The redeployment of 2019/20 Pre-registration Pharmacists to Nightingale Hospitals – Guidance for Chief Pharmacists and Pharmacy Service Leads

Aim of this guidance:

To provide further guidance to support Trusts in decision making about the release of pre-registration pharmacists (PRPs) to work at Nightingale Hospitals.

This guidance should be used as supplementary to the following:

- Supporting the COVID-19 response joint guidance issued by Health Education England (HEE), Heath Education and Improvement Wales, and NHS Education Scotland
- Guidance provided for PRPs and their tutors by the General Pharmaceutical Council (GPhC)
- Guidance principles for all pre-registration pharmacy trainees issued by HEE

Recommended essential criteria PRP for redeployment to Nightingale Hospitals:

- ✓ Those who have volunteered for redeployment
- ✓ Satisfactory or on-track for a satisfactory 39-week GPhC Progress Review
- ✓ Met the requirements of a HEE passport of information, logs and activities by having demonstrated competence against each e.g. dispensary logs, checking logs
- ✓ Demonstrated competence in tasks and activities identified as being suitable for PRPs to undertake at a Nightingale Hospital
- ✓ Those with outstanding GPhC Performance Standards that the Educational Supervisor (GPhC recognised tutor) and PRP feel could be met during an external placement at a Nightingale Hospital
- ✓ Trained appropriate to the clinical service model e.g. Technical services trained PRPs or those who have undertaken a technical services rotation
- ✓ PRPs able to commit to working the shift patterns of the Nightingale
- ✓ PRP that has been identified as feasible for deployment based on individual PRP's circumstances e.g. transport, accommodation, caring responsibilities, those living with people who need to follow stringent social distancing/shielding

Recommended exclusions for PRP redeployment to Nightingale Hospitals:

- PRPs who are currently requiring additional support, e.g. being managed under the Trainees Requiring Additional Support (TRAS) process
- Those with physical and or mental health and wellbeing conditions that could be exacerbated by an external placement to a Nightingale Hospital
- Those with outstanding GPhC Performance Standards that the Educational Supervisor (GPhC recognised tutor) does not feel could be met during an external placement to a Nightingale Hospital
- PRPs unable to commit to working the agreed shift pattern
- Not met the requirements of the HEE passport of information, logs and activities
- PRPs who are at increased risk from coronavirus

How redeployment to a Nightingale Hospital should be managed:

- Treated as an external placement or rotation as part of a Trust pre-registration pharmacist training programme
- Objectives and learning outcomes for a Nightingale Hospital placement to be completed by PRPs
- HEE passport of information, logs and activities to accompany the PRP as evidence of competence
- Duration of placement recommended to be limited to a maximum of 8 weeks based on time remaining in the pre-registration year. Nightingale Hospitals do not need to be approved for pre-registration training by the GPhC unless the placement duration exceeds 10 weeks.

Trust responsibilities in the redeployment of PRPs to a Nightingale Hospital include:

- Assessing individual PRPs suitability to be redeployed based on recommended criteria and exclusions
- Completing the HEE passport of information, logs and activities prior to the PRP being redeployed
- Maintaining Educational Supervision (GPhC recognised tutoring) during the period of redeployment. This can be provided remotely e.g. via video conferencing.
- Maintaining regular contact with the PRP during the period of redeployment to support the mental health and wellbeing of the PRP
- Completing GPhC 39-week Progress Reviews as planned
- Supporting PRPs to complete COVID-19 related mental health and wellbeing training before redeployment

Nightingale Hospital responsibilities in the redeployment of PRPs to supplement their workforce include:

- Induction of PRPs
- Duty of care to physical health of PRP including provision of appropriate PPE and training on how to use PPE safely and effectively in the placement setting
- Identification of Practice Supervisors who have undertaken relevant training and are aware of their roles and responsibilities
- Ensuring PRPs are aware of the names and location of Practice Supervisors
- Developing learning outcomes and objectives for PRP placements
- Sharing with HEE the roles and tasks PRPs are allocated to via HEE Regional Deans
- Allocating tasks and activities to PRPs that align to the PRPs level of competence outlined in the HEE passport of information, logs and activities, providing training to enable PRPs to undertake tasks of roles assigned
- Supporting PRPs' mental health and wellbeing
- Raising concerns about PRPs' performance, competence, behaviour or mental health and wellbeing, with their Educational Supervisors (GPhC recognised tutors)

HEE responsibilities in the redeployment of PRPs to a Nightingale Hospital include:

- Drafting learning outcomes and objectives for a Nightingale Hospital placement (Appendix 1)
- Creating a HEE passport of information, logs and activities to accompany redeployed PRPs (Appendix 2)
- Making recommendations to Nightingale Hospitals on suitable roles for PRPs to undertake
- Providing training for any untrained Practice Supervisors
- Acting as the Educational Programme Director for placements at a Nightingale Hospital (Appendix 3).

Supervision & Governance arrangements – key principles:

- Practice supervisors to be identified for the areas in which the PRPs will work and the names of these individuals provided to the PRP
- Practice supervisors to be aware of their roles in supervising the PRP and being responsible for their training
- Educational Supervisors (GPhC recognised tutor) to be retained by PRPs during the period of redeployment to a Nightingale Hospital
- Regular contact to take place between the Educational Supervisor (GPhC recognised tutor) and the PRP during the period of redeployment
- GPhC 39 week Progress Reviews to take place as and when feasible based on guidance provided by the GPhC
- Practice Supervisors to alert Educational Supervisors (GPhC recognised tutor) to concerns relating to PRPs performance, competence, behaviour or health and wellbeing during their placement at a Nightingale Hospital
- Learning outcomes and objectives for the Nightingale Hospital placement to be in place
- Mental health and wellbeing of PRPs in this specialist facility to be supported:

    ✓ The NHS has launched a mental health hotline for staff tackling COVID-19. This is part of the extensive work the NHS is doing to help provide expert care to both patients and health and care staff during the COVID-19 pandemic. Find out more here

Educational Supervision during redeployment

- Educational supervision should continue to be provided by the host organisation during redeployment. It is recognised that Trusts are under considerable workforce strain and that Educational Supervisors (GPhC recognised tutors) might be absent from work due to sickness, self isolation or shielding requirements, however in the latter two cases, Educational Supervision can be provided remotely e.g. via video conferencing. In circumstances where Educational Supervisors have insufficient time for their tutoring role, it is recommended that more experienced Educational Supervisors assume Educational Supervision for more than one PRP or the PRP Educational Programme Director (a nominated training lead) at the Trust takes over the tutoring role for one or more PRPs.

- It is essential that the Educational Supervisor or an equivalent at the host organisation who has oversight of the PRP's performance and progress in developing competence against the GPhC Performance Standards, assesses the PRP at 39 weeks and is responsible for signing off the PRP at the end of the 52 weeks' of pre-registration training.

- It is considered essential at this time of uncertainty around provisional registration that is yet to be decided upon by the GPhC that the responsibility for the assessment of competence and ultimate decision around suitability to join the provisional pharmaceutical register is undertaken by staff with oversight of the PRP's training and this role cannot be delegated outside of the host organisation.

Appendix 1

Learning Outcomes for Pre-registration Training within a Nightingale Hospital

For each area of work, a list of learning outcomes or objectives has been provided based on the Health Education England London and South East Pharmacy regional pre-registration handbook.

1. Dispensary Services

Dispensary services are at the core of healthcare organisations and effective medicine supply is essential to support the delivery of optimal patient care and medicines optimisation.

Dispensary Services Learning Outcomes	
All trainees are encouraged to discuss with their supervisors where these learning outcomes can be achieved.	
1.1.	To gain an appreciation of the differing prescribers and prescriptions used within the hospital setting including in-patient prescriptions
1.2.	To follow Standard Operating Procedures (SOP) for processing both in-patient prescriptions. This includes: ➢ Receipt of prescriptions ➢ Screening and assessing the prescriptions. This is to include use of formularies. ➢ Dispensing. ➢ Documentation kept and why. This includes prescriptions, drug charts, requisition sheets and controlled drug registers.
1.3.	To demonstrate skills associated with the dispensary process from receipt of a prescription or request to supply and issue to the ward.
1.4.	To advise on the legal and procedural requirements for the receipt, dispensing, supply and destruction of all medicines, including controlled drugs.
1.5.	To follow the procedures agreed for dealing with prescriptions that cannot be dispensed at the time that they are prescribed, with special emphasis on determining if urgent resolution is required or not (i.e. is an alternative required, bought in specially), communication with pharmacist, purchasing office and healthcare staff.
1.6.	To communicate effectively with the prescriber and nursing staff regarding queries which arise, relating to in-patient and ward supplies. If unable to solve queries, know who to refer to and do so promptly.
1.7.	To demonstrate the ability to prioritise workload according to local needs, including considerations required for staffing pressures.
1.8.	To know the Standard Operating Procedures (SOPs) to deal with an exceptional circumstance in the dispensary (e.g. failure of the dispensary-based computer system)
1.9.	To know the error monitoring policy, including internal errors (i.e. ‘near misses’) and know the feedback system and learning gained from this process.
1.10.	To apply the concepts of quality assurance and quality standards to dispensary services.
1.11.	To know the use, benefits and risks associated with the Emergency Drug Cupboard/Store and what medication types are kept there and why.
1.12.	To demonstrate a knowledge and understanding of the systems used to deliver medicines to in-patients.

1.13.	To communicate effectively with and refer to colleagues and fellow health care professionals to ensure the safe and effective management of patients.

2. Procurement and Drug Distribution Services

It is important, for pre-registration pharmacists to appreciate and understand how the flow of medicines works in hospitals from purchasing to receipt to dispensing/supply. They need to develop an understanding of the key drug procurement processes and the medicines supply chain in the NHS.

Procurement and Drug Distribution Services Learning Outcomes	
All trainees are encouraged to discuss with their supervisors where these learning outcomes can be achieved.	
2.1	To describe the principles, practices and purpose of stock control including: ➢ Re-ordering depleted stock from a variety of suppliers ➢ Re-ordering items out of hours and obtaining them without delay ➢ Stock rotation and stock checks ➢ How to receive incoming stock ➢ Communication of issues relating to the stock to the supplier of the product ➢ Documentation of delivery notes, invoices and credit notes ➢ Safe use of controlled drugs
2.2	To gain an understanding of NHS supplies and contracts
2.3	To identify appropriate storage conditions for medicines and be aware of the medicine cold chain.
2.4	To describe the different procedures and methods for the supply of stock items to wards e.g. topping up medicines, signed orders, verbal orders and to-follow-items.
2.5	To describe the procedures for handling a drug alert/product recall.
2.6	To comply with legislation and local policy surrounding the dispensing and prescribing of medicines that do not have a product licence, are being used off-label or are used according to protocol if part of a clinical trial.
2.7	To comply with the policy and procedures for ensuring the accountability and security of drugs in transit and the functions and responsibilities of messengers/porters/drivers who transport medicines including controlled drugs.
2.8	To appreciate the legislation around waste management.
2.9	To perform competently a stock top-up including the issue and preparation of stock delivery.
2.10	To dispose competently of unwanted medicines, to include the destruction of controlled drugs under supervision
2.11	Competently order two items of stock outside the normal top-up system.
2.12	Competently receive and put away two wholesale orders including a fridge item and controlled drug.
2.13	Follow one drug from purchasing, receipt and to dispensing. *Performance Standards: A2.4, C1.9*
2.14	Deal competently with a minimum of two out-of-stock items from different areas (e.g. ward stock item, patient item).

3. Clinical Pharmacy

Clinical pharmacy, defined as *"promoting rational use of drugs competently and responsibly to patients, taking into account their social, socio-economic, psychological and biological aspects in order to make positive change in their daily lives"* (PJ, 2016) is of great importance in the patient healthcare pathway and therefore during pre-registration training.

- As the pre-registration progresses, trainees are required to become more involved, carrying out clinical roles under supervision. Trainees will work closely with pharmacy staff of all grades and differing specialist knowledge.
- The GPhC registration assessment has evolved into a knowledge-application exam rather than a knowledge-recall exam and so clinical pharmacy knowledge and its application is essential to be developed by trainees.

Clinical Pharmacy Learning Outcomes	
All trainees are encouraged to discuss with their supervisors where these learning outcomes can be achieved.	
3.1	To have a working knowledge of the trust's clinical pharmacy standards/policy and be able to apply them to clinical practice.
3.2	To have a working knowledge of the BNF, summary of product characteristics (SPC) and hospital clinical resources. Examples of hospital clinical resources include: ➢ Prescribing guidelines, including local and national (e.g. NICE) ➢ Local formulary including process for request / one off supply of non-formulary and unlicensed drugs ➢ Relevant clinical protocols ➢ Therapeutic Drug Monitoring policies and procedures ➢ Renal impairment adjustment guidelines (e.g. Renal Drug Database) ➢ Use of named patient & unlicensed drugs ➢ Administration of IV drugs (Medusa guidelines) ➢ High Cost Drugs (PBR Ex) ➢ Safe and secure handling of medicines ➢ Ward stock locations
3.3	To utilise ward resources and the communication network that exists at ward level to ensure high quality patient care.
3.4	To demonstrate prioritisation of workflow including that of patient medicines management problems (both clinical and non-clinical issues e.g. supply).
3.5	To identify patients with medication related problems that require the clinical input of a pharmacy team member.
3.6	To safely and effectively screen prescription charts or electronic prescribing under supervision to ensure appropriate treatment, including doses, interactions, monitoring and legality and resolve arising issues. Consider the use of an appropriate clinical checklist
3.7	To demonstrate how to utilise supplementary charts or electronic systems (e.g. observation charts, blood glucose monitoring).
3.8	To apply and identify issues with patients' blood and monitored parameters (e.g. blood pressure, heart rate, temperature, full blood count, blood glucose, renal and hepatic function) to ensure safe and effective treatment.
3.9	To prioritise and resolve any issues arising from screening prescriptions through communication with the multi-disciplinary team
3.10	To communicate effectively (and negotiate as required) with and refer to colleagues and fellow health care professionals to ensure optimal patient management.

3.11	To identify and provide counselling to patients who require help with the administration of their medicines or who have been prescribed new medicines, supported by the MRCF tool - including special formulations, the use of devices, and patient information leaflets.
3.12	To provide both active and passive medicines information, advice and prescription queries to other healthcare professionals (i.e. part of the multidisciplinary team (MDT)) e.g. adverse effects, medication and patient/disease interactions, contra-indications, mechanisms of action, optimum drug formulation, appropriate route of administration, nil-by-mouth patients, and patient's blood considerations.
3.13	To apply the principles of pharmacokinetics to individualise patient therapy, including formulation changes e.g. changes in bioavailability
3.14	To monitor the outcomes of medication therapy for effectiveness, adverse reactions and interactions.
3.15	To endorse the patient's inpatient chart (including electronic prescribing if used) as per trust policy.
3.16	To know the process of how to document clinical contributions to care, including recommendations accurately and clearly in the patient's notes.
3.17	To understand the importance of data protection & confidentiality within daily practice and has received training.
3.18	To demonstrate awareness of local clinical governance / risk structures, including how to report errors/incidents/poor practice at a local level.
3.19	To demonstrate awareness of local polices relating to safety alerts including: ➢ High dose morphine/diamorphine ➢ IV potassium policy and guidelines
3.20	To demonstrate awareness of high-risk drugs and the policies and procedures that are associated with the prescribing, screening, dispensing, checking and administration of them.
3.21	To apply clinical pharmacy skills to different patient groups.
3.22	To provide pharmaceutical patient care (under supervision) in preparation for practice, to consolidate knowledge and skills.
3.23	To review patients' therapy/management with reference to national guidance (e.g. NICE, etc.) showing how these link to local trust policy. These reviews could include: i. a patient in which Therapeutic Drug Monitoring (TDM) is required ii. a patient whose therapy includes parental therapy and its associated pharmaceutical input iii. a patient relating to the therapeutic areas of the GPhC registration assessment framework, to include Critical Care & High Dependency, Infections and Palliative Care

Appendix 2

Health Education England

Training Passport for Pre-registration Pharmacists working at Nightingale Hospitals

	Name	Contact Details (Email and Phone)
Pre-registration Pharmacist		
Employing NHS Organisation		
Educational Supervisor (GPhC recognised tutor) or representative from Employing NHS Organisation		

Pre-registration Pharmacist Photo Upload	

Tripartite Training Agreement for Pre-registration Pharmacists at Nightingale Hospitals

This agreement is between the Pre-registration Pharmacist (PRP), their Educational Supervisor (GPhC recognised tutor), on behalf of their employing NHS organisation, and the Nightingale Hospital and should be discussed before the period of redeployment commences.

Outlined below are a series of shared commitments to be agreed by the employing NHS organisation, the Nightingale Hospital and the Pre-registration Pharmacist. All parties must read and sign it to confirm commitment to comply with the joint arrangements, undertakings and responsibilities described.

Employing NHS organisation:

During the period of redeployment, we commit to:

- Providing evidence of competence by completing this passport
- Providing educational supervision via the existing Educational Supervisor (GPhC Tutor) or another suitably trained individual if this is not possible
- Maintaining regular contact and communication with the PRP via the Educational Supervisor to support mental health and wellbeing and to check progress against the educational programme
- Completion of the GPhC 39 week Progress Review

The Nightingale Hospital:

During the period of redeployment, we commit to:

- Treating PRPs in a professional manner
- Ensuring that PRPs only practice to their level of competence and are always adequately supervised
- Providing induction into and objectives and learning outcomes for the areas in which they will be working
- Identifying Practice Supervisors in the areas in which PRPs will be working, and that they will have undertaken relevant training and are aware of their roles and responsibilities
- Allocating tasks and activities that align to levels of competence of PRPs, providing training to enable them to undertake the tasks of the roles assigned
- Providing a mechanism for allowing a trainee to give feedback on their experiences during their period of redeployment
- Providing support around mental health and wellbeing
- Raising any concerns about performance, competence, behaviour or mental health and wellbeing of a PRP with their Educational Supervisor and/or the employing NHS organisation.

Pre-registration Pharmacist:

During the period of redeployment, I commit to:

- Recognising that these are unprecedented times and that I will be required to adopt a flexible mindset throughout the period of redeployment
- Being pro-active in seeking learning opportunities and undertaking regular reflection on learning and experiences
- Striving to complete the objectives and learning outcomes provided
- Gathering evidence of competence for any outstanding GPhC Performance Standards for review by my Educational Supervisor
- Adhering to the standard operating procedures of the Nightingale Hospital
- Being respectful and prepared to learn from colleagues at all levels and backgrounds
- Being a reliable and trustworthy member of the Nightingale Hospital pharmacy team and endeavouring to contribute to the overall goals and work targets of the pharmacy team
- Being actively aware of my mental health and wellbeing before and during redeployment. (Useful supportive information can be found here).
- Raising any complaints or concerns you have about your redeployment, that cannot be resolved locally, with the Health Education England Pharmacy team

	Signature and Date
Pre-registration Pharmacist	
Educational Supervisor (GPhC recognised Tutor) from Employing NHS Organisation	
Chief Pharmacist/Pharmacy Service Lead, Nightingale Hospital	

Dates of Redeployment Placement:	

Trainees will be covered under NHS indemnity arrangements in respect of those patients of the Nightingale Hospital to whom provision of care and treatment is provided.

Accreditation checklist for Pre-registration Pharmacists redeployed to Nightingale Hospitals

The checklist below has been created to demonstrate to Nightingale Hospitals the level of competence and capability of redeployed Pre-registration Pharmacists (PRP) in tasks and activities that may be of relevance to the external placement they will be undertaking.

Please note that it is recommended that PRPs who have not yet met the mandatory requirements included within the below checklist are excluded from redeployment.

Activity/Competence/Task	PRP assessed as competent	Date
Dispensary Services		
Mandatory Competently completed an evidence log of a minimum of **200 dispensed** items verified by a supervising pharmacist which **must** have included the following: • Inpatient items • Controlled drug items • Items that require dose calculation e.g. liquids, low molecular weight heparins etc.	Educational Supervisor details: Name: Signature:	
Not Mandatory Competently completed an evidence log of a minimum of **200 checked** items verified by a supervising pharmacist which **must** have included the following: • Inpatient items • Controlled drug items • Items that require dose calculation e.g. liquids, low molecular weight heparins etc. • Items with variable dosing regimens e.g. steroids, amiodarone etc.	Educational Supervisor details: Name: Signature:	
Mandatory Competently **supplied medicines from a drug chart** to meet locally determined numbers, evidence for which will have been verified by a supervising pharmacist	Educational Supervisor details: Name: Signature:	

Mandatory Competently **labelled in-patient medicines** to meet locally determined numbers, evidence for which will have been verified by a supervising pharmacist or pharmacy technician	Educational Supervisor details: Name: Signature:	
Mandatory Competently undertaken **Transcribing for Supply** (the ordering of medicines/products for individual patients from a prescription that has been clinically screened by a registered pharmacist) to meet locally determined numbers to include: ➢ Reviewing patient medication records and assessing the patient's current supply ➢ Transcribing legibly and accurately medication orders with instructions for labelling so that the medicines can be dispensed for the patient.	Educational Supervisor details: Name: Signature:	
Management of Controlled Drugs		
Mandatory Competently completed an evidence log of a minimum number of **dispensed** controlled drug items to meet a locally determined numbers verified by a supervising pharmacist	Educational Supervisor details: Name: Signature:	
Mandatory Competently carried out the receipt and supply of controlled drugs for a hospital	Educational Supervisor details: Name: Signature:	
Mandatory Competently carried out the correct and legal destruction of controlled drugs in a hospital under supervision	Educational Supervisor details: Name: Signature:	
Mandatory Competently processed returned patient's own and ward controlled drugs in a hospital	Educational Supervisor details: Name: Signature:	
Mandatory Competently completed a CD check on wards and theatres under supervision	Educational Supervisor details: Name: Signature:	
Procurement and Drug Distribution Services		
Mandatory Competently performed a minimum of 2 stock top ups including the issue and preparation of stock delivery	Educational Supervisor details: Name: Signature:	

Mandatory Competently disposed of unwanted medicines on 2 occasions	Educational Supervisor details: Name: Signature:	
Mandatory Competently processed and ordered 2 items of stock outside of the normal top up process	Educational Supervisor details: Name: Signature:	
Mandatory Competently received and put away two wholesale orders including a fridge item and Controlled Drugs	Educational Supervisor details: Name: Signature:	
Mandatory Competently dealt with a minimum of two out of stock items from different areas (e.g. ward stock item, patient item)	Educational Supervisor details: Name: Signature:	

Adapted from: Barts Health NHS Trust Pre-registration Trainee Pharmacist Medicines Management Passport Programme and St George's University Hospitals NHS Foundation Trust Accreditation Passport Programme for Pre-Registration Trainee Pharmacists

Appendix 3:

Definitions:

Educational Programme Director/Trust Training Lead

- An Educational Programme Director (EPD) in pharmacy oversees one or more entire training programmes locally, regionally, or both, developing and implementing programmes together with external bodies and local teams. An individual may be the EPD for more than one programme. The EPD ensures that quality criteria are met, including resource, appropriately trained supervisors, possibly selection of candidates, monitoring or progress and equal opportunities.

Practice Supervisor (rotation/placement trainer)

- A Practice Supervisor in pharmacy is someone who is selected, appropriately trained and responsible for overseeing a specified trainee's work and providing developmental feedback during a period of training. This role requires appropriate assessment skills.
- Practice supervisors will support learners to identify opportunities for learning in the workplace and provide supervision of trainees on a day-to- day basis, identifying trainees requiring additional support. Practice supervisors are involved in and contribute to a work-based learning culture.
- Practice Supervisors are:
  - Appropriately trained within their section or rotation
  - Responsible for day-to-day supervision and training of PRPs
- Practice Supervisors:
  - Understand the training and learning needs for the PRP (objectives that they are to meet during the rotation/placement)
  - Provide objectives for the PRP to meet (daily if needed)
  - Provide developmental feedback to the PRP
  - Sign-off PRP training and competency logs
  - Sign/authenticate evidence for PRP portfolio.

Please note providing day to day supervision does not mean that the trainee and their Practice Supervisor must be together all day. The trainee and Practice Supervisor must check in with each other regularly throughout the day.