

# Case Study: PCN Clinical Pharmacist development pathway

## CHALLENGE

While positive steps were being taken nationally to introduce clinical pharmacists under the Additional Roles Reimbursement Scheme (ARRS), General Practice was lacking the training and support infrastructure to embed newly recruited clinical pharmacy teams.

Pharmacists underwent an 18-month primary care pathway course by the Centre of Postgraduate Pharmacy Education (CPPE), endorsed and mandated by Health Education England for pharmacists joining the PCN workforce. However, the experience of both the clinical pharmacists and GP practices led to a degree of variability in the initial experience of clinical pharmacists joining the PCNs.

Without adequate support and training, there was a genuine risk of a poor experience for both PCN and GP practice staff, which could lead to poor retention of the PCN workforce and GP practices continuing to feel the burden of the workload of patients, who ultimately had unmet needs in medicines management.

## SOLUTION

A plan was needed to develop an in-house training workforce using pharmacy staff, to be able to deliver a quality induction to new staff and continued professional development to peers and junior colleagues. This was in addition to delivering PCN priorities and patient care.

In September 2021, Hounslow Consortium team established a pharmacy team hierarchy consisting of clinical pharmacists with post-graduate qualifications, either from a hospital or GP practice origin, and new pharmacists entering the PCN training programme. A head pharmacist was appointed for the team leading a group of senior pharmacists. The senior team had many years of experience working as clinical pharmacists and were independent prescribers with line management experience.

The head pharmacist was tasked to set a structure for pharmacists, including an in-house training pathway. In scoping the entry level for an appropriately skilled PCN pharmacist to work in GP practices, it was identified that the CPPE course was insufficient and there was a lack of capacity by GPs to deliver critical training. Plus, the PCN pharmacists had different learning styles, which meant that learning from GP teams was not always the right learning environment. The PCNs invested in training them in-house in clinical pharmacy and people management.

Once the hierarchy was established, pharmacists had clear mentorship and supervision, which also included GPs as part of the supervision. Through a combination of the CPPE course, GP supervisor and pharmacy-led training, the development of skilled PCN staff started to grow.

Training and supervision were planned to incorporate mandatory HEE and organisational training for each pharmacist. Linking in with the local training hubs was important to ensure continued professional development of individuals was addressed. This included line management, train the trainer and specialist clinical areas such as mental health would be accessed.

## OUTCOME

Since a greater support structure for clinical pharmacy teams was introduced, there has been a clear increase in positive feedback from both staff in monthly 1:1s and from GP practices. There are many cases of clinical pharmacists showing good development who, when promoted, excelled further with projects and tasks.

There is also a stronger peer support network among pharmacists. Having an in-house training structure where pharmacists are trained (not exclusively) by pharmacists has brought a positive experience for both PCN pharmacists and GP practices. Joanne Peh, Head of Hounslow PCN Pharmacy and Social Prescriber Services said “staff morale is better. Good peer support across the PCN clinical pharmacy teams is having a positive influence not only on new pharmacists but also pharmacists who need more support. We’ve created a learning environment aligned with junior doctors’ development, and it’s really working well”.

Leadership and management development

In 2022, we promoted seven clinical pharmacists who underwent management training through mentorship with senior pharmacists and formal Trust essential management training (6month course). Each pharmacists were given on-the job training experience by looking after a clinical pharmacist or technician. They also joined a senior pharmacist to conduct NHS recruitment. Seniors are also participate in delivering in-house training of clinical staff including trainee pharmacists, pharmacists and pharmacy technicians. This is evidenced with conducting teaching sessions which are observed by seniors and feedback provided.

The benefit has also been seen by patients, who recognise the clinical pharmacists as an important part of primary care teams and medicines specialists.Examples of feedback from patients includes:

“ She has been very helpful she listened and understood my query. Very professional approach and very pleasant and caring lady I will definitely recommend pharmacist consultation.- Hounslow patient ”

“ Very easy to talk to and get along with. She helps to put you at ease. I'm not an easy person to get along with but she is very patient and understanding with me.- Hounslow patient ”

“ Amazing pharmacist helped me a lot with my enquiries and as she spoke my native language she sorted out all my repeated prescriptions and medication. I'm forever grateful to her.- Hounslow patient ”

“ Our clinical pharmacist has been excellent ever since she joined us. She's very punctual and pleasant and she keeps her knowledge up to date with local and national guidelines. She consults us as GPs regularly with regard to the case management of her patients and their follow-up plan. Her mannerism with patients and practice staff is excellent as well. We're very happy to have her on our team- Dr Dr Muhammad Shuaib ”

“ As always very professional and polite. Listened to my queries and discussed many different issues with great attention.- Hounslow patient ”

Going forward, there remain opportunities which will help the team become stronger. Joanne Peh, Head of Hounslow PCN Pharmacy and Social Prescriber Services, said “having a good selection of health professionals who can train in-house helps. Currently we are developing ways our GP and nurse educators can support pharmacists’ training on key long-term conditions. One option we may explore is to provide external courses on train-the-trainer for senior pharmacists. This forms the question of funding post-CPPE courses as part of staff continued CPD and career progression.

“Another important area is resilience training and support. Pharmacists are not prepared sufficiently to do consultations with patients who have complex needs, such as those with dependencies on potentially addictive prescriptive medicines. Mentoring with psychologists has been identified as an action plan for the future”.



Hounslow Consortium provides professional support to the PCNs and their member practices. It works across the full portfolio of General Practice services, with a primary focus on supporting the delivery of the PCN contract and achieving the best outcome for practices, patients and the workforce.

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HRCH provides community health services for around 523,000 people registered with GPs in the London boroughs of Hounslow and Richmond, but also serves a wider population across south west London for a range of more specialist services.

HRCH has hosted Hounslow Consortium and its five PCNs, forming its Primary Care Directorate, since since October 2021.