

MAIN COMMITTEE

Confirmed Minutes of the meeting held on Wednesday 13th July 2011 50 Eastbourne Terrace, Paddington, London

Present:

Main Committee Members: Susan Sanders (Acting Chair), Helen Fawcett (Secretary), Sue Ambler, Maria Christou (from item 2.3), Chris Cutts (CPPE), Liz Fidler (Chair of the Pharmacy Technician & Support Staff (Pre and Post Qualification) Specialist Group), Ray Fitzpatrick, Gail Fleming (until item 9), Janet Gilbertson, Andrea Hollister, Amanda Kemp (Chair of the Pre-registration Trainee Pharmacists Specialist Group), Rachel Kenward, Helen Middleton, Roisin O'Hare, Julie Sowter, Peter Taylor.

In Attendance: Gill Risby (from item 7)

Apologies: Trevor Beswick, Rosalyn Cheeseman, Jill McDonald, Clive Moss-Barclay, Cath O'Brian, Laura O'Loan, Anne Watson.

The meeting started by S Sanders stating that she would be Chairing the meeting in the absence of T Beswick. She reported that A Campbell from West Midlands has not yet been replaced, therefore, Ray Fitzpatrick (Chief Pharmacist, and Chair of the West Midlands Education & Training Group) has agreed to join the Committee for West Midlands.

1. **Minutes of the Last Meeting: 3rd May 2011**

Minutes confirmed as an accurate record of the meeting.

2. **Matters Arising**

2.1 – Secretary of the Main Committee

S Sanders stated that there had been no nominations for the post of Secretary. H Fawcett agreed to continue as Secretary.

2.2 – UKCPA E&T Survey

S Sanders reported that T Beswick believed that the details of the UKCPA survey had been circulated; however, members could not remember receiving it.

S Sanders referred to a recent article in the Pharmaceutical Journal 'If you want to improve your prospects you will find a course designed for you' (p59, July 9th 2011). This report highlights the courses and providers available; however, there is no mention about regional NHS providers of education and training.

Action: S Sanders to discuss with T Beswick about him writing a letter to the PJ highlighting that there are other providers of education and training within the NHS.

2.3 and 2.4 deferred until after item 3

2.5 - Full Review of the Shortage Occupation List - Call for Evidence by the Migration Agency Committee (MAC)

H Middleton reported that there have been two recent Migration Advisory Committee calls for evidence. The first was a call for evidence for professions on the Shortage Occupation List. T Beswick responded to this on behalf of NHS PEDC and the consultation closed on 10th June. NHS Employers believe that MAC will publish their recommendations for the new Shortage Occupation List in mid-September, but this is not a confirmed date.

H Middleton stated that NHS Employers has submitted a response on behalf of the NHS, which supported keeping pharmacists on the Shortage Occupation List.

The second call for evidence by MAC is related to settlement in the UK. The consultation, which closes on 31st August, considers whether Tier 2 should be a temporary visa and not lead to the right to apply for settlement. If this was to happen it could have implications on the qualified pharmacy workforce if those on Tier 2 visas have to return to their country of origin after 3-5 years. The UK Borders Agency (UKBA) is also consulting on employment related settlement and the MAC evidence will feed into the UKBA decisions. The UKBA consultation closes on 9th September.

Action: *H Middleton, S Sanders and T Beswick to decide whether NHS PEDC needs to send a response to this second consultation.*

2.6 - NIHR CRN Clinical Trials scoping survey

H Fawcett confirmed that the scoping survey being carried out by University of Leeds (on behalf of the Workforce Lead for the National Institute for Health Research Clinical Research Network) to identify training needs of pharmacy staff involved in Clinical Trials had been circulated to members. J Sowter reported that over 400 responses have been received.

Action: *Invite Gill Risby to attend to future meeting (October) to feed back the results*

2.7 - Pharmacy Contacts Database

S Sanders reported that the updated London Pharmacy Education & Training (LPET) website and Pharmacy Contacts database will be up and running next week, therefore, she will discuss the database at a future meeting.

Action: *Keep on agenda*

Further Matters Arising:

- S Sanders highlighted members to the post-meeting note on Workstream 1 in the previous minutes.
- On behalf of T Beswick, S Sanders reported that work on 'product release' was progressing well. The first course would run in September 2011. The group continues to link with QA colleagues across the country.

Post meeting note. 'Product release' should actually be 'product approval'

3. Development of a National Framework for Medicines Management Accreditation

G Fleming reported on the work to develop the 'Nationally Recognised Competency Framework for the Assessment of Medicines Management Skills aimed at Pharmacy Technicians'. The final draft was circulated to members prior to the meeting. A few comments have been received and the draft Framework amended, as appropriate. The Working Group is now looking at the process for approving local schemes. Work is also being carried out on the sharing of resources e.g. templates, MCQ questions.

Once the Framework is approved and the process of approving schemes has been piloted then training providers will be invited to apply for national Framework status by a Peer Review Body.

C Cutts stated that it was important to inform the QIPP team of its development. S Ambler offered to put it on the Modernising Pharmacy Careers (MPC) Board agenda.

S Sanders reported that T Beswick particularly wished to highlight the fact that this Framework puts new responsibilities on NHS PEDC to approve courses. The Main Committee needs to consider this responsibility and how it should be managed. It was agreed that the Working

Group will report back to the Main Committee in October, with recommendations for the approval process, so that the Main Committee is clear about the roles and responsibilities required.

S Sanders thanked G Fleming (Chair), and the members of the Working Group for all their hard work.

Action:

- S Ambler to add the Medicines Management Framework to the next MPC agenda.
- Suggested approval process to be circulated by the Working Group to Main Committee members as soon as available, and for discussion at October meeting.

2.3 – Pre-registration trainee pharmacists 2010/11 exit survey

M Christou reported that collection of the data was still ongoing. Non-respondents were being followed up.

Action:

- M Christou to inform regional leads of the current number of respondents in their region.
- M Christou to circulate the collated data to members by August 31st 2011.
- M Christou to prepare a written analysis in time for discussion at the October meeting.

2.4 – Band 6 and Band 7 pharmacist R&R surveys – update

M Christou reported that the analysis was completed; however, there was no sub-analysis by region.

Action:

- M Christou to circulate the collated data and analysis to members.
- Individual members with large number of respondents may request for individual analysis.

Back to agenda order

4. Centre for Workforce Intelligence (CfWI)

S Sanders reported that she had recently met with Jack Turner from CfWI as he was keen to get the pharmacy workforce agenda right, and link appropriately with NHS PEDC and other pharmacy organisations. They had both agreed to write a paper highlighting the surveys (with time-frames) that CfWI and the NHS PEDC are involved in.

The final CfWI report on Pharmacy Workforce Risks and Opportunities had been circulated prior to the meeting by H Fawcett. This is aimed at SHAs to inform the commissioning process. S Sanders reported that in future CfWI will be looking at pharmacists and pharmacy technicians separately.

Action: S Sanders to work with Jack Turner (CfWI) to prepare a paper highlighting the surveys (and timeframes) that CfWI and NHS PEDC are involved in.

5. National Recruitment Scheme for Hospital Pre-registration Trainee Pharmacists

SLA with Webstar Health

H Middleton reported that a meeting had taken place in May to discuss the modernisation of the recruitment website. Present were members from LPE&T, Webstar Health, and representatives from the Pre-registration Trainee Pharmacists Specialist Group (covering regions that carry out regional interviews and those that undertake individual trust interviews).

A paper highlighting the costs involved in redeveloping the website had previously been circulated. H Middleton highlighted that the document only provided brief details on the

changes but that she had a more detailed specification.

A paper providing the options available had also been circulated by H Middleton. She reported that the extra costs involved in the redevelopment would be spread over three years. As the new system will be more cost effective, the extra costs involved in its setup will be offset by reduced running costs e.g. Webstar's staffing. She also proposed that the National Recruitment Scheme handbook should be replaced by a smaller booklet as it is very expensive to produce and is currently published in an untimely manner.

It was suggested that HEE may be interested in taking it on as a national contract.

S Sanders stated that LPE&T is happy to host the contract with Webstar on behalf of NHS PEDC, but that they need reassurance from each 'region' that they will continue to support the scheme. There were a few concerns about the future of the scheme due to the potential changes in commissioning; however, it was agreed to continue, given the risk to successful recruitment of trainees in its absence, particularly as this was occurring at a time of organisational change in the NHS.

Action:

- S Sanders to email regional leads requesting members to commit to the three year agreement. Response required by 22nd July 2011.
- T Beswick to write a letter to the MPC Board, to raise with HEE the possibility of funding the recruitment scheme nationally (when the time comes).

6. NHS Pharmacy Staffing Establishment and Vacancy Survey 2011

S Sanders reported that most NHS Trusts had submitted their data and were on target for the end of July deadline; there are just a few NHS Trust returns outstanding; however, obtaining data from PCTs is proving to be more challenging.

S Sanders has met with S Ambler and L Bollington and agreed to try to map 'transition' of PCT provider arms to where they are now, following amalgamation of some into acute Trusts, emergence of new NHS Trusts/organisations, social enterprises, etc.

She reported that the collated data would be available at the end of July and the report would be finalised by the end of September meeting the DH deadlines.

Action: S Sanders to contact regional leads with the names of the Trusts and PCTs that had not responded in order to follow them up immediately.

7. Leadership Development Facilitation

S Sanders reported that a meeting to discuss the facilitation of leadership development had taken place on 14th June. Lynn Hanning from SWMIT had attended, as had C Cutts.

C Cutts reported that the Clinical Leadership Competency Framework had been launched on the 29th June and that CPPE is developing materials to support the Framework. The Clinical Leadership Competency Framework for Pharmacists and Pharmacy Technicians would be available soon.

The aim of the current joint initiative discussed on 14 June is to focus on the next generation of leaders, not senior staff. However, the framework is generic, applicable across the board, to all pharmacists and pharmacy technicians.

S Ambler/C Cutts also highlighted a National Leadership Council Clinical Leadership Fellows initiative, and agreed to email the link to members. S Ambler encouraged pharmacists to participate.

Action:

- C Cutts to email members the Clinical Leadership Competency Framework and new National

- Leadership Council Clinical Leadership Fellows initiative, and to keep members informed.*
- *Members to contact C Cutts if they would like to see the draft support packages (to support the Leadership Competency Framework).*

8. General Pharmaceutical Council

Pharmacy Technician Registration with GPhC

H Fawcett reported that she had been previously informed in March 2011 by the GPhC that it would not be necessary for a candidate to wait until they had received their qualification certificates before they could apply to register; however, in the published application process candidates must submit certified copies of both their NVO and underpinning knowledge certificates. This will obviously delay the application process and many trainees will not be registered by the time their training contract has ended. A local college has recently informed trainees that the GPhC has started accepting college certification requests to Awarding Bodies as proof of qualification achievement so that the application process is not delayed. H Fawcett has contacted the GPhC and this was only applicable during the grand-parenting period. Any applications submitted after June 30th that do not have a certified copy of the original certificates will be returned by the GPhC.

L Fidler reported that the GPhC had recently announced that candidates can apply to register up to four weeks prior to the end of their two year relevant work experience. Also Edexcel and City & Guilds were reviewing their procedures to try and increase the turnaround on the issuing of certificates.

L Fidler also stated that the Pharmacy Technician & Support Staff (Pre and Post Qualification) Group would be looking at areas of concern that they wish to raise with the GPhC.

Action: *L Fidler to write a letter to the GPhC raising any concerns identified by the Pharmacy Technician & Support Staff (Pre- and Post- Qualification) Group and to copy H Fawcett for circulation to members.*

A Kemp reported that at the last meeting T Beswick had reported that the Tutor standards would be available soon; however, in June a paper was submitted to Council proposing that a new approach was required to replace the Standards. A strategic review is taking place to look at other models and systems.

A Kemp also reported that there were a number of concerns about the registration exam, and the pre-registration pharmacist training requirements, which have replaced the Byelaws. These were to be discussed with N Tyers at the next Pre-registration Trainee Pharmacists Specialist Group meeting.

A discussion was held about the poor communication between the GPhC and training leads. J Gilbertson stated that staff need to take responsibility for looking at the GPhC's website to get up to date information on changes rather than relying on being contacted directly; however, it was acknowledged that the website wasn't easy to navigate.

9. NHS Reforms

S Sanders noted that the NHS Future Forum had published an Education and Training Report. This had incorporated some of the responses to the 'Developing the Healthcare Workforce' consultation document as well as the results of its own 'listening exercise'. The report contains 13 recommendations e.g. on the scale and pace of change, professional accountability, governance, funding. S Ambler replied that the DH had sent a response to this report.

Action:

- S Sanders to circulate link to NHS Future Forum Education and Training Report to members.
- S Ambler to send the link to the DH's response.

Sharing of intelligence about new/interim arrangements in SHAs

It was identified that work was progressing with the development of new organisations, and that a number of different models were being proposed; however, a number of members were unsure what was happening in their area.

A discussion was held about the lack of pharmacy consultation to inform the new arrangements, and also the lack of inclusion of community pharmacy in the plans.

S Ambler stated that pharmacy colleagues need to raise their profile locally as they are not a small profession. It was agreed to prepare a paper to support discussions locally to raise pharmacy's profile.

Action: R Fitzpatrick to draft a paper to support local discussions to ensure that appropriate systems are in place to ensure a suitable pharmacy workforce to provide the pharmacy services of the future, safely and effectively, across primary and secondary care.

10. Pharmacy Technician & Support Staff (Pre and Post Qualification) Group

Minutes and agenda previously circulated. L Fidler reported that the ACPT Framework has been updated to take into account electronic prescribing and one-stop dispensing. The re-accreditation log has been removed with the emphasis put on appraisal and reflection. She was hoping that the Framework would be signed off at the next meeting.

APTUK would like to work collaboratively with the Group to scope post-qualification training and development opportunities. This was agreed by the Committee.

11. Pre-registration Trainee Pharmacists Specialist Group

Minutes and agenda previously circulated.

12. Medical Education England – Modernising Pharmacy Careers Programme Board

Workstream 2 (Post-registration) – S Sanders reported that T Beswick and L Fidler had attended a meeting to provide evidence to support the work of Workstream 2. There has been two sessions: one with a conglomerate of patient-facing and technical services groups, and one with a pharmacy technicians group. A briefing paper was previously circulated and others flagged up similar issues. Following the evidence collection a report will be produced, which will be 'sense-checked' in the autumn.

Workstream 1 – S Ambler reported that the Secretary of State had requested that the MPC Programmes Board undertakes a fully costing exercise on its proposals to '*Review of pharmacist undergraduate education and pre-registration training and proposals for reform*'. A programme plan for implementation will be needed to assess risks and costs. S Ambler stated that she may need to take advice from the Committee on some of the areas.

S Ambler highlighted areas of work that that the Committee may wish to consider:

- Review of the MPET levy
- EU Green paper – Directive on training, which is out for consultation
- White paper on Higher Education funding
- New Medicines Service for community pharmacy and the education & training associated with

that

- MEE work, 'Better Care, Better Training', work on Medical Specialists and the Working Time Directive for Foundation Years and specialist registrars – it will impact on pharmacy and there are pharmacy examples given.

S Sanders also reported from T Beswick that Workstream 1 will also be undertaking some work on the initial education and training for pharmacy technicians. S Ambler confirmed that Tess Fenn, Beth Barratt and David Webb have been asked to undertake a scoping exercise.

Workstream 3 – S Ambler reported that an audit on the last workforce model had been completed. Further work is required to consider the assumptions for demand.

13. Focus Event October 2011

S Sanders reported that the venue had been provisionally booked for the two day Focus Event in October.

A discussion was held on possible topics to cover at the Focus Event, which included:

- NHS Reforms (key messages and getting the message heard) (S Ambler has been meeting with SHA Education Commissioners, Workforce Planners and Finance)
- Review of the work plan
- Annual Report
- National Recruitment website
- Update on MPC activities
- The role of NHS PEDC in the approval of courses

Action:

- Members to email T Beswick with ideas for the Focus Event by end of July
- T Beswick, S Sanders and H Fawcett to prepare a draft programme for review

14. Royal Pharmaceutical Society

M Christou reported that the RPS Expert Education Advisory Panel will meet on 19 September. It will link with MPC. M Christou and Chris Cutts are both members of the Panel and will feed back to the next meeting.

S Sanders reported that Chris John is working one day way week (Fridays) with the RPS to provide workforce development support with the aim of establishing (amongst other things) a workforce development strategy that supports the RPS's vision, mission and values. He'll be working within the Professional development Support Directorate of the RPS, as well as with the CfWI, MPC Programme Board and others (6-month contract only).

15. Any Other Business

- G Risby thanked members for circulating the NIHR CRN Clinical Trials scoping survey. They had currently received 450 responses.
- S Sanders highlighted the importance of using the correct titles for trainees and pharmacy technicians i.e. 'pre-registration trainee pharmacy technician', 'pre-registration trainee pharmacist', and 'pharmacy technician'. Now that the register for pharmacy technicians is mandatory and they are a registered professional group in their own right, with a legally protected title, it is important to always refer to 'pharmacy technicians', as there are several other 'technicians' in all walks of life who are not professionally registered. Equally, a 'pre-reg' or 'pre-reg pharmacy trainee' could either be training to become a pharmacist or a pharmacy technician, and it is very important to distinguish between the two.

Dates of future meetings- *50 Eastbourne Terrace, Paddington*

- Monday 17th October & Tuesday 18th October 2011