

Preregistration — taking the plunge

Three preregistration trainees talk about their experiences at the National Pharmacy Association, AstraZeneca, and Leicester Royal Infirmary

Nikki Shaw is currently in the fourth year of a five-year practice degree at Bradford University. She undertook a six-month preregistration placement at the National Pharmacy Association in St Albans

As a student on the practice-integrated MPharm degree at Bradford University I have the opportunity to undergo two six-month preregistration placements. This means I am able to experience two different areas of the profession in depth.

Before starting my degree, I worked for a number of years in community pharmacy. I felt I had a good background in this area yet did not feel confident enough to work in a hospital without experience. I wanted a placement which would broaden my horizons and give me a different view of the profession.

I was fortunate to obtain all this, and more, during my six months at the National Pharmacy Association, working in its medicines information department. The National Pharmacy Association is primarily the trade and professional

association for around 11,000 community pharmacy owners in the UK. It provides services, support and advice to its members, while working to promote, represent and protect the interests of community pharmacists and community pharmacy services.

Its medicines information department is the association's busiest department. It is also one of the busiest pharmaceutical information services in the UK, handling around 600 enquiries each day by fax, phone, letter and e-mail. With queries ranging from malaria prophylaxis regimens, Controlled Drug laws and professional ethics to the availability of products, the knowledge required seemed huge to me. Answering these queries and more was to be my job for six months and to say I was a little daunted was an understatement. Little did I know that I was about to receive some fantastic training from a thoroughly helpful team so my worries were completely unfounded.

As the student in the department my main role at the start was to answer queries by phone. In order to be able to do this, I completed a comprehensive induction programme which showed me how to use all the resources available.

The first resource was the in-house database with an amazing amount of



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the location of journals, as I never seemed to get the hang of finding them myself.

In addition to the induction programme we also had a briefing session every morning to discuss any hot topics from the national, local and the pharmacy press to help us answer queries as fast and as accurately as possible. For example if a product had been advertised in a paper we could source a supplier in order to be able to give an immediate response.

I also had the opportunity to attend in-house training sessions on topics such as

diabetes, drug interactions, waste management, the Drug Tariff and the sale of chemicals. These sessions were not only helpful to my job but also helped me prepare for the registration examination. My nerves were really put to the test by the end of my placement when I had to do a session myself. My lecture notes on giving presentations came in handy and the topic covered (wound management) was well received. I learnt a lot myself and had lots of positive feedback — although that might be something to do with the cake I provided!

In addition to all of this I also studied the two NPA modules on 'Pharmacy law and ethics' and 'The Drug Tariff'. I would fully recommend these to anyone taking the registration examination as they contain a lot of examples and helped me considerably.

Answering enquiries by phone was the main part of my job and, as 99 per cent of queries are fully answered at the time of enquiry, this was a huge learning curve for me.

The queries are mainly from community

pharmacists and require a fast, accurate and evidence-based response. This was different to answering the common questions from patients on over-the-counter medicines, which is what I was used to. Pharmacist's queries often required a more detailed and technical answer and this was something I struggled with in the beginning. My communication skills had to improve quickly too as there were no visual aids such as body language to help me; queries are not face-to-face. However as my placement went on I became more confident in my answers and learnt to take verbal clues to request further information if it was needed.

During my placement there was a national shortage of diamorphine. This prompted a huge number of calls about alternative drugs, their equivalent doses and compatibility with other drugs in a syringe driver. As this was something I had almost no knowledge of it meant I had to work closely with other members of the team to find references and check calculations. Due to the volume of calls an internal reference booklet was compiled so we had a comprehensive reference source available straight away. This was something often done to help with "hot topics". As I had large gaps in my knowledge on this subject I began a continuing professional development cycle and also used this experience to count towards a large number of competencies too.

There was a wide range of subjects; I had queries on "control of entry" requirements, children's doses, employment law, different types of

information stored on it. This is continually updated by a dedicated team of database managers so that the information is totally accurate. The next was "the bookshelf" although "the library" may be a more accurate description. This contained books I was to use on a daily basis, such as herbal reference guides, pharmacopoeias, 'Stockley's drug interactions', foreign drug guides and loads more I did not even know existed. There was also an extensive collection of journals and British National Formulary dating back to before I was born. However, I think my most frequently used book was an atlas as I have no geographical knowledge at all. I can now tell you that you will require malaria prophylaxis if travelling to Myanmar, so those hours were not really wasted.

In addition to these titles there were also reference sources compiled in-house, such as diluent directories and vaccine requirement charts plus technical CD-ROMs and product data files.

The main source of information for me, though, was the team I worked with. They were a huge help throughout my placement and each person had their own area of specialist expertise: complicated malaria regimens, the Scottish Drug Tariff, selling chemicals and

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dispensary fridges, GPs self-prescribing and, as the new contract came into effect while I was on my placement, lots of queries on the finer details of this.

Fortunately for me the NPA has many other departments such as business sales, NHS service development and business support. This meant I could directly refer calls on to the most appropriate people.

To assist me with call referral I spent time in many different departments to see what their roles were. For example, I visited press and public relations where I learnt about the “Ask your pharmacist” campaign and the importance of maximising opportunities for the promotion of the profession. In the training department I was lucky enough to be able to attend a national vocational qualification assessors training day and read through some of the work submitted for some of the many NPA courses.

There were lots of other departmental activities to take part in, too. These included updating information on the database, abstracting journals and helping update information leaflets. As with “the real world” of pharmacy, there were some staffing issues which meant that there was sometimes extra pressure on me but this helped my personal growth and development. I am more confident at the thought of dealing with the demands of a busy pharmacy. The placement did have some weaknesses. For example, as the only student, I found the social side somewhat lacking but the benefits certainly outweighed this. The placement involved office hours of nine to five Monday to Friday so I never had to work any early mornings, late nights or weekends. How many placements offer that?

It was not an easy placement but I found the rewards were well worth the challenges. On the whole I would thoroughly recommend the placement to anyone with a good background in community pharmacy who likes a challenge — it is certainly a talking point on your CV!



Gerard Byrne is currently undertaking a PhD in drug delivery at the University of Nottingham. In his preregistration year, he spent six months at AstraZeneca

When I began my pharmacy degree I envisaged that I would be working in community pharmacy, which is where the majority of graduates end up. However, since then my career path has taken a different and exciting direction. After completing some work experience in community and hospital pharmacy, and hearing from one of my lecturers about what industry had to offer, I soon realised that I was interested in working in this sector. I quickly set about applying for industrial placements to gain experience. Competition for places is high as there are so few of them; it is therefore advisable to apply for more than one. Also, it is worth remembering that it is not a prerequisite to have done a summer placement in order to obtain a preregistration position.

How did I break into industry?

During the summer break between the end of my third year and the beginning of my fourth year I completed a 12-week placement with AstraZeneca. Several of the large pharmaceutical companies offer such placements and your school of pharmacy should have information about how to apply for these

positions (I applied in response to a poster on the school’s notice board). Alternatively, visit company websites or contact the Industrial Pharmacists Group at the Royal Pharmaceutical Society. Following the successful completion of my summer placement I was lucky enough to be awarded a preregistration position.

I spent the first six months of the year at Glenfield Hospital (University Hospitals Leicester NHS Trust), and the second half of the year at AstraZeneca Research and Development, Charnwood, Loughborough. It is worth remembering that a full year cannot be spent in the industrial sector as this would not meet the Society’s training standards.

The industrial placement

At AstraZeneca I played an active role within one of the product development teams. This team consisted of a team leader and a range of pharmaceutical scientists of varying grades. It was really interesting to work with such a diverse group of individuals from differing scientific backgrounds and I found it an excellent learning environment.

As a pharmacy graduate, I found that I had a good background knowledge which enabled me to work effectively and make a valuable contribution to the team. It was rewarding to have the opportunity to put into practice much of the theory that I had acquired at university. As our team focused on the late stage development of a candidate drug formulation it afforded me the opportunity to develop a wide array of skills. These included the practical skills involved in solid dosage manufacture such as granulation, tablet compression and analytical testing of the final product. Regular interactions with colleagues from different departments and the delivery of several presentations also helped to improve my communication and social skills. In addition, I gained an insight into the regulatory procedures and legislation governing drug development and product registration.

There was also an opportunity to rotate through many of the other departments that comprise a pharmaceutical

company. This enlightened me to the vast range of careers that exist for pharmacists in the industry. For example, you could become a clinical pharmacist developing clinical trials or work within the marketing or regulatory departments developing a strategy for the next “big launch”. Since there also is the flexibility to move between the different departments within the industry, it makes it a satisfying career path.

Summary

If a challenging and diverse preregistration year is what you’re looking for, then I would thoroughly recommend seeking a placement in industrial pharmacy. However, if you are unsuccessful in achieving a preregistration place in industry then do not despair as numerous opportunities exist for qualified pharmacists to enter.

To find out more about what the pharmaceutical industry has to offer, you might find the following websites useful:

- ▶ **ABPI** – www.abpi-careers.org.uk
- ▶ **RPSGB** – www.rpsgb.org.uk
- ▶ **Industrial Pharmacists Group** – www.rpsgb.org.uk/members/society/ipg.htm
- ▶ **Company websites for AstraZeneca, GlaxoSmithKline, Pfizer etc**

Gautam Paul is a medicines information pharmacist at Leicester Royal Infirmary, University Hospitals of Leicester NHS Trust. He undertook his preregistration training at the hospitals that make up the University Hospitals of Leicester (UHL) NHS Trust.

The UHL NHS trust is an acute trust and consists of the Leicester Royal Infirmary, Leicester General Hospital and Glenfield Hospital. These three hospitals are spread across the city. I



chose to undertake my training with this trust after speaking to colleagues who worked there and after a visit to the sites. The trust appeared forward thinking in the practice of pharmacy and there was a wide variety of support available for staff. Furthermore, as Leicester is a large trust, there was a wide variety of clinical specialties that I would be able to experience.

I received training across all three of the trust’s sites but my base hospital was the Leicester General. I was one of 10 preregistration trainees: three based at the Leicester General; three at the Leicester Royal; and four at the Glenfield. Two of the posts at the Glenfield were split between UHL and AstraZeneca with the trainees spending six months with each organisation.

The various rotations that each trainee went through were carefully co-ordinated so that everybody learnt and experienced the same things. Within each rotation, a timetable was drawn up so that I knew what I would be expected to do on a day-to-day basis. However, within each rotation, there was flexibility to do other things. This meant that I had the opportunity to plan my own training based on my needs.

My first rotation was in medicines information and it was definitely one of the most interesting rotations. The name for this department is the Regional Medicines Information Centre for the

Trent region and it specialises in drugs in lactation. Even though the centre was really busy, I got to work on many different types of enquiry. I enjoyed being able to communicate with a variety of health care professionals on a range of subjects. The training was well structured and I felt supported throughout my two months in the department. As this was my first rotation I did not have the chance to learn the basics about hospital pharmacy before starting in a more specialist area. However, I fed this back to the training facilitator and now all preregistration trainees go to medicines information after at least six weeks in their base hospital.

I spent eight weeks in the dispensary working alongside all the different types of dispensary staff in order to make sure that I was familiar with the computer system and all the policies. The staff members in the dispensary were fantastic and helped me out whenever I had problems. There was a good relationship between all the staff and even though there was a heavy workload and we were sometimes short of staff, they were always smiling and everyone pitched in to get the work done. In addition to the main pharmacy, the Leicester General has renal and medical satellite pharmacies. The aims of these are to spread the work out within the major directorates. Once I had finished this rotation, I felt more confident about working in the dispensary and it definitely helped me to appreciate what the technicians do and how a good relationship between pharmacists and technicians is the key to successful pharmacy services.

The core components of the training year included rotations in the following areas: medicine, surgery, the intensive treatment unit, aseptics, medicines information, mental health and community. These rotations were planned so that trainees got a wide experience of hospital pharmacy. Within each rotation, I had an outline of the training for the rotation, on top of which I was able to concentrate on various areas in the rotation that I found interesting. On the wards, I worked alongside the pharmacist, learning all the different aspects of ward-based work. I enjoyed the problem solving nature of the ward work — the pharmacists would not give

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me answers but would make sure that I searched for the answer myself. I got to experience consultant ward rounds, in which the pharmacist would take part and advise the doctors. The pharmacist would allocate me a number of patients to look after and monitor. I was able to study these patients in detail, research their conditions and treatments and then come back to the ward at a later point and follow up the patients. This helped build confidence in my knowledge and helped me develop my clinical skills.

Before I started my training, I had to choose three clinical areas that I wanted to study in detail as well as the core components. I was finally allocated renal, neurology and rheumatology. Because the rheumatology pharmacist left before I could start the rotation, I decided to organise a rotation within cardio-respiratory. This was another example where I was able to plan my training. All three options were extremely useful and were areas that I enjoyed as an undergraduate. Within these areas, I had the opportunity to work alongside clinical pharmacists and medicines management technicians at a ward level.

Mental health was my favourite rotation. Again this is probably because I enjoyed it as a subject at university. This six-week rotation was organised through the Leicestershire Partnership Trust. I spent time with the pharmacists looking at a number of different areas, which included acute psychiatry and pharmacist-led lithium clinics. I had the chance to observe multidisciplinary case meetings. Within these, all professions were able to contribute to the care of the patients. Pharmacists are key to mental health as the drug therapy can be complicated and lots of considerations need to be taken into account before starting, changing or stopping therapy. Throughout the six weeks, I got to plan and discuss my own learning needs and set myself objectives, which gave me more responsibility for my learning. Because this is my favourite clinical area, I made sure I used all the time effectively, reading about psychiatric conditions, making notes, spending time on wards and asking questions.

The hospital organised cross-sector experience training for the preregistration

trainees and allocated the community pharmacies on the basis of transport and proximity to home. I undertook my cross sector training with Boots The Chemists for four weeks. The store was the main city centre store and hence was extremely busy. I enjoyed my four weeks there and used all the learning opportunities available there to help me prepare for the examination. During my time in the community, I got to look at cholesterol testing, monitored dosage systems and oxygen services. I especially enjoyed working on the health care counter.

As part of the preregistration training, there were weekly seminars. These lasted half a day and covered a wide variety of clinical areas, providing learning that we could take back and apply at a ward level. The seminars were interactive and we had a chance to look at drug charts and work through them, discuss cases or make presentations to the other trainees. In addition to this, there were regional training days, which looked at broader health care issues and gave an insight into the profession. The best training session was a three-day course in the Lake District. This was to enhance our team building and communication skills and took the form of many outdoor and indoor activities. I got my first taste of abseiling and I do not think it will be the last. I also had regular meetings with my preregistration tutor to discuss my progress and any problems. I found that I had an open relationship with my tutor and I am especially thankful to her for all the help she gave me when searching for postregistration jobs. The tutors at the trust meet regularly to discuss preregistration training and hence there is a good support network.

At the end of the year, I had the responsibility of looking after my own wards, with supervision. The wards that were allocated to me were an acute stroke ward, care of the elderly and a respiratory ward. I enjoyed the fact that I had the responsibility for making sure that the patients received a pharmacy service. While looking after the wards, I was able to employ all the skills I had learnt over the year: taking drug histories; checking drug charts; dealing with discharges; counselling patients; working with the nurses and doctors; using patients'

notes; and checking biochemistry results. I made sure that I prioritised what I had to do and then made notes of issues to follow up. On the wards, I was able to apply my university knowledge when looking at patient therapy. This included knowledge of dosage forms and routes of drug delivery along with pharmacology. There is so much potential for hospital pharmacists and it is a role that is appreciated at all levels.

The trust puts a lot of effort into training preregistration students and this was evident during the examination period. Past examination papers were made available to the students along with a preparation seminar. Further to this, the pharmacists would discuss possible examination questions and also distribute calculation papers. This helped support my own preparation for the examination and even though I was nervous on the day, I did feel prepared.

In summary, my preregistration year was brilliant and I thoroughly enjoyed it. The training was excellent and well-structured. As a newly qualified pharmacist, I still have lots to learn and experience but my training has given me lots of enthusiasm for my future career. I would also like to take this opportunity to thank all the people involved in the preregistration training but especially, Rachel Hunt, the UHL preregistration training facilitator. 🙏

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