



PHARMACY TECHNICIAN JOURNAL

SUMMER 2022

Journal of the Association of
Pharmacy Technicians United Kingdom

Driving the Profession Forward

- Cross Sector Working
- New Appointments
- Regular Features





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Limited Edition APTUK 70 Year Commemorative Badge

Available now, exclusively to APTUK members

We have produced a limited edition commemorative pin badge to celebrate 70 years of APTUK as the professional leadership body for pharmacy technicians.

This is exclusive to APTUK members and available now!

Simply visit the webpage <https://www.aptuk.org/key-resources-page/limited-edition-aptuk-70-years-commemorative-badge> and fill out the order form, have your membership number ready, (full name can be used if you cannot find your number).

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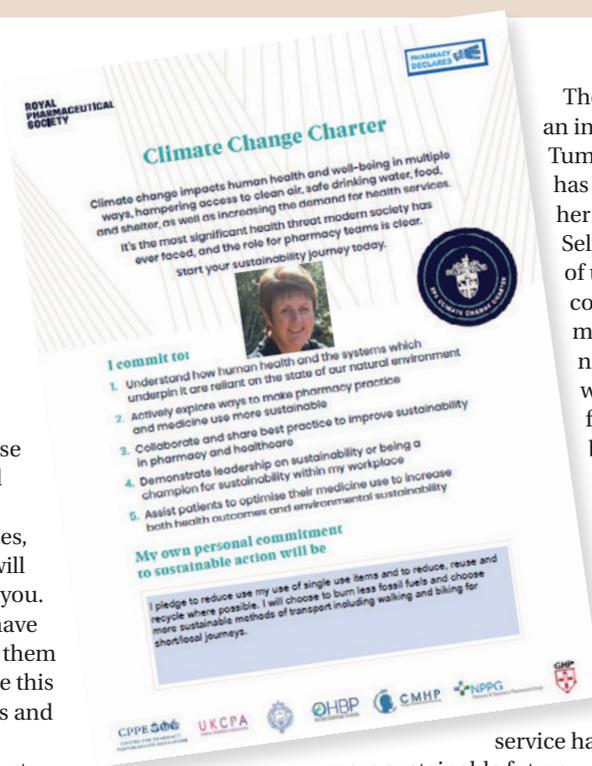
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Inspiration and Mood Boost

If ever there was a time we needed a mood booster it is now. It's been a challenging 2 years in the grip of a pandemic and a tiring summer of extreme temperatures. Through both pharmacy technicians and pharmacy staff have kept calm and carried on. So many of you have risen to the challenge and shown incredible resilience and leadership.

One of the PTJ's roles is to showcase the leadership skills and exceptional work pharmacy technicians have been doing through these tough times, hopefully in the coming pages you will find something to uplift and inspire you. It could be the award winners who have written blogs describing what led to them being nominated. And again, we take this opportunity to applaud all nominees and winners.

Darren gives us much to think about for the future with 'another step beyond,' this piece may be a conversation starter with colleagues. Our branches have been busy having conversations, especially the book club. Shamma had a chat with the founders of the APTUK book club and you can learn more about the concept on the EDI pages.



The meet the member feature is always an interesting read for me. This time Selina Tumani shares her personal journey, and has also provided exciting news around her fellowship project. In her interview Selina tells us "That there aren't enough of us!" Fortunately, our executive committee has had some new recruits, meet them on page 9. The busy branch network update is Katherine's last and we take this opportunity to thank her for leaving a legacy of the extended branch network for her successor Claire to take over.

Throughout the PTJ you will see some of the climate charter pledges our executive committee made recently. Did you see these on our social media? Have they encouraged you to re-evaluate your practices? Katherine introduces a project around how a mental health

service has altered their practices to ensure a more sustainable future.

So much going on despite the challenges around us. Grab a cuppa and a quiet corner, take 5 and I hope the fascinating articles in this edition show you some of the great work and people we have championing our profession and gives you a mood boost too.

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Full instructions are available online at www.aptuk.org. Articles must be submitted electronically to editor@aptuk.org. Authors are required to transfer copyright in their work to the Association of Pharmacy Technicians UK.

Subscription available on request. For more information contact membership@aptuk.org



CLAIRE STEELE MAPHarmT – APTUK PRESIDENT
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President's Address

Dear Members,

This edition was compiled prior to the sad news of the passing of Her Majesty Queen Elizabeth II. APTUK sends its deepest condolences to the Royal Family and wishes King Charles III, a long and happy reign. The Board of Directors made the decision to postpone some of our activities during the period of national mourning as a mark of respect. We know this is a deeply upsetting time for some, and for others will trigger feelings of grief for loved ones they have lost. If you are affected, the NHS and charities such as Mind, offer support and practical advice.

It's been a busy time in APTUK since our last edition, we have a number of new Executive Committee members, and very recently appointed to the new post of Professional Lead for England (welcome Donna Bartlett). We are currently recruiting for the Professional Lead for Wales and will be shortly advertising for new Member Observers to join us. I realise it can seem daunting to apply for posts within the APTUK Executive, but we need you to help us keep delivering for pharmacy technicians across the UK. If you are interested in any of our posts, get in touch for an informal chat, I would love to hear from you.

Over the summer, we saw the launch of the UK Commission on Pharmacy Professional Leadership. I am a member of the Commission and the Regulatory Support Working Group and am actively encouraging the conversation to be inclusive of pharmacy technicians. I hope you all completed the call for evidence survey and I will share information as soon as it becomes available.

I am looking forward to International Pharmacy Technician Day on the 18th October 2022, it's one of those days that makes me feel incredibly proud, warm and fluffy (not a term that I would generally use to refer to myself but this is a special occasion!). I particularly like when others take the time to show their love and support of our profession. Please take the opportunity to get involved and help us celebrate all the great work you do.

And last but by no means least; I'm delighted to let you know that conference is returning next year in its traditional format. We will be in Bristol on the 22nd and 23rd September 2023. Planning is already underway and we will share details with you as soon as we can.

In these challenging times, take care of yourself and each other.

With kind regards,

Claire Steele MAPHarmT
APTUK President
president@aptuk.org

ROYAL PHARMACEUTICAL SOCIETY **PHARMACY DECLARES**

Climate Change Charter

Climate change impacts human health and well-being in multiple ways, hampering access to clean air, safe drinking water, food, and shelter, as well as increasing the demand for health services. It's the most significant health threat modern society has ever faced, and the role for pharmacy teams is clear. Start your sustainability journey today.

I commit to:

1. Understand how human health and the systems which underpin it are reliant on the state of our natural environment
2. Actively explore ways to make pharmacy practice and medicine use more sustainable
3. Collaborate and share best practice to improve sustainability in pharmacy and healthcare
4. Demonstrate leadership on sustainability or being a champion for sustainability within my workplace
5. Assist patients to optimise their medicine use to increase both health outcomes and environmental sustainability

My own personal commitment to sustainable action will be

Ensuring my service makes every effort to reduce medicine waste. Reviewing working practices to ensure they have the best outcomes in terms of sustainability and environmental impact. Reducing my carbon footprint and recycling as much as possible.

Mental Health Awareness Week

Mental health awareness week was held from the 9th to the 13th of May 2022, and this year's theme was loneliness.

Did you know that 45% of adults feel lonely occasionally, sometimes, or often in the UK? That equates to about 25 million people. Half a million older people can go at least 4-5 days a week without seeing or speaking to anyone at all? This has got worse since the pandemic as people have been shielding or they may have been working from home.

Loneliness can affect anyone of us at any time and you do not have to be alone to feel lonely. It could be a new member of your department who has just moved into the area and doesn't know anyone and who doesn't speak to anybody after they leave for the day; or that elderly gentleman who comes into your dispensary every week and likes to stop for a chat even though you are always busy.

As part of mental health awareness week, APTUK held a webinar for its members to discuss the theme of loneliness. Not just as a learning event

but to provide a safe space to share our own experiences and to provide support to members who may be experiencing loneliness themselves. We shared some resources that may be helpful to you or someone you know who may be experiencing loneliness. Although webpages listed are not endorsed by APTUK we thought you may find these ones useful.

Websites

- <https://www.verywellmind.com/how-to-cope-with-loneliness-3144939> – coping strategies and link to podcast
- <https://www.bluritout.org/2020/03/18/remote-working-definitive-guide/> – Self-care with remote working
- <https://www.bluritout.org/2018/01/18/depression-activities-less-alone/> – Depression and loneliness, activities to support. Many of these activities are great to support with loneliness whether you do or don't have depression.
- <https://www.mind.org.uk/information-support/tips-for-everyday-living/loneliness/tips-to-manage-loneliness/> –

Loneliness explained and tips to manage. <https://www.supportline.org.uk/problems/loneliness/> – lots of links to helplines, groups, and making social connections.

Podcasts

- Me, Myself and Isla, Lifting the lid on loneliness
- Friendship + Loneliness
- The Lonely Hour
- We are Lonely
- Loneliness Explored



**DIANE TORRY
MAPHARMT**

APTUK Member Observer
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APTUK Membership information

CURRENT FEES

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<https://www.aptuk.org/> sign up today
The current annual fees are
Full £60
Early Years £60 for 18 months
Trainees are FREE of charge
**£6 per month for 12 months (=£72) or
£4 per month for 18 months for
Early Careers (=£72).**

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APTUK WEBSITE MEMBERS ONLY AREA

Please ensure you have access to the member's area to take advantage of our learning resources, view latest news, position statements and find details of many other benefits of membership. If you have any difficulties logging in, please contact Lynn Ali, The Membership Coordinator.

APTUK JOURNAL

Four editions of the journal are printed and posted to all full and fellow members. Editions are also available electronically via the member's area on the APTUK website. All members, including trainees can access previous and current editions via the member's only area. To discuss sharing your work in the journal, contact: editor@aptuk.org

#membershipmatters #joinus #supportustosupport

Contact details for Lynn Ali – APTUK Membership Coordinator
Email: membership@aptuk.org

Equality, Diversity and Inclusion

The equality, diversity and inclusion agenda has been excitingly busy. In this edition I will be updating you on the Inclusive Pharmacy Practice (IPP) initiative, South Asian Heritage Month celebrations and the amazing APTUK Book Club.



Inclusive Pharmacy Practice

In partnership with NHS England & Improvements (NHSE & I) and The Royal Pharmaceutical Society (RPS), APTUK has worked with organisations to excel the IPP agenda. IPP focuses on engaging with local communities to help improve their health, with proactive actions to address the health inequalities, particularly amongst those from an ethnically diverse and disadvantaged background.

The IPP Board decided that the focal health inequalities topic would be cardiovascular disease (CVD). The priority of CVD prevention and exploring how pharmacy professionals have been working tirelessly to reduce CVD related health inequalities in the local communities. The Improving Practice and Engagement Group (IPEG) developed the first IPP newsletter. Our members were contacted to participate in this initiative and below is an example of CVD related health inequalities interventions that is undertaken by our wonderful pharmacy technician profession.

I asked Mira about her work with patients who require blood pressure checks and how pharmacy technicians can develop their knowledge of CVD. *Mira Makhecha is a Senior Pharmacy Technician. She works in a Primary Care Network (PCN) in Surrey and is also an education supervisor at the Centre for Pharmacy Postgraduate Education (CPPE).*

What does your role involve what do you most enjoy about it?

Part of my role in primary care involves running a weekly DOAC (direct oral anticoagulant) clinic for a GP surgery, helping to identify patients who would benefit from a review and blood pressure monitoring. This is in addition to checking the patient's compliance on their blood pressure medication, also identifying patients who may have high blood pressure, contacting them and educating them on how to take a reading at home. If the reading is high then I would ask them to keep a five-day diary measuring blood pressure twice a day. Based on results recorded in this diary, I then refer them to a GP or clinical prescribing pharmacist for further review which could be 24-hour blood pressure monitoring or titrating of blood pressure medication. I also give healthy lifestyle advice and signpost to support such as stop smoking services and lifestyle adaptations that they can make to benefit their health. I am a people person, I really enjoy contacting my patients and engaging with them. Understanding that I have made a difference to them makes my day.

Why is Inclusive Pharmacy Practice important?

Inclusive Pharmacy Practice is about patient-centred care. One of the key things about being inclusive is ensuring people are aware of the healthcare services available. A lot of people may not be aware. I've taken the opportunity to talk about our services in public settings such as the supermarket, library and school playground. It's important to understand that

engagement might be a challenge. Persevere! If one way is not successful, it is important to reflect and try a different approach. This evolutionary mindset is the foundation of developing our healthcare service and empowering patients to take ownership of their health and work in partnership with healthcare professionals. Make sure you use simple language when talking with patients, not jargon. English is not the first language for many communities. Recognising communication, empathy and resilience in practice allows for not only a patient centred approach, but patient specific care.

What is your advice to pharmacy technicians working in CVD?

CVD is the leading cause of death globally. Early detection can save a life. Wherever you are with your experience and confidence, you can play an important part. You may not be an expert on CVD and blood pressure medication, but one can enhance their learning by collaborating with colleagues. For example, you could shadow a colleague to find out more about what they do - whether they are a pharmacy professional, GP or nurse. This will help you understand how and where you can contribute. Never be afraid to ask questions and learn. The pharmacy world is evolving, and pharmacy technicians are enhancing their skills exponentially. Communication is key so tell your team about what you can do as a pharmacy technician so that healthcare can be optimised to deliver a high standard of care.

South Asian Heritage Month 2022



The South Asian Heritage Month (SAHM) 2022 celebrations kick started on the 18th July and spanned until 18th August. This year APTUK asked members to come forward to showcase their South Asian ethnicity. APTUK would like to provide a platform to showcase diversity amongst our members and encourage engagement to expand knowledge. SAHM celebrates and highlights the diversity of culture, traditions, faiths and beliefs of people across countries including; Afghanistan, Bhutan, The Maldives, India, Nepal, Sri Lanka, Pakistan, Bangladesh. Thank

you to Poonam Bharadia, a Primary Care Network Pharmacy Technician, who shared with us insight into her family's story, how her heritage has shaped who she is today and what key thing she cherishes about her heritage and cultural background:

"Being of Indian heritage living in Britain has created a much diverse culture over the years. My parents came to this country from East Africa in the 1970s and the level of South Asians has shaped our community to what is today. Equality has increased, discrimination has decreased, and we are not far from 'home' due the cultural aspects and cuisines we have today. I am proud of my heritage because of the traditional Indian celebrations we have and how colourful my culture is, as well as the music and the great world of Bollywood."

The APTUK Book Club

The APTUK Book Club has been an excellent catalyst for raising the awareness of diversity and inclusive related topics for discussion. The Book Club was founded by our dedicated members Claire Williams and Nicola Stockmann. Perhaps some of you may not have heard of the wonderful APTUK Book Club, which Claire & Nic volunteered to co-host. I asked the founders a few questions, which may benefit you and encourage you to get involved in the next Book Club meeting.

What inspired the inception of the Book Club?

Claire: As an avid book reader and due to the pressures of working through COVID I wanted to try new things and thought I'd try non-fiction reading. I set myself the goal of one non-fiction book a month and after discussion with Nicola realised that she also uses reading as a way to unwind and explore different people's experiences in life and the idea of the book club was born!

Nicola: I have a degree in English literature and absolutely love reading. When I spotted a recommendation on Twitter for a book (not one we have yet covered I admit...), in discussion with Katherine (Branch Liaison Executive) and Claire Williams we decided to see what the interest would be for a book club. This was also an activity that can be accessible in a variety of ways through libraries/independent books shops/online retailers/audio books and virtual meetings. The weather when these discussions were started was terrible in the evenings and the experience of lockdowns and reduced social gatherings still very much a recent memory.

What is the aim(s) for the of the Book Club?

Claire: I think by our very nature pharmacy technicians are naturally inquisitive and enjoy learning, our role is becoming more and more diverse as can be seen by the different APTUK branches that are being formed, however the book club offered an opportunity for pharmacy technicians from all areas to get together in a safe environment to share ideas and discuss through the medium of the chosen book their life experiences.

Nicola: It would foster discussion between pharmacy technicians and strengthen networking opportunities in a new way. It provides a talking point in a space free of judgement to discuss topics in a more informal way rather than with presentations or polls. We intentionally have not recorded any sessions to ensure

a safe space for exploration of ideas and there is great value in being present in the discussion.

What has the Book Club achieved so far?

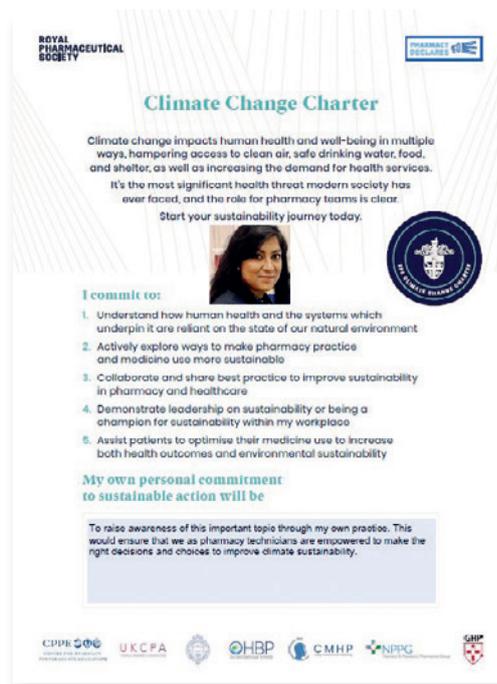
Claire: It is still in the early stages and I would love to see it develop further. I have enjoyed reading the books and thinking of their impact on me but hearing other people's opinions has been really eye opening. We have had some great conversations that I would not have anticipated, which makes it even more enjoyable.

Nicola: We covered 'Silence is not an Option' by Stuart Lawrence as our launch book. With all of the work Stuart has been involved in with the APTUK board it felt completely appropriate to launch the book club with this wonderful book. We were absolutely

over the moon to have Stuart with us on launch night, providing readings of sections and opportunities to ask questions and discuss how this relates to our professional and personal developments. Stuart attended our latest conference, offered to sign copies of his book and he was awarded honorary member status of APTUK.

We covered 'Jews Don't Count' by David Baddiel and whilst he got in touch to explain he was unable to join on the night he kindly promoted the book club event on Twitter for us. We were able to explore some of the issues and lived experiences described in the book, again in a safe space.

We try to select books which are diverse in topic and with the intention of adding benefit to our members' professional and personal development. Our next author chosen will be a fabulous female, and we have some wonderful suggestions already!



What future endeavours do you have for the Book Club?

Claire: I would love to hear other people's suggestions for books that could be discussed and to make it a regular highlight of our APTUK branch events. It would be great to get more people involved perhaps a suggestion from Wales, Scotland and Northern Ireland.

Nicola: We've had some wonderful feedback from attendees and would absolutely encourage other members to get involved through attendance or book recommendations or hosting. We love a post-it note or notes in the margins, we want to engage with the books and lift it off the page. Increasing our awareness about varieties of lived experiences cannot be a passive activity, it must be through lively discussion, acknowledgement and engagement. We have also provisionally booked Stuart for a book club for his upcoming book, which we are looking forward to.

We've been using the hashtag #APTUKbookClub for these events on Twitter, please watch this space for future events. If you are interested in hosting a session, don't hesitate to get in touch!



SHAMMA BAIG
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Recent Appointments to Executive Committee



Nicola Stockmann Vice President

Nicola brings a wealth of experience of both the pharmacy technician profession and knowledge of APTUK. Nicola set up the Hampshire branch in 2019 following her attendance at the APTUK conference and it was this branch which won the Branch of the Year award at the 2022 APTUK pharmacy technician awards. Achievements of the branch included chairing a national APTUK virtual meeting with a representative from the GPhC during the consultation period on their Fitness to Practice policy, interviewing Stuart Lawrence as part of the APTUK book club and supporting at multiple pharmacy conferences representing APTUK.

Nicola started in community before moving to hospital to complete the pharmacy technician qualification in University Hospital Southampton, then moving to Hampshire Hospitals to continue her career closer to home. Since qualifying, she has held roles in Medicines Management and Clinical Trials and is currently seconded from her role as Dispensaries Service Lead to the Interim Medication Safety Officer for the Trust.

Nicola said: *"I am so pleased to be appointed Vice President of APTUK. I promise to continue championing our skilled profession and working for the benefit of members of our professional leadership body."*

vicepresident@aptuk.org



Melanie Bryan Professional Lead, Scotland

Melanie has worked in pharmacy for over 30 years, training and working within the hospital sector, undertaking various roles including Aseptic Lead and Dispensary and is currently the Lead Pharmacy Technician in NHS Dumfries & Galloway. In 2019 she successfully applied for cohort 2 of the Scottish Clinical Leadership Fellow (SCLF) programme working with NHS Education for Scotland promoting the role of pharmacy technicians at every opportunity. This led to her undertaking her current position as chair of the National Pharmacy Technician Group Scotland (NPTGS).

Taking up the Professional Lead for Scotland role, Melanie says *"it will allow the two organisations to work together, as the profession needs to have a strong leadership voice able to support and empower pharmacy technicians now and in the future developments of the healthcare system"*. She is excited to join the APTUK executive committee to champion the Scottish pharmacy technician voice, share some of the excellent work which is currently underway and expand her knowledge at a national level to support others.

scotland@aptuk.org



Claire Williams Branch Liaison Executive

Claire has had a varied career in pharmacy spanning both community and hospital sectors. She has been able to use the knowledge gained in both settings to expand her practice and is grateful for the opportunities that have arisen. Her roles have included training, clinical trials, cancer services and most recently as a Lead Medicines Management Technician in a medium sized Trust. Claire has undertaken additional training in leadership and management and operationally supports the wider clinical pharmacy team.

Working alongside the APTUK Executive Committee, Claire hopes to bring her passion for the ever-expanding role of the pharmacy technician to raise awareness of the APTUK branches so that we can all share outstanding practice and innovation within the world of pharmacy.

branchliaison@aptuk.org

Branch Network Update

It is all change for the APTUK Branch Executive. After a fantastic 18 months as the Branch Liaison Executive the time has come for me to step down and I am delighted to welcome Claire Williams into the role. I have known Claire for many years, and I am confident that her leadership, professionalism and enthusiasm will support the branches to achieve even more. It has been a privilege to work with the branches and the wider APTUK executive committee. The APTUK branch and executive committees consistently demonstrate the skills, values and behaviours which make pharmacy technicians vital, valued members of the pharmacy profession. Our volunteers put hard work, time, and dedication into running branch events which support networking and CPD whilst also working in their demanding employed roles. I am always inspired by the energy and positive attitude that I see from branches especially at the end of what I know can be long and stressful days. I would like to take this opportunity to thank all our branch committees for making the branches so successful. I am delighted to be leaving behind a network of branches which is larger and more active than at any point in APTUK history.

As you will have seen July was a bumper month for branch activity with five branch meetings taking place. The North West branch held their launch meeting which also included an educational session covering Hepatitis in preparation for World Hepatitis Day which took place on 28th July 2022. Our established branches delivered a varied range of CPD topics

- APTUK Sussex Branch – Opioids - the rationale behind opioid

prescribing, physiological effects of opioids, and how to provide a person centred approach to help your patients reduce opioid use safely

- APTUK Wales Branch – The common ailment scheme in Wales
- APTUK East of England Branch – Antimicrobial Stewardship and UTI guidelines in the over 65s
- APTUK Hampshire Branch - Lindsay Steele Pharmacy Technician Clinical Fellow discussing 'Managing a project: Growing a Pharmacy Technician workforce in community pharmacy'

As you can see from the scope of meetings the branches offer educational opportunities for pharmacy technicians working in any sector.

Please check your emails for the monthly round up of APTUK branch events and joining details. August is a quieter month for branches but plans for the Autumn programme of events are already in progress.

Please get in touch if you would like to find out more about setting up a branch in your area or if you have any other questions about the branches.



KATHERINE WATKINSON
MAPHARMT
Outgoing APTUK Branch Liaison Executive

New Branch Liaison Executive

I would like thank Katherine for all of her time and commitment to the Branch Liaison role and I know I have a hard act to follow!

I feel privileged to have been given this opportunity to work with an amazing group of dedicated pharmacy technicians at APTUK and to share that with the many volunteers who support our branch network. As Katherine has said these are exciting times as more and more opportunities open themselves up to us all. I shall be working hard in August to get up to speed with all the fantastic work that branches are already doing but also to plan an 'Introduction to Branch life' in late September for anyone who would like to get more involved. '



CLAIRE WILLIAMS
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Careers Videos: Intro And Update So Far...

Despite a rapidly expanding need for pharmacy technicians to support the delivery of new service models, registrant data from the GPhC has shown flat growth in the pharmacy technician register over a period of five years.¹ Initiatives to promote pharmacy technicians and the valuable part they play in the wider healthcare team is key in ensuring visibility around pharmacy as a health career. With the unique skillset of pharmacy technicians being increasingly recognised across health and care settings, there is a need to recruit and retain the workforce across sectors. Pharmacy technicians are well placed to support patient care pathways, as part of joined-up multi-professional teams.

One of the key priorities in APTUK's 2022-2026 strategy is to "promote pharmacy technicians (and APTUK) at every opportunity through clear communications articulating the role of the pharmacy technician". I am undertaking a fellowship year with Health Education England (HEE), which has enabled me to work with and learn from key partners including APTUK. As part of the fellowship, I have been part of national workforce transformation projects. One such project is with NHS Health Careers; an exciting piece of work to create video case studies featuring a range of pharmacy technicians to showcase the breadth of opportunity in the profession.

This work is being driven by HEE's national pharmacy technician and pharmacy support staff workforce development strategy and aims to:

- promote the career as an attractive option
- increase uptake of training places
- showcase the role of pharmacy technicians across the wider healthcare system.

Aligning the HEE and APTUK strategies will enable the delivery of career and development solutions, to support identified current and future workforce need. An aim being to attract more people to train as pharmacy technicians and supporting the retention of those already in the profession.

The careers videos will feature pharmacy technicians working in a wide range of roles. Videos will include:

- 1) a pre-registration trainee pharmacy technician in cross-sector training at the very start of their journey,
- 2) pharmacy technicians in primary care, community pharmacy and hospital roles,
- 3) those working in less well-known roles across healthcare systems.

The videos will mostly be filmed at the pharmacy technicians' place of work, allowing us to capture the 'hustle and bustle' of the different environments and showcase how we play an integral part in the multidisciplinary team - from engaging with patients to liaising with healthcare professionals. The videos will also feature interviews with each pharmacy technician and

aim to capture their career journey in their own words, this will include:

- what drew them towards pharmacy
- what is unique about their role
- the impact this has on patient care
- their relationship with the teams around them
- what inspires them about their future in pharmacy

We hope that their stories resonate and spark an interest in those that are passionate about healthcare. Importantly, we hope that the videos allow an insight into how rewarding and vast the profession is, and that pharmacy technicians are professionals who are accountable for their autonomous practice. Our brilliant colleagues will have the opportunity to talk about their diverse and transferrable skills which are adaptive to a constantly evolving healthcare system. Sneak peek...one of the case studies we hope to include is a hospital pharmacy technician who is also working at a covid vaccination hub. This is a truly fantastic opportunity to show how pharmacy technicians can support pharmaceutical and patient services, utilising the full scope of practice. What better time is there to be a pharmacy technician?!

APTUK are delighted to collaborate with HEE in this initiative and will host the videos on our website with access for both members and non-members. We will be encouraging colleagues to signpost to the careers videos and use them as a tool to promote the profession. This can be at health careers events, through their education and employer networks, appropriate training platforms and social media. We want to reach a wide audience, both within pharmacy and outside of pharmacy. We will be sharing more information about this when the videos are available in mid - late Autumn 2022. Watch this space!

¹ <https://www.pharmacyregulation.org/about-us/research/gphc-registers-data>



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**THE ASSOCIATION OF
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Another Step-Beyond: From Competing To Collaborating, are Pharmacy Leaders And Pharmacy Technicians Ready, Willing and Able?

AUTHOR

This article is written by Darren Leech, who works as a Director at NHS Elect.

Darren is a registered pharmacy technician and is a past President of the Association of Pharmacy Technicians UK. This article is a “provocations” piece, designed to get people thinking and talking about the workplace and the work they do for patients in the NHS.

At the turn of the century, government policy around health and care was primarily driven by the belief that competition would enhance quality and drive down costs¹. The language of this era was all about individual *patient choice, competition, tariffs, contracting and contestability*².

Two decades on, a 180 degree change in approach appears to be underway. The architecture of the NHS behind patient facing organisations is changing once again. On 1st July 2022, a major step toward this ‘new era’ in health and care policy was enacted, through the Health and Care Act (2022). This saw 42 Integrated Care Systems (ICSs) established across England on a statutory basis³. The Integrated Care Boards (ICBs) in these 42 geographical areas are responsible for a plethora of ambitions, replacing the old market-based lexicon, with a new language of collective *place-based partnership*, involving a population-based approach with an emphasis on *collaboration and integration* - both in the planning, design and delivery of health and care services.

Just as the assessment and impact of policy during the Blair years was a topic of discussion for pharmacy leaders at that time⁴, no doubt the implications of changes being enacted by the current administration pose challenges for today’s pharmacy leaders too.

What are these challenges and how might they impact pharmacy technicians?

Well, for a start, we know that the culture born of competition in some areas is hard-baked. There is little appetite or outreach across traditional organisational boundaries, so evidence of pharmacy colleagues in community, hospital or social care settings collaborating appears minimal. This is certainly a new leadership challenge for those in charge of pharmacy, as the workforce is often focused only on “their bit” of patient pathways. Also, policies enacted during the pandemic were very focused on a ‘command and control’ approach - which is right for an emergency situation of course, but if perpetuated can really inhibit resourcefulness, creativity and innovation from employees.

Given this, are pharmacy leaders and pharmacy technicians well placed to facilitate and engage in

a more open, collaborative approach designed to greater integrate and smooth service delivery for patients?

The expectations of new Integrated Care Systems are pretty ambitious and so, it is not unreasonable to assume the scale of change anticipated will be more about healthcare transformation, than healthcare tinkering.

A ‘radical’ example might be “TTO” or “TTA” medications for patients leaving hospital. Anyone re-designing their local health system for the majority of hospitalised patients from scratch, would probably question the need for this step in the process to exist at all. Some might argue that the clinical expertise of hospital pharmacy staff should be focused on the safety, optimization, supply and administration of medicines for the acutely unwell, rather than the ongoing provision of medicines for medically stable patients. The wider health system could kick-in at this point, with effective communication and hand-over that ensures medicines are delivered to their usual or new place of residence in a timely way, or via a community collection point or pharmacy of the patients’ choice. It might also prevent routine repeat supply systems from being compromised, reduce waste and avoid confusion for patients and carers who try, but often fail to get to grips with differing brands and disjointed supplies and supply systems. Such an idea would obviously have implications for hospitals, care organisations and pharmacy services across our traditional boundaries and whilst this might instantly remove many of the excuses given to patients about delays to their escape from a hospital bed, others in pharmacy might point to a minority of patients for whom this approach would not be appropriate or practical. Fair enough, there will always be exceptional cases, but re-engineering and improving this traditional supply model for most patients could free up thousands of hours of bed occupancy in highly pressured health systems – especially given the ease with which many patients can now contact pharmacy for advice and guidance about their medicines. It might feel a bit radical, but patients are often frustrated with the current system and point to this tiny part of their care in hospital as a major frustration. ICBs may well encourage their local system to truly listen to patients and then, to do something about their complaints. Are pharmacy teams currently working with and within badly designed systems willing to even countenance a discussion about such topics, let alone consider changing their working lives to accommodate resultant changes of this magnitude?

In addition to the stretch in mindset required, do pharmacy leaders and pharmacy technicians have the capacity and capability to collaborate and re-design care in a more integrated way?

GP, wider medical and nursing capacity is currently strained and forecast to get even tighter^{5,6}, so as well as pressure from patients, there may be greater professional or political expectation around the appetite of pharmacy to embrace new areas of practice that are again, a step-beyond traditional roles.

To embrace and deliver the expected scale of re-design, pharmacists, pharmacy assistants, supporting team members and critically, *pharmacy technicians* will all need an open mind of course, but also a commitment to 'get out there', to cross organisational boundaries and truly play their part in this new collaborative, integrated health and care era.



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REFERENCES

1. Department of Health (2000). *The NHS Plan: A plan for investment. A plan for reform.* HMSO. <https://navigator.health.org.uk/theme/nhs-plan-2000>
2. Leech D (2008), *Interpreting the new language of leadership.* *British Journal of Healthcare Management*, Vol 14 No 2 (76-77)
3. NHS England (2022). <https://www.england.nhs.uk/integratedcare/what-is-integrated-care/#:~:text=Following%20several%20years%20of%20locally,basis%20on%201%20July%202022>
4. Leech D (2014), *Hospital pharmacy leaders and the impact of competition – are you ready?* *Pharmacy Management*, October 2014, Vol 30, No 4, 36-37
5. BMA (2022). *Pressures in general practice data analysis.* July 2022. <https://www.bma.org.uk/advice-and-support/nhs-delivery-and-workforce/pressures/pressures-in-general-practice-data-analysis>
6. Mitchell, G (2022). *Nurse staffing across the UK 'now well past the point of crisis'.* *Nursing Times*. Online (7 Feb 2022). <https://www.nursingtimes.net/news/workforce/nurse-staffing-across-the-uk-now-well-past-the-point-of-crisis-07-02-2022/>

Substance Use And The Environment

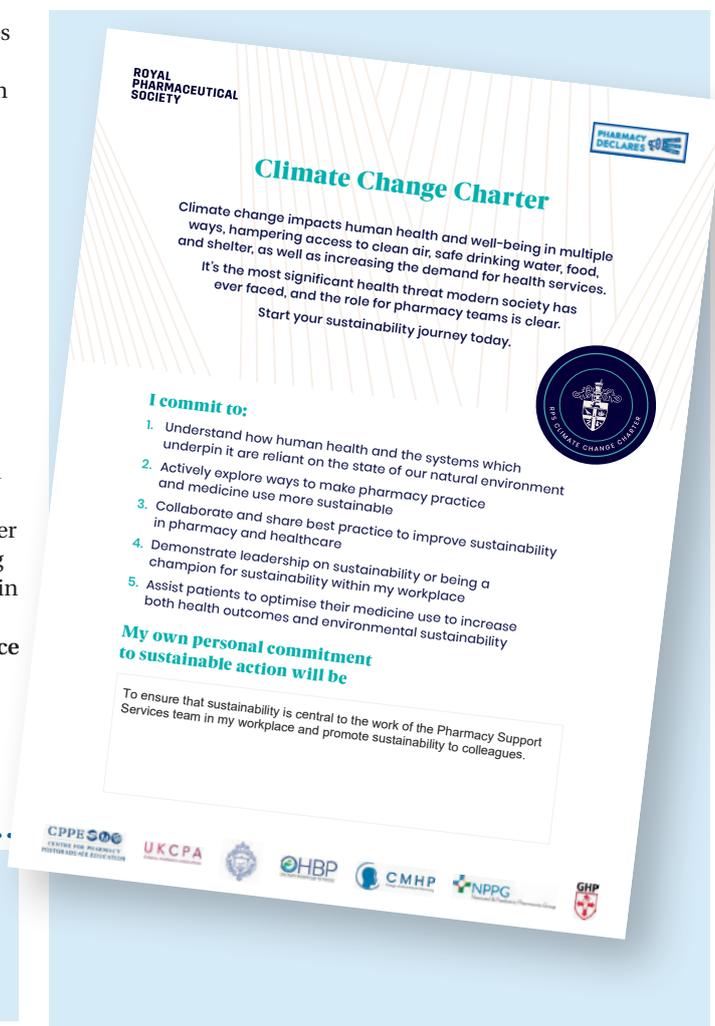
I am the Head of Medicines Optimisation and Pharmacy Services at Turning Point. Turning Point is a leading social enterprise providing support to over 100,000 people who need support with their drug and alcohol use, mental health, offending behaviour, unemployment issues and people with a learning disability. Within my role I am the senior clinical team representative for the organisations "Green Heart"; ensuring that environmental issues are considered in all parts of the work we do. I had been following PharmacyDeclares! on social media and joined their telegram group. There are several drug treatment service providers in the UK and whilst in some ways we are competitors we also work closely together on many projects. Through the PharmacyDeclares! telegram group I was asked by Roz Gittens, Director of Pharmacy at Humankind, if I would be interested in co-authoring an article highlighting the challenges of managing the environmental impact of substance use. Release joined us in writing the article; Release is the national centre of expertise on drugs and drug law. We discussed the sections we wanted to cover and each took the lead on our section before sharing and editing using shared files. The final article was accepted for publication in the *Pharmaceutical Journal* and is available for access here: <https://pharmaceutical-journal.com/article/opinion/substance-use-and-the-environment-time-for-pharmacy-to-step-up>

If anyone would like to find out more about working in drug and alcohol treatment services or about the actions we are taking as part of our Green plan please contact me Katherine. watkinson@turning-point.co.uk



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Award Winners Blogs



Branch Award: Hampshire Branch

We were so pleased to win Branch of the Year 2022. We set the branch up in December 2020 as we felt after 2020 and the uncertainty and pressures it brought, to bring together pharmacy technicians virtually for peer support/networking was something we were passionate about and a priority for us.

We have had such a fantastic time with a variety of events, highlights including hosting an APTUK national virtual meeting with the GPhC for their consultation on fitness to practice (our first branch event!), launching the APTUK book club, hosting the launch alongside Stuart Lawrence who was our guest author and now honorary APTUK member. We've also had the honour of representing APTUK at conferences alongside our APTUK executive team, giving us the opportunity to fly the flag for our wonderful branches. There have been some wonderful speakers we've had the joy of hosting and we'd like to thank all those who have supported the establishment, growth and events of the Hampshire Branch. If you are considering setting up a branch, or getting involved with an established branch we'd recommend it - #BranchLife is so rewarding!

Nic Stockmann, Hampshire Branch Chair

Pre-Registration Trainee Pharmacy Technician of the Year 2022: Matthew Rostron-Hall

I have worked within the NHS since 2016, I began as a healthcare assistant – this gave me a patient focused perspective and I have carried this throughout my career. Within a hospital pharmacy we have a limited understanding of what a person goes through during their time as an inpatient – it can be a traumatic experience for some people. When I go to speak to a patient I'm not there to just talk about their medication, I'm there to be a friendly face and to gain a deeper insight into how this person feels about their treatments. This conversation might be the best part of their day, I always try to remember that when interacting face to face with a patient.

I feel as pharmacy technicians we are in a very privileged position, we are predominantly patient facing but also have the potential to be involved in decisions about patient care. Patients should be the focus of every decision within the NHS as a service and in turn, every decision made within a hospital pharmacy should reflect this.

I feel this outlook is the main reason I was nominated for this award, and I am eternally grateful to have been chosen for this award back in April. It was humbling to have the opportunity to meet other pharmacy technicians and to be able to see the great, inspirational work that has been done throughout the most difficult of times."

Matthew

Received Fellow Award: Andrea Ashton

"Like many APTUK members I look forward to our annual conference and awards ceremony. With not having conference for two years and this year being APTUK's 70th Anniversary, the opportunity to hear about developments and our contribution to patient care, particularly during the pandemic, catch up with friends and colleagues in person and celebrate our profession, it was a very much anticipated event. This year was made even more special as I was delighted to receive the Fellow Membership Award. I am immensely proud to be a pharmacy technician and I feel honoured to receive this award in recognition of my practice over the last 35 years and my contribution to APTUK on a voluntary basis. I am fortunate to have worked in many different areas of pharmacy practice during my career, to have worked with some amazing and inspiring colleagues along the way and am grateful for the support I have received. I have always been an advocate for pharmacy technicians and what we can achieve as a profession, something I pledge to continue to do in my role as a Fellow. I would like to thank Gail Hall for the nomination, APTUK for the award and the judges for their kind words of feedback. Congratulations to all this year's award winners".

Andrea



The Katherine Miles Award for Outstanding Contribution to Pharmacy: Steffani Beaton



I currently work as Senior Pharmacy Technician, Vaccine Service in NHS Forth Valley based in the Vaccine Holding Centre (VHC) in Falkirk Community Hospital and have been doing this role since April 2019. This year I was delighted to be nominated by my manager Kirstin for the APTUK Katherine Milles award for Outstanding Contribution to Pharmacy. I felt very proud to be recognised for my hard work and dedication to my role and felt even more proud and honoured to win this award.

Background

When I started this role there was always going to be many challenges helping develop the Vaccination Transformation Programme (VTP) alongside the Immunisation Team for NHS Forth Valley. The aim of the VTP is to modernise the delivery of vaccination services. The main change is the vaccination service is now provided by the NHS Immunisation Team in centralised clinics rather than GP Practice staff. The VHC has always provided the vaccines to allow these services to be carried out.

One benefit to VTP is that the VHC and the Immunisation Team work closely together which has been vital as the vaccination services being provided to service users has changed with the addition of new vaccination programmes, in particular the biggest one that no one knew about – Covid 19!

Pharmacy Technician Input

The VHC stores and distributes all vaccines for the national programmes that are offered in NHS Forth Valley. Our main duties are ensuring we have adequate supply of vaccines to cover the programmes, picking orders for the planned clinics and delivering these out in validated cool boxes to where they need to be. We also offer support and deal with any cold chain incidents for the whole of NHS Forth Valley, offer cold chain training to all NHS staff, carry out fridge audits for NHS Forth Valley and provide recommended actions for improvement. I also have a responsibility to maintain and update cold chain guidance and provide audit reports to senior members of the board.

Challenges

Originally the VHC was a team of two people and is now a team of seven. As the plans for two mass vaccination programmes developed it was evident that two people were no longer able to provide the service that was required, this led to a pharmacy project group being developed which I was a member of. This group looked at what was required and put a plan in place to get what was required in place to allow a successful vaccination programme. The first thing we had to do was secure a new space and build a new department and state of the art cold room. A space large enough was identified out with Forth Valley Royal Hospital where we were previously based. The group then engaged with the Estates to begin works on creating our new space. We also had to source additional vans and equipments and start advertising for new team members all while carrying out or day jobs of making sure the correct vaccines got to the

correct place at the correct time with the added logistical issue of Covid vaccine which must be stored between -60oC to -90oC, had an expiry date of 5 days, could not be transported more than twice and had a time limit on how long it could be transported for and was also one of the most precious/priceless product I have ever worked with.

Things were very challenging for a while, mainly because we did not have the space that we required but in October 2021 our new department at Falkirk Community Hospital was ready to move in to. The move was done over one weekend with all the usual VHC staff, who had only just recently been recruited, during our busiest time of the year (right in the middle of providing the Primary and Secondary School programme for flu, mass vaccination hubs for both flu and Covid vaccines where the sites were using in excess of 1500 vaccines each day, district nurse teams, prison services and many other service users) this was all done with zero impact to any of our service users. One of the benefits of our new site is we are now based within our busiest mass vaccination hub.



It took a little while to get settled in to our new premises and we faced challenges that we did not anticipate, but as a team we have overcome every challenge along the way. I am so proud to be part of our little team and all that we have achieved. It is now August 2022 and we are preparing to begin our multiple busy vaccination programmes which we will deliver to the highest standard as always and supporting our nursing colleagues. We look forward to starting this busy time in our new department where we are more prepared and equipped than ever.

STEFFANI BEATON

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Role of a Pharmacy Technician Working Within an Integrated Clinical Pharmacy Team

Background

The role of the pharmacy technician is new to the Primary Care setting within the last couple of years. I am likely one of the very few pharmacy technicians within the UK that currently works in an integrated role between GP practices and secondary care on a regular basis.

I started my pharmacy career 14 years ago as a Saturday girl with a multiple chain of chemists whilst in sixth form. After a few months I decided to move full time into the role and completed dispenser then pharmacy technician training within the same setting. Upon qualifying I moved to secondary care, completed an accuracy checking qualification and then moved to become a ward-based Medicines Management Technician.

Specialist Role

In May 2020 I moved to Primary Care as a Primary Care Network (PCN) pharmacy technician, initially as a trial role funded by Health Education England. After a successful trial this developed into a permanent role. My role is split covering 6 GP practices within the PCN and includes weekend shifts on the wards at the acute trust.

Working across the interface between Primary and Secondary care has provided me with a unique perspective on the impact that pharmacy professionals, and in particular pharmacy technicians can have in ensuring safe prescribing, adding value to patient care and improving outcomes for patients.

When I first arrived in GP practices the initial thought was “well what can a pharmacy technician do in primary care?”. The role was so new in this sector and for the PCN I had been allocated to, that we were not sure where to start! Added in to that the Covid-19 pandemic had just started, it certainly was an interesting time to start a new role!

My first few months consisted of learning EMIS systems, reconciling hospital discharge letters and ordering blood tests for high-risk drugs such as lithium and DMARDs. This later then developed in to creating effective recall systems for patients on high-risk drugs and improving processes within the practices. I worked closely with the senior clinical pharmacist to agree areas for me to focus on and to ensure I had the necessary supervision and mentorship to really develop my skills in this setting.

Having pharmacy technicians reconcile hospital discharge medications can bring excellent value to the patient and practices as the understanding of medication processes allows us to identify discrepancies in discharge letters, arrange required follow-ups and support patients effectively by liaising with the clinical pharmacists within my team and with colleagues in community pharmacy.

Sometimes other colleagues in practice might not have the time or skills to review a discharge letter in the way a pharmacy professional would. In addition,

taking workload off our clinical pharmacists allows them time to focus on other priorities in practice and complex patients.

Pharmacy technicians can use their underpinning knowledge and experience to identify medicines related issues that may arise on a day to day basis and to support a full holistic review of a patients' medication regime, this in turn provides a high standard of care. For instance:

- Have they got a recall for bloods, blood pressure and other required monitoring?
- Have they been added to the appropriate (Quality and Outcome Framework) QOF register for their follow ups? e.g. COPD, Heart failure, Hypertension.
- Do they need support with their medication?
- Do they know why their medication has changed?

Pharmacy technicians are ideally placed to identify patients that may require a Structure Medication review (SMR) so at this stage could book them in with a clinical pharmacist.

I often see patients who attend A&E due to health complications related to poor medication adherence. A recent example was of a patient admitted with an exacerbation of COPD. The discharge letter suggested a COPD review, however it transpired that the patient had not ordered their inhalers for 6 months. This admission could potentially have been avoided and reduced the burden on an already stretched hospital service. Who knows, I could have been the one seeing them on admission to hospital during my weekend shift to complete their medicines reconciliation. Unfortunately, there seems to be some unhealthy misconceptions that pharmacy technicians aren't or can't be “clinical”. Presented with the right training, mentorship and opportunities we can become even more of an invaluable asset to our GP practices e.g. in chronic disease management to identify patients that are not treated according to current guideline requirements or have outstanding crucial drug monitoring or where compliance is poor – such as the COPD patient above, my role can help prevent this happening by identifying them early on for a review.

Career development

I have recently completed CPPE Primary Care Pharmacy Education Pathway. The amount of knowledge and upskilling I have gained from it has had a massive impact on my practice. With the support of the senior pharmacist, I am now running my own patient facing clinics for simple medication reviews, taking blood pressures and other observations. I have also completed phlebotomist training so I can take bloods if needed. I could not have imagined these opportunities would have existed when I started the role two years ago!

Impact

One of my biggest projects to date has been improving the adherence for the Annual Risk

Assessments Forms (ARAF) for female patients of childbearing potential taking valproate. An audit I led on identified that the PCN had very poor compliance with the standards for these forms. I found a simple solution to this and that was to highlight the expiry date for the ARAF to not only the practice on EMIS but also to the community pharmacies on Summary Care Records (SCR) and Secondary Care via our local electronic shared record and SCR. This showed the impact that having an integrated approach to working could have for all teams involved with a patient's care by understanding the information other teams need and where they can find it. The success with my audit improved our PCN's compliance with the ARAF from 10.4% to initially 86%, then with further work 100% of our female patients have had a review and appropriate documentation completed within the last 12 months. This project led to me receiving the Primary Care Pharmacy Association's Rising Star award in June 2022 and being appointed to their Pharmacy Technician Committee where we look to continue improving resources and training for Primary Care Pharmacy Technicians and trainees.

Having a culture of integrated working can vastly improve patient care, especially when patients are discharged from Secondary Care into Primary Care. Through partnership with Community Pharmacy, Secondary Care pharmacy teams and other GP teams we can look to improve systems, and ultimately,

have a positive impact on our professional working relationships, and those at the heart of it all – the patient. Communication and networking are key to this, having contacts within different teams, being open to coming around the table - sharing ideas, discussing challenges, and coming up with solutions that can shape our local healthcare system for the future.

Conclusion

My first 2 years within primary care has been a revelation in terms of the impact that pharmacy technicians can make. I look forward to seeing what the future for our role in primary care will bring.

I hope that my experiences will inspire other pharmacy technicians to develop the role further to ensure that patients benefit from the skills we can contribute and to ensure we receive the recognition we deserve as part of the patients' healthcare team.



ABIGAIL STIRLING MPharmT

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'An Interview With...Meet the Member'



Name:
Selina Tumani MPharmT

Current Role:
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Leadership Fellow with Health
Education England

**Highest qualification related
to your role:**
PG Cert in Healthcare
Leadership + PG Cert in
Psychiatric Therapeutics

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Steps you took to get to where you are now:

My career journey began through work experience in a community pharmacy. I had always been interested in healthcare from a young age but didn't know where I wanted to go with it. I enjoyed every second of my work experience from taking in prescriptions and deliveries, labelling medicines, and learning from the pharmacy team. Mostly I enjoyed interacting with patients and helping them with their questions. I loved it so much that I stayed on as a Saturday girl. The pharmacy supported me to train as a medicines counter assistant whilst I was working part time with them, alongside studying for my degree in Psychology. I was unsure about my career path, but I knew I was interested in pharmacy. Once I completed my degree, I saw a job for a pharmacy assistant in a mental health hospital; it combined my interest in mental health with my interest in pharmacy. Hospital pharmacy was a new world; my skills from community pharmacy served me well as I completed Level 2 qualification. I could see a career path and the attraction of being able to complete a Level 3 to be a pharmacy technician in 2 years was something I wanted to do. I enjoyed the methodical work, the 'let's pull together and get it done' attitude of the pharmacy team and the fast pace of work. When the opportunity to enrol on the Level 3 came up, I was certain that this was the career for me. I completed the 2-year course and registered as a pharmacy technician. The Trust I worked for were in the early stages of rolling out Electronic Prescribing + Medicines Administration (EPMA) across the wards. I was offered the opportunity to be part of the project and took up the role of EPMA pharmacy technician. It was a niche role at the time and I enjoyed shaping it with my pharmacy technician hat firmly on, focusing the training around safe prescribing and administration. I enjoyed training the wider healthcare team and soon progressed to an EPMA lead role managing the EPMA team of pharmacy technicians, a nurse and an IT analyst. Alongside this role, I

completed a Postgraduate Certificate (PG Cert) in Healthcare Leadership which helped to underpin my passion for strong leadership, followed by a PG Cert in Psychiatric Therapeutics. Alongside EPMA, I took a dual role as Procurement Lead which, after years of being a pharmacy technician, opened my eyes to a whole new world of buying medicines, contracts and drug shortages. Pharmacy is never boring! After 15 years in a Trust, it felt like a good time to explore what my next challenge would be which brings me to the present day. I am undertaking a fellowship year with Health Education England as their first national pharmacy technician leadership fellow. It has given me exposure to education, training and workforce at national level as well as the opportunity to work with and learn from APTUK; development that wasn't always available at this level for pharmacy technicians before.

What keeps you awake at night?

Not much keeps me awake at night – 10pm and I'm out like a light! However, the pharmacy technician workforce shortage is something that worries me. To be part of initiatives to grow the workforce and raise awareness to attract people to the profession has been such a rewarding part of my fellowship so far.

What surprised you the most being a pharmacy technician?

What surprised me most about being a pharmacy technician is how little the role is understood by other healthcare professionals. Often when I'd visit wards I was mistaken for a pharmacist, when corrected, colleagues would be curious about what a pharmacy technician could do. It was almost always met with enthusiasm and in my experience other healthcare professionals were really interested in how we could help them with medicines and clinical queries – they just didn't know about us! It's exciting to see the profession evolve now with more healthcare colleagues recognising our contribution.

If you had the chance to do it all over again, what would you change?

I stayed at my Trust for 15 years and whilst I was incredibly fortunate to progress in my career there, I now realise that it compromised my perspective of the NHS across a wider landscape than secondary care alone. On reflection, I wish I'd have been braver and spread my wings earlier into other sectors, perhaps through secondment opportunities or a portfolio role.

What do you enjoy most about your role?

In my current fellowship role I enjoy being part of transformation projects that are shaping the education and training of pharmacy technicians, whilst the profession continues to develop at pace.

What's the best piece of career or workplace advice you have ever received?

That imposter syndrome affects almost everybody and it's not a reflection on your capability.

What would you be doing if you weren't a pharmacy technician?

I don't ask myself this question very often...but I'd like to think I would have pursued a career in Psychology (as long as I can still have a BNF)!

"I WAS UNSURE ABOUT MY
CAREER PATH, BUT I KNEW
I WAS INTERESTED IN
PHARMACY"

What do you think is the biggest issue currently facing pharmacy technicians?

That there aren't enough of us! And, opportunities to progress into senior posts. However, we are slowly seeing this change through the hard work of senior pharmacy technician leaders in positions of influence, APTUK, allyships and through initiatives like fellowships.

Has anyone influenced your career decisions if so, why?

I am incredibly grateful to have worked with brilliant people throughout my career so far. I have learned from them, taken their advice, observed their leadership styles, and been inspired by their passion. In terms of someone influencing my own career decisions I think I've always been quite open minded and independent which comes from my parents. Whatever grade I got or job I explored, they always said 'as long as you do your best'; there was never a pressure to pick a certain path. So in some ways, although they didn't influence the decision, they influenced the work ethic I carry with me; as long as I give any decision my best shot then I've done myself proud.

What do you do that supports equality, diversity, inclusion and professionalism?

I try to lead by example and never engage in behaviour that belittles or demeans people of a certain race, gender, ethnic background or sexual orientation. I hope that this empowers those around me to follow my example. Appreciating differences, learning about cultures and celebrating the parts of people that make them who they are whether that is colleagues or our patients, is essential in improving workplace culture and patient outcomes. I recently shared a little bit of my background for South Asian Heritage Month and was blown away by so many responses saying that they can relate to my experiences. Creating this space and participating in events is a great way to support EDI.

What does diversity and tolerance in practice look like to you?

For me, this is not just about accepting diversity, it's about standing up for others when they are being treated badly and calling out unacceptable behaviour. I have been in situations where a simple conversation to explain how someone's religious belief is influencing their decision and the language barrier was preventing this from coming across has helped to resolve the situation and educated someone in the process.

What has been the highlight of your career, so far?

Professionally, being part of a Trust wide Electronic Prescribing + Medicines Administration rollout; we were one of the first Mental Health Trusts to achieve a full rollout; to achieve something that reduced medication errors and made drug administration safer for patients makes me very happy. Very closely followed by this fellowship experience and presenting at Clinical Pharmacy Congress (CPC) which still hasn't sunk in!

Academically, achieving a Distinction for the PG Cert Psychiatric Therapeutics course which until recently was a course developed only for pharmacists. Widening access to programmes for pharmacy technicians is a step further in ensuring we have appropriate opportunities to learn side by side with the multi-professional teams we often work in.

What is at the top of your to-do list?

A holiday! The fellowship has been so challenging in all the best ways that I've become completely engrossed, so a recharge is long overdue.

When people look at you, what do you think they see?

I've been described as a swan many times; calm on the surface but paddling furiously below the water. I think it sums me up; although I'm not sure I have the elegance of a swan, just the frantic paddling!

What can you not get right, no matter how many times you try?

Being ok with not knowing it all. It doesn't matter how many times I tell myself it's ok to not have all the answers it still makes me uncomfortable. It keeps me open minded, curious and continually learning though, I just make it a little harder on myself!

"EXERCISE IS THE BEST WAY FOR ME TO UNWIND WHEN I'VE HAD A STRESSFUL DAY"

Where do you usually go/do when you have time off?

Exercise is the best way for me to unwind when I've had a stressful day. I recently started couch to 5k and feel the benefits physically and mentally already. Before the pandemic I was quite a spontaneous traveller; I'd book a last-minute city break and fly off solo, just me and my book. If all else fails, Netflix and chill is never a bad idea!

Who do you go to for advice or to bounce ideas off?

I suppose it depends on what advice I need. Mostly my line manager or mentor but other times my EPMA team if the idea would directly impact them. Initiating meaningful discussions with my team and empowering them to make decisions is really rewarding, sometimes the advice you need is that your idea isn't a great one – and this is ok! Being challenged by alternative perspectives is all part of the leadership journey; I have learned so much from my team and the leaders around me.

What simple thing at work sparks joy?

When a drug shortage is resolved, and I see the wholesalers van outside with the stock – best feeling ever!

What's the benefit of being a member of APTUK?

As part of my HEE fellowship I have been an honorary member of the Executive Committee for 5 months and in that time I have been able to observe just how much work goes on behind the scenes by our professional leadership body, from advocating for the profession at the highest level to achieve equity, to providing advice, training and networking opportunities to members. It's been exciting to have the opportunity to help support on key priorities as well as lead on a project around promoting the career.

What's next?

I am enjoying my fellowship with HEE and it has enabled me to work with and learn from key partners including APTUK, RPS, GPhC and NHSEI. I have been part of developing and leading national workforce transformation projects but still have a lot to learn. The last few months have given me a completely different perspective into leadership and exposure to a different side of the system; I hope that whatever my next challenge is I can take these skills with me and approach future roles with a wider vision of the healthcare landscape.

Evaluation Of The Pre-registration Trainee Pharmacy Technician (PTPT) Integrated Training Pilot

Background

In February 2020, 40 Pre-registration Trainee Pharmacy Technician (PTPTs) started a new national integrated training pilot for England. The pilot supported PTPTs in gaining cross-sector experience with a minimum of 12 weeks' experience in at least three different healthcare settings over two years.

Partnerships in the pilot consisted of healthcare settings within secondary care, community mental health, community pharmacy, general practice, clinical commissioning groups (CCGs) and care homes.

PTPTs in the pilot studied the new BTEC Level 3 Diploma in the Principles and Practice for Pharmacy Technicians qualification. The pilot was run by Health Education England (HEE) and funded by the NHS England's Pharmacy Integration Fund.

Evaluation of the Pilot

HEE commissioned the Centre for Pharmacy Workforce Studies at the University of Manchester to undertake the delivery of the PTPT Integrated Training Pilot.

This was to understand if the pilot achieved its intended benefits as shown in table 1, and to inform future PTPT recruitment and training. The evaluation was to look at the PTPTs' experiences of the cross-sector training programme and their learning under the 2017 GPhC Initial Education & Training standards (IETs) for pharmacy technicians.

The findings from this evaluation are intended to be used to inform future PTPT training and future roll-out. The evaluation team's objectives were to carry out research to:

- Explore the extent to which the pilot has achieved its intended benefits (see table 1)
- Describe the lived experiences of PTPTs and their supervisors of the integrated training pilot
- Describe how supervision was delivered during the pilot
- Explore the support that PTPTs received during their training
- Identify challenges in implementing the pilot
- Explore the impact of COVID-19 on the pilot

Evaluation Methods

The evaluation team utilised a mixed-methods approach, using qualitative interviews, quantitative surveys, and documentary analysis.

Semi-structured interviews took place with the PTPTs from August – October 2021, exploring their learning and practice experiences over their two-year training.

Semi-structured interviews also took place at the same time with the educational and practice supervisors, and explored the supervisors' views on supervision delivery, the impact on the PTPTs in terms of developing skill sets to meet operational needs and the benefit of cross-sector placements.

Interviewees were from the following sectors: GP practices, community pharmacy, CCGs, and hospital trusts.

A second survey took place in January 2022 to understand PTPTs' career intentions, and preparedness to practice. It was completed by the pilot PTPTs and a cohort of single-sector PTPTs for comparison.

External Challenges

The integrated training programme was developed under 2017 GPhC IET standards that combine both the competency and knowledge-based within one qualification/course. As earlier training programmes were based on the previous IETs this meant that all involved were navigating their way through a new programme and changes were being made.

The COVID-19 pandemic had a significant impact on the PTPTs' day-to-day work and training in all the sectors. Due to staff shortages caused by sickness and redeployment, or changes to working practices in lockdown. COVID-19 affected the overall delivery and experience of the pilot, particularly through the lockdowns in 2020.

Findings

✓ The pilot achieved most of its intended benefits.

PTPTs reported an improved understanding of how different sectors worked; they understood transfer of care issues and the patient journey. PTPTs also stated having good opportunities to engage with a wide range of healthcare professionals. PTPTs said that they had increased confidence in carrying out different tasks in the different sectors.

“Having the experience of the different sectors helps me going forward to think outside the box, as it were, that whatever line of work I go into, being a pharmacy technician, I now have experience where I can think, well, hang on, let's look at this from the community perspective. Or let's look at this from GP perspective, or let's look at this from the hospital perspective. What impact am I going to have as a technician if I go in and make the decisions we make?” (PTPT on the Integrated Training Pilot).

Table 1: Intended benefits of the PTPT Integrated Training Pilot include:

- Contribution to the development of a flexible pharmacy technician workforce, better prepared to deliver enhanced multi-sector healthcare system services for patients and the public
- Equipping PTPTs with a broader skillset, allowing them to better support service delivery to patients and the public across all healthcare systems
- Improved understanding of the transfer of care issues and how to support patients as they transition between care settings
- Enhanced relationships between partners supporting the development of primary care networks and integrated care systems
- Increased awareness of barriers and difficulties with communication and transfer of care and how to resolve them

Table 2: Comparing cross-sector and single sector PTPTs' preparedness to practise in different sectors

Cross-sector	Single-sector PTPTs	Cross-sector PTPTs
Prepared	12	26
Unprepared	13	1
Neither	14	2
NHS Community Health Trust	Single-sector PTPTs	Cross-sector PTPTs
Prepared	17	20
Unprepared	14	3
Neither	8	6
Community Mental Health NHS Trust	Single-sector PTPTs	Cross-sector PTPTs
Prepared	10	15
Unprepared	17	9
Neither	12	5
General Practice	Single-sector PTPTs	Cross-sector PTPTs
Prepared	12	19
Unprepared	15	2
Neither	12	6
Primary Care Network	Single-sector PTPTs	Cross-sector PTPTs
Prepared	9	18
Unprepared	18	3
Neither	12	7
Care Home	Single-sector PTPTs	Cross-sector PTPTs
Prepared	21	9
Unprepared	6	9
Neither	12	10
Clinical Commissioning Group	Single-sector PTPTs	Cross-sector PTPTs
Prepared	7	8
Unprepared	23	7
Neither	9	13

Agreed/strongly agreed with statements = "prepared" Neither agree nor disagree = "neither"
Disagree/strongly disagree = "unprepared"

This was also supported by discussions from the supervisors and by the second survey, which showed that cross-sector PTPTs (pilot cohort) felt significantly more prepared than single-sector PTPTs to work in other sectors. See table 2.

• Placement structure can be flexible

Placement structure varied in different partnerships, with PTPTs placed in block placements (3-6 months), split-week placements (1-2 days per week), or a combination. However, there was no preference for one type of placement structure, with local context and need directing the patterns. It is important to also mention that PTPTs also had their own preferences, with split weeks suiting some but not others.



✓ The need for dedicated supervision time is required to co-ordinate the PTPTs' training and learning

PTPTs received support from educational and practice supervisors within the placements, more regular communication between educational and practice supervisors would have helped to ensure a more coordinated approach to learning and supported the learning plans.

PTPTs had an array of different experiences and learning in the

placements, often due to the lack of understanding of what PTPTs were, what they could do, and what the overall programme expectations were.

PTPTs felt supported by college tutors and assessors. However, many did most of the coursework in their own time, as there was little or no protected time during placements, and this was different between sectors.

Support from HEE regional facilitators were seen as essential to educational supervisors, who saw them as their go-to person for any questions, issues, or concerns.

Recommendations

To ensure the integrated training model can be implemented at scale

There needs to be a clear understanding of what the programme will deliver for all those involved, so expectations need to be effectively managed for organisations and individuals involved by clearly setting out:

- PTPT programme objectives to help structure learning plans whilst allowing for flexibility to accommodate for PTPTs' learning needs and variation of placement combinations that suit the needs of different sectors and partnership arrangements.
- What HEE funding covers and what support HEE provides.
- Training, resource and time commitments from the employing organisation and placement partners, including supervisors in all settings.
- The role of pharmacy technicians (which PTPTs are training to become), and what PTPTs' level of knowledge and competence should be at various stages of the programme, and what they are expected to achieve upon completion of the programme.

Summary:

Since launching the integrated training programme, HEE have been working closely with stakeholders to improve the experiences of trainees and supervisors as new cohorts have joined the integrated (cross-sector) pharmacy technician training programme.

HEE have invested £16 million in cross-sector PTPT training in England over the last 2 years, this funding forms part of a national pharmacy technician workforce strategy which looks to secure more pharmacy technicians to meet the workforce demands across all sectors.

HEE has continued to have regional facilitators to support employers and supervisors and there is flexibility in the number of partners to support better co-ordination of learning, communication, and collaboration.

Learning from the experience and the challenges have been shared and the regional facilitators provide one-to-one support to supervisors.

The full report and executive summary are available on the Health Education England website.

1. Available at: <https://qualifications.pearson.com/en/qualifications/btec-specialist-and-professional-qualifications/health-optical-and-pharmacy/btec-specialist-principles-and-practice-for-pharmacy-technicians-13.html>

Direct link to Exc Summary:

https://www.hee.nhs.uk/sites/default/files/documents/Executive%20Summary%20-%20Evaluation%20of%20the%20Integrated%20PTPT%20Training%20Pilot%20-%20May%202022_0.pdf

Direct link to Full Report:

https://www.hee.nhs.uk/sites/default/files/documents/Evaluation%20of%20the%20Integrated%20PTPT%20Training%20Pilot%20-%20May%202022_0.pdf



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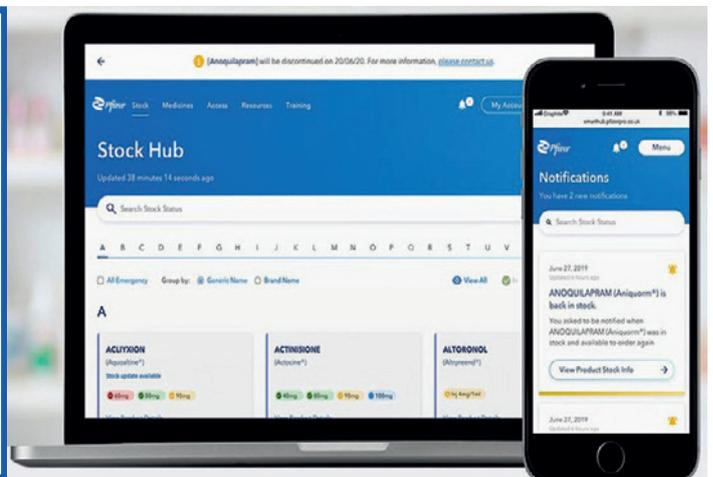
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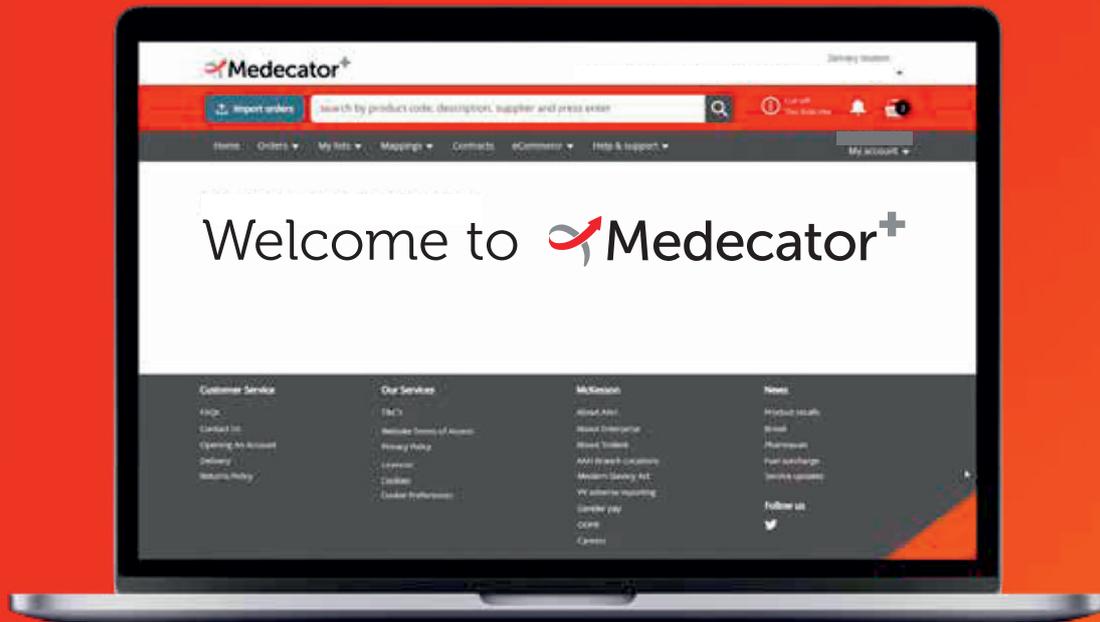
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