Clinical Practice Based Pharmacist

| Job | Description | |
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Responsible to: Practice Manager/ Practice Partners as necessary

Accountable to:

Base:

Salary:

Job Summary:

The post holder is a pharmacist, who acts within their professional boundaries, supporting and working alongside a team of pharmacists in general practice. In this role they will be supported by a senior clinical pharmacist who will develop, manage and mentor them.

The post holder will work as part of a multi-disciplinary team in a patient-facing role. The post holder will take responsibility for areas of chronic disease management within the practice and undertake clinical medication reviews to proactively manage patients with complex polypharmacy.

The post holder will provide primary support to general practice staff with regards to prescription and medication queries. They will help support the repeat prescription system, deal with acute prescription requests, and medicines reconciliation on transfer of care and systems for safer prescribing, providing expertise in clinical medicines advice while addressing both public and social care needs of patient in the GP practice (s).

The post holder will provide clinical leadership on medicines optimisation and quality improvement and manage some aspects of the quality and outcomes framework and enhanced services.

The post holder will ensure that the practice integrates with community and hospital pharmacy to help utilise skill mix, improve patient outcomes, ensure better access to healthcare and help manage workload. The role is pivotal to improving the quality of care and operational efficiencies so requires motivation and passion to deliver excellent service within general practice.

The post holder will be supported to develop their role to become a non-medical prescriber.



Primary Duties and Areas of Responsibility

| Patient facing Longterm condition Clinics | See (where appropriate) patients with single or multiple medical problems where medicine optimisation is required (e.g. COPD, asthma). Review the on-going need for each medicine, a review of monitoring needs and an opportunity to support patients with their medicines taking ensuring they get the best use of their medicines (i.e. medicines optimisation). Make appropriate recommendations to Senior Pharmacists or GPs for |
|---|--|
| Patient facing Clinical Medication | medicine improvement. Undertake clinical medication reviews with patients |
| Review | and produce recommendations for senior clinical pharmacist, nurses and/or GP on prescribing and monitoring. |
| Patient facing care home medication reviews | Undertake clinical medication reviews with patients and produce recommendations for the senior clinical pharmacist, nurses or GPs on prescribing and monitoring. |
| | Work with care home staff to improve safety of medicines ordering and administration. |
| Patient facing domiciliary clinical medication review | Undertake clinical medication reviews with patients and produce recommendations for the senior clinical pharmacists, nurses and GPs on prescribing and monitoring. |
| | Attend and refer patients to multidisciplinary case conferences. |
| Management of common/minor/self-limiting ailments | Managing caseload of patients with common/minor/self-limiting ailments while working within a scope of practice and limits of competence. Signposting to community pharmacy and referring to GPs or other healthcare professionals where appropriate |
| Patient facing medicines support | Provide patient facing clinics for those with questions, queries and concerns about their medicines in the practice |
| Telephone medicines support | Provide a telephone help line for patients with questions, queries and concerns about their medicines. |



| Medicine information to practice staff and patients | Answers relevant medicinerelated enquiries from GPs, other practice staff, other healthcare teams (e.g. community pharmacy) and patients with queries about medicines. Suggesting and recommending solutions. Providing follow up for patients to monitor the effect of any changes |
|---|--|
| Unplanned hospital admissions | Review the use of medicines most commonly associated with unplanned hospital admissions and readmissions through audit and individual patient reviews. Put in place changes to reduce the prescribing of these medicines to high-risk patient groups. |
| Management of medicines at discharge from hospital | To reconcile medicines following discharge from hospitals, intermediate care and into care homes, including identifying and rectifying unexplained changes and working with patients and community pharmacists to ensure patients receive the medicines they need post discharge. Set up and manage systems to ensure continuity of medicines supply to high-risk groups of patients (e.g. those with medicine compliance aids or those in care homes). |
| Signposting | Ensure that patients are referred to the appropriate healthcare professional for the appropriate level of care within an appropriate period of time e.g. pathology results, common/minor ailments, acute conditions, long term condition reviews etc. |
| Repeat prescribing | Produce and implement a practice repeat prescribing policy. Manage the repeat prescribing reauthorisation process by reviewing patient requests for repeat prescriptions and reviewing medicines reaching review dates and flagging up those needing a review. Ensure patients have appropriate monitoring tests in place when required. |
| Risk stratification | Identification of cohorts of patients at high risk of harm from medicines through pre-prepared practice computer searches. |



| | This might include risks that are patient related, medicine related, or both. |
|---|---|
| Service development | Contribute pharmaceutical advice for the development and implementation of new services that have medicinal components (e.g. advice on treatment pathways and patient information leaflets). |
| Information management | Analyse, interpret and present medicines data to highlight issues and risks to support decision-making. |
| Medicines quality improvement | Undertake clinical audits of prescribing in areas directed by the GPs, feedback the results and implement changes in conjunction with the practice team. |
| Medicines safety | Implement changes to medicines that result from MHRA alerts, product withdrawal and other local and national guidance. |
| Implementation of local and national guidelines and formulary recommendations | Monitor practice prescribing against the local health economy's RAG list and make recommendations to GPs for medicines that should be prescribed by hospital doctors (red drugs) or subject to shared care (amber drugs). |
| | Assist practices in seeing and maintaining a practice formulary that is hosted on the practice's computer system. |
| | Auditing practice's compliance against NICE technology assessment guidance. |
| | Provide newsletters or bulletins on important prescribing messages. |
| Education and Training | Provide education and training to primary healthcare team on therapeutics and medicines optimisation. |
| Care Quality Commission | Work with the general practice team to ensure the practice is compliant with CQC standards where medicines are involved. |
| Public health | To support public health campaigns. |
| | To provide specialist knowledge on all public health programmes available to the general public. |



Collaborative Working Relationships

Recognises the roles of other colleagues within the organisation and their role to patient care

Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals, other NHS/private organisations e.g. CCGs)

Demonstrates ability to work as a member of a team

Is able to recognise personal limitations and refer to more appropriate colleague(s) when necessary

Actively work toward developing and maintaining effective working relationships both within and outside the practice and locality

Foster and maintain strong links with all services across locality

Explores the potential for collaborative working and takes opportunities to initiate and sustain such relationships

Demonstrates ability to integrate general practice with community and hospital pharmacy teams

Liaises with CCG colleagues including CCG Pharmacists on prescribing related matters to ensure consistency of patient care and benefit

Liaises with CCG pharmacists and Heads of Medicines Management/ Optimisation to benefit from peer support

Liaises with other stakeholders as needed for the collective benefit of patients including but not limited to

Patients

GP, nurses and other practice staff

Other healthcare professionals including CCG pharmacists, pharmacy technicians, optometrists, dentists, health and social care teams and dieticians etc.

Locality / GP prescribing lead

Locality managers

Community nurses and other allied health professionals

Community and hospital pharmacy teams

Hospital staff with responsibilities for prescribing and medicines optimisation

Knowledge, Skills and Experience Required

Completion of an undergraduate degree in pharmacy and registration with the General Pharmaceutical Council

Minimum of 2 years' experience as a pharmacist, demonstrated within a practice portfolio.

Have experience and an awareness of common acute and long-term conditions that are likely to be seen in general practice

May hold or be working towards an independent prescribing qualification.

Recognises priorities when problem-solving and identifies deviations from normal pattern and is able to refer to seniors or GPs when appropriate

Able to follow legal, ethical, professional and organisational policies/procedures and codes of conduct

Involves patients in decisions about prescribed medicines and supporting adherence as per NICE guidelines.

NB: it is anticipated level of qualification held may vary according to the level of position and the components of the role being carried out, see person specification for details.



Leadership:

Demonstrate understanding of the pharmacy role in governance and is able to implement this appropriately within the workplace.

Demonstrate understanding of, and contributes to, the workplace vision Engages with Patient Participation Groups (PPGs) and involves PPGs in development of the role and practices

Demonstrates ability to improve quality within limitations of service

Reviews yearly progress and develops clear plans to achieve results within priorities set by others.

Demonstrate ability to motivate self to achieve goals

Promotes diversity and equality in people management techniques and leads by example.

Management:

Demonstrate understanding of the implications of national priorities for the team and/or service

Demonstrate understanding of the process for effective resource utilisation Demonstrate understanding of, and conforms to, relevant standards of practice Demonstrates ability to identify and resolve risk management issues according to policy/protocol

Follows professional and organisational policies/procedures relating to performance management

Demonstrate ability to extend boundaries of service delivery within the team

Education, Training and Development:

Understands and demonstrates the characteristics of a role model to members in the team and/or service

Demonstrates understanding of the mentorship process

Demonstrates ability to conduct teaching and assessment effectively according to a learning plan with supervision from more experience colleague

Demonstrates self-development through continuous professional development activity; working alongside senior clinical pharmacist to identifying areas to develop Participates in the delivery of formal education programmes

Demonstrates an understanding of current educational policies relevant to working areas of practice and keeps up to date with relevant clinical practice.

Ensures appropriate clinical supervision is in place to support development Enrolled into review and appraisal systems within the practice

Research and Evaluation:

Demonstrates ability to critically evaluate and review literature

Demonstrates ability to identify where there is a gap in the evidence base to support practice

Demonstrates ability to generate evidence suitable for presentations at practice and local level

Demonstrates ability to apply research evidence base into working place Demonstrates understanding of principles of research governance.



Health and Safety/Risk Management

The post-holder must comply at all times with the Practice's Health and Safety policies, in particular by following agreed safe working procedures and reporting incidents using the organisations Incident Reporting System.

The post-holder will comply with the Data Protection Act (1984) and the Access to Health Records Act (1990).

Equality and Diversity

The post-holder must co-operate with all policies and procedures designed to ensure equality of employment. Co-workers, patients and visitors must be treated equally irrespective of gender, ethnic origin, age, disability, sexual orientation, religion etc.

Respect for Patient Confidentiality

The post-holder should respect patient confidentiality at all times and not divulge patient information unless sanctioned by the requirements of the role.

Special Working Conditions

The post-holder is required to travel independently between practice sites (where applicable), and to attend meetings etc. hosted by other agencies.

The post-holder will have contact with body fluids i.e. wound exudates; urine etc.

Job Description Agreement

while in clinical practice.

This job description is intended to provide an outline of the key tasks and responsibilities only. There may be other duties required of the post-holder commensurate with the position. This description will be open to regular review and may be amended to take into account development within the Practice. All members of staff should be prepared to take on additional duties or relinquish existing duties in order to maintain the efficient running of the Practice.

This job description is intended as a basic guide to the scope and responsibilities of the post and is not exhaustive. It will be subject to regular review and amendment as necessary in consultation with the post holder.



Personal Specification Clinical Pharmacist

| Criteria | Description | Essential | Desirabl e | Method of Assessment |
|--|---|-----------|---------------|-------------------------|
| Professional Registration | Mandatory registration with General Pharmaceutical Council • Membership of the Royal Pharmaceutical Society • A member of or working towards Faculty membership of the Royal Pharmaceutical Society | E | D D | A |
| Qualifications | Masters degree in pharmacy (MPharm) (or equivalent) • Specialist knowledge acquired through post-graduate diploma level or equivalent training/experience • Independent prescriber or working towards/intent of gaining independent prescribing qualification | E | D D | CCC |
| Skills knowledge and experience | Minimum of 2 years post-qualification experience. In depth therapeutic and clinical knowledge and understanding of the principles of evidencebased healthcare. An appreciation of the nature of GPs and general practices An appreciation of the nature of primary care prescribing, concepts of rational prescribing and strategies for improving prescribing Excellent interpersonal, influencing and negotiating skills Excellent written and verbal communication skills Excellent written and verbal communication skills Demonstrate the ability to communicate complex and sensitive information in an understandable form to a variety of audiences (e.g. patients) Is able to plan, manage, monitor, advise and review general medicine optimisation | E E E E | D | A I I I A |



| Skills | issues in core areas for long | E | | I |
|-----------------|--|-------------------|--------------|-----------------|
| knowledge | term conditions. | E | | |
| and | Good IT skills | | | |
| experience | Able to obtain and analyse | E | | I |
| cont. | complex technical information | 1 | | |
| COIII. | Recognises priorities when | | | |
| | problem solving and identifie | 3 | | |
| | deviations from the normal | | | |
| | pattern and is able to refer to | E | | 1 |
| | seniors or GPs when | | | |
| | appropriate • Able to work | E | | 1 |
| | under pressure and to | | | |
| | meet deadlines | | D | 1 |
| | • | | | - |
| | Produce timely and inforr | na l | | |
| | tive reports | ia l | | |
| | Gain acceptance for | | | |
| | recommendations and influence | un. | | |
| | | | | |
| | ce/motivate/ persuade the | iu | | |
| | dience to | | | |
| | comply with the recommen | da E | | 1 |
| | tions/ | | | |
| | agreed course of action wi | | | 1 |
| | re there may be significant | | | |
| | barriers | | | |
| | Work effectively | | | |
| | independently and as a tea | l | | |
| | m member | | | |
| | • | | | |
| | Demonstrates accountability | f | | |
| | or | | | |
| | delivering professional expe | | | |
| | se and direct service provi | Si | | |
| | on | | | |
| | | | | |
| 0.11 | 0.15.14 | | | |
| Other | Self-Motivation | E | | ! |
| | Adaptable | E | _ | ! |
| | Full Driving Licence | _ | D | A |
| | In date CRB | E | | A |
| | Safeguarding adult ar | d E | | С |
| | children level three | | | |
| | Information | | | |
| | Governance toolkit | | D | С |
| | completion | | | |
| | Immunisation status | E | | С |
| | Basic life support | E | | С |
| | training | | | |
| Assess | ment will take place with ref | erence to the fol | lowing infor | mation |
| A = Application | | Presentation | | C = Certificate |
| | | | | |

