

NHS technical specialists

— strengthening the career path

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Recruitment and retention of pharmacy technical specialists is becoming increasingly important to ensure that NHS safety objectives are met. This article describes the initiation of a project to develop a defined career structure for this group of staff



Staff working in technical services need a gold standard of skills

Now, more than ever, the NHS requires staff who are competent and highly skilled in technical services. This is partly due to initiatives to reduce the risk associated with the preparation of injectable medicines in clinical environments.¹ There are pressures within the NHS to move the preparation of technically complex products away from clinical areas to pharmacy preparative services and to introduce new products, services and equipment.

According to the latest published Royal Pharmaceutical Society workforce census (2005), about 70 per cent of the pharmacy workforce is in the independent sector. Recruitment and retention of hospital pharmacists and technicians is a nationally recognised problem and surveys reveal anything from 5 per cent to 15 per cent vacancy rates.^{2,3}

A number of strategies have been used to improve recruitment and retention within pharmacy technical services, including the use of financial incentives and grade escalation.

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However, in the opinion of the authors, these strategies are short-term, unsustainable and largely ineffective. A more robust method is to provide structured training for staff, based on a competency framework that can lead to a defined career structure and pathway. With this in mind, the "competency framework for technical specialists project" was developed earlier this year.

The project

The principal aim of the project is to develop a competency framework and an associated career pathway with structured training for all levels of staff working within pharmacy technical services. It is expected that this will lead to improvements in the recruitment and retention of technical services staff. Project objectives appear in Panel 1 (p339).

The proposal for the project was supported and partially funded by the National Advisory Board of NHS Hospitals Medicines Manufacturing and Preparative Services, with additional funding coming from the Technical Specialists Education and Training (TSET) group (see Panel 2, p339) and the Pharmaceutical Aseptic Services Group. The TSET group was charged with managing and overseeing the project.

A number of competency frameworks have been put together for other pharmacy

specialties (mostly within defined areas of clinical pharmacy practice) and comprehensive competencies for radiopharmacy (15 National Occupational Standards) have been published by the Department of Health. It is necessary to take account of the workstreams within the Department of Health "Skills for health" initiative to reduce replication of work and to ensure that there is a clear, unified vision for technical services across the NHS.

Other developments to be considered include the new postgraduate diploma in general pharmacy practice developed by the Joint Programme Board (a collaboration of academic centres and the NHS in London and the south east). This course has been designed to equip junior pharmacy practitioners with the core skills and

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Panel 1: Project objectives

The objectives of the competency framework for technical specialists project are:

- To develop a career framework for staff wishing to specialise within technical services so that it is clear how staff progress, what opportunities are available for the future and where the next generation of technical specialists will gain the experience and knowledge to undertake future roles
- To interpret the general and advanced frameworks within technical services and to map out the required skills, training and competencies, with examples of application
- To make proposals for the development of an underpinning education programme, in collaboration with one or more identified higher education institutions

competencies required to provide pharmaceutical care in a practice setting.

Progress

Project implementation began in spring 2007 with the appointment of a project co-ordinator and a steering group. Volunteers from national committees such as the Pharmaceutical Quality Assurance Committee, the Pharmaceutical Aseptic Services Group, the NHS Radiopharmaceutical Committee and the NHS Production Committee were brought together to form the consensus panel. Care was taken in selection of panel members to ensure the panel would accurately reflect the diversity of staff groups that would ultimately be covered by the completed frameworks, and members were chosen from across the UK. The panel currently has a membership of 30, of which over half are pharmacists. The remaining members represent the allied pharmacy professions such as pharmacy technicians and scientific officers.

The panel met for the first time this summer to discuss the project strategy. The method of compiling information for the competency framework was discussed and refined, with a series of information gathering tools agreed.

The panel also agreed a set of competency clusters that would be used to build the competency framework. The clusters, which include quality management, personnel and premises and equipment, were drawn from the chapter headings of the "Orange Guide" ('Rules and guidance for pharmaceutical manufacturers and distributors 2007'). Sub-clusters were also established to focus attention on specific areas of practice.

Challenges

The principal challenge for the project is its wide scope, encompassing the work undertaken across aseptics, oncology, manufacturing, radiopharmacy and quality assurance. The framework will also need to address the competencies required for all pharmacy staff from assistant technical officers and pharmacy technicians to

consultant pharmacists. There is a large amount of information to be collated and it is challenging to format.

With the exception of the project co-ordinator, all members of the project team will be supporting the project in addition to carrying out their usual jobs. Many members are already involved in local projects following receipt of capital funding from the Department of Health. Good communication and planning are therefore essential to ensure that panel members fully contribute, that the work is cohesive and that the project keeps to agreed timescales as far as possible.

The key to the success of the project will be to ensure that the content of the final document accurately reflects what is going on within the technical disciplines across the UK. Many differences exist between hospital trusts in the services they provide and the way they provide them. This is reflected in different staffing structures and in the varying roles and grades of staff groups. These variations need to be considered to make the final document applicable to all staff working in technical services.

When the contents of the draft framework have been written and agreed by the panel, wider consultation will be initiated. The template will be put on the discussion agendas of technical services special interest groups across the UK, with the intention of generating as much feedback as possible.

Once the competency framework and career pathways have been completed, it will be possible to identify knowledge gaps between what we require of staff and what is currently available academically. This will enable proposals to be put forward for the development of an education programme to meet those needs, in collaboration with one or more identified academic institutions.

Conclusion

A universal technical competency framework and a clearly defined career structure for technical services specialists are required to ensure that the NHS can recruit and retain staff of the appropriate skills and competencies.

A flexible approach is needed and the framework development and consultation process must be as inclusive as possible to ensure that the work gains universal acceptance across technical services in the UK.

References

1. National Patient Safety Agency. Patient safety alert 20: promoting safer use of injectable medicines. London: NPSA; 2007.
2. Andalo D. The recruitment crisis: is it over? The Pharmaceutical Journal 2003;270:889-92.
3. NHS Pharmacy Education and Development Committee. National hospital pharmacy staffing survey 2003. Available at www.nhspecd.nhs.uk (Accessed 1 November 2007).

Panel 2: The TSET group

The Technical Specialists Education and Training (TSET) group was established in response to manpower issues within NHS technical services, and to provide a forum for development of education and training initiatives for this group of staff. The group formation was also prompted by the concern that undergraduates were not receiving adequate exposure to technical skills and environments, potentially excluding these future pharmacists from career opportunities in medicines manufacturing, radiopharmacy, aseptic preparation and quality assurance services.

The groups main objectives are:

- To take strategic lead for the identification and sourcing of training and education for hospital pharmacy technical specialist staff in the UK, appropriate to the needs of the individual and the service
- To develop, monitor and facilitate standards and competencies for this specialist area

Representation on the TSET group comprises all the established technical groups, and links have been established with key pharmacy stakeholders and the Department of Health "Skills for health" initiative. With the establishment of Agenda for Change and the need for NHS senior management to provide a framework for personal development plans, the remit of the TSET group has been extended to address the knowledge and skills required to meet criteria set under this arrangement.