part of this development would be the training provided.

COURSE DEVELOPMENT

The pilot project ran from January to March 2000, inclusive. The aim was to provide the basic skills necessary for technicians to perform a clinical role on the wards. A series of teaching sessions was set up (see Panel 1, p10), and these were run by experienced clinical pharmacists. Each session lasted for three hours and was a mixture of classroom and ward-based teaching.

Following the interest that was generated by this project, it was decided to develop the initial course into a full technician training programme. The certificate and diploma in pharmacy practice courses run by the School of Pharmacy, University of London, were used as a model. A core course was set up that mirrored the teaching sessions used in the pilot project, and a series of optional

modules was made available to cover different clinical topics (see Panel 2, p10). All topics in the core course were compulsory, along with four of the modules.

The technicians enrolled on to the full training programme were each supported by a tutor. The tutors were pharmacists who fulfilled set criteria for experience and qualifications. The core course was assessed by a one-hour examination consisting of 30 multiple choice questions. Each optional module was assessed by a patient profile, which is a method of presenting a structured account of a patient's pharmaceutical care. This was marked by the technician's tutor and the person teaching the module. One of these profiles was developed into a 15-minute oral case presentation.

The first full course was run between January and September 2001 for the chief technician, collaborative care technician and the medicines information technician. All three candidates passed the examination in May 2001 and went on to complete the course successfully.

The course was followed by a feedback session between the two course organisers and the three technicians. A number of changes were suggested, including dividing the session on interpretation of pathology results into two more manageable units. It was noted that the time input from the tutors had varied, as had the expectations about what should be included in the patient profiles and the case presentation.

Following further discussions, a number of changes were implemented. The core course was amended and extra topics were added to the optional modules.

Mrs Foss and Mr Gant are both senior clinical pharmacists and course organisers at Colchester General Hospital

Panel 1: Teaching sessions for the pilot project

- Understanding patient documentation
- Interpretation of medical notes
- Interpretation of pathology results (urea and electrolyte balance, blood glucose levels, liver function tests and full blood counts)
- Understanding disease systems (cardiovascular, renal, respiratory, liver and gastrointestinal)
- Understanding drug interactions and adverse drug reactions
- Understanding microbiology test results and antibiotic use
- Understanding intravenous therapy

Aims and objectives were drawn up for all topics, and the teaching time for each optional module was increased from three to six hours. The role of the tutor was formalised to include regular meetings with the students and to lay down minimum time input for ward-based teaching. Guidelines were drawn up for the patient profiles and the case presentation.

The second group of three technicians started the course in October 2001. They were the education and training technician, one of the dispensary managers and the clinical technician who was appointed when funding was secured for a full-time post. They completed the core course and successfully passed the examination in February 2002. The technicians have now completed the optional modules and the third core course is running.

THE BENEFITS

The first major benefit has come from an increase in knowledge. This was, perhaps, to be expected for the technicians, but the pharmacists teaching on the course have also benefited from the preparation of the sessions.

In addition, the tutors have gained from their involvement in the assessment process. Marking patient profiles and setting examination questions was a new experience for several pharmacists.

The increased knowledge has given the technicians greater confidence in dealing with clinical problems. They are able to access information from patients' notes with a greater understanding of the medical conditions being discussed. This increased confidence has been accompanied by an improvement in morale. Pharmacists are also benefiting from the broad, clinical role the technicians are taking on the ward, as it is allowing pharmacists to spend more time on their clinical work, including attendance on consultant ward rounds.

Panel 2: Optional clinical modules

January-September 2001

- Cardiovascular
- Renal
- Respiratory
- Liver
- Gastrointestinal
- Care of the elderly
- Endocrinology
- Surgery
- Pain
- Paediatrics
- Mental health
- Orthopaedics
- Oncology
- Nutrition
- Haematology
- Wound management

October 2001-September 2002

Same as the above, with the addition of:

- Human immunodeficiency virus infection (HIV)/AIDS
- Drugs in pregnancy and breast-feeding

There are also indications of the benefits to patients. During the three months over which the pilot project ran, the technician made over 800 clinical interventions.

In addition to the full-time clinical technician post funded as a result of the pilot project, two further full-time clinical technician posts have been funded from the medicine/care of the elderly directorate budget.

THE FUTURE

The course will continue to be assessed by its participants and the course organisers will continue the ongoing process of improvement and development.

The next cohort of course participants started their training in September 2002. There are more technicians interested in subsequent courses.

The next major objective is to have the course accredited by a university so that the technicians have a nationally recognised and transferable qualification. The pharmacy department has links with a number of universities and schools of pharmacy, and discussions are under way with some of these. Further work also needs to be undertaken to examine the benefits to patients arising from this work, and to use this information to create further clinical technician posts.

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