

Support Staff Specialist Group Minutes of the meeting, 20 July 2009 50 Eastbourne Terrace, Paddington, London

1. Present

Vanessa Eggerdon (VE) Chair, Melanie Boughen (MB), Sally Kemp (SK), Ellen Bidwell (EB), Helen Knipe (HK), Deborah Williams (DW), Jane Pyatt (JP), Beth Barrett (BB), Gill Risby (GR) Vice Chair, Samantha Mitchelson (SM), Alison Tupling (AT), Alison Simpson (AS), Dalgeet Puaar (DP), Tracey Burrows (TB) Secretary

2. Apologies

Barbara Wensworth, Sarah Wright, Jennifer Harris, Julie Jordan, Tess Fenn, Kath Stride, Diane Blunden, Helen Fawcett

3. Minutes of meeting held 27 April 2009

Agreed as accurate

4. Matters arising

None

5. Discussion of important issues Responding to consultations - VE

It was acknowledged that the whole group need to provide comments when responding to consultations. No comments were received for the Pharmacy Technician Code of Practice consultation. This makes it difficult to finalise the NHS Pharmacy Education & Development Committee (NHS PEDC) annual report when indicating what consultations we have responded to – please pass on comments and contribute however small.

Action: The group agreed that the person collating responses will send a reminder email. When minutes go out, the secretary will put key action points with deadlines in body of email also.

ACPT guery from the Midlands - BB

1000 item check – in the national Accredited Checking Pharmacy Technician Framework it states that,

'Candidates must undertake the collection of a minimum of 1000 accurately checked items'
There has been some discussion as to what this actually means - that 1000 items equates to 1000 individual medicines checked for accuracy or that an item is any individually labelled item, e.g. 4 original packs of the same medicine to complete the course should be logged as 4 separate items. General consensus in the region is that 1000 items accuracy checked must be individual medicines. BB asked group for their thoughts. The group agreed that it is good practice to have 1000 individual medicines to ensure a range of medicines checked. There was agreement that when the framework is updated this should be worded clearly.

Action: Diane Blunden to ensure this is worded clearly when the framework is updated



NHS GIG CYMRU



Apprenticeships (uptake on Department of Health (DoH) funding) - GR

Based on recommendations from the Darzi review of the NHS, there is apprenticeship funding up to £5000 per trainee available. There have been problems around eligibility and pharmacy not being recognised as a sector on the priority list for this funding. This has now been rectified. AS had looked into this and the NW perspective was that if the apprentice was paid under agenda for change (i.e. Annex U) and took more than 18 months to complete their qualification then funding would not be accessible. This does vary from region to region however, so may not be the case elsewhere, this is the NW approach. AS has informed Janet Flint of this approach. There are still some complications around eligibility and AS advised that SHAs are identifying individually how this funding will be applied and how the money is drawn down. It is up to the employer how they utilise this money, either for salary replacement costs or mentorship. GR is getting the funding centrally. GR advised the group to check how this could be accessed within their region.

DP said that a statement from Skills for Health (SfH) had been sent out indicating that apprenticeships for NVQ Level 2 Pharmacy Services were no longer accessible as there is no accredited technical certificate. The document was sent out as a reminder although it was the first information regarding this that the group had seen. From 31 July 2009, the Learning and Skills Council (LSC) will no longer support non compliant apprenticeship frameworks. NVQ Level 3 Pharmacy Services apprenticeships are not affected as there is a technical certificate. SfH are working with the RPSGB, etc to develop an appropriate underpinning knowledge qualification, anticipated to be ready in 2010. This issue was raised in the main meeting and it was identified that a response should be sent. VE suggested that until such time that the technical certificate for the NVQ Level 2 Pharmacy Services becomes available, it would be good if any equivalent underpinning knowledge programme approved by RPSGB is accepted to access this funding, there is also potential for the new General Pharmaceutical Council (GPhC) to become involved in quidance for this group of staff (pharmacy assistants). GR said that if the focus and impetus is to increase uptake of apprenticeships, it seems disappointing that this funding should be removed as it is disadvantaging this group of staff and in particular those assistants in Wales. MB said there should be an explanation from them of this. Professional requirements cannot be met if there isn't funding available. This will adversely affect numbers taking up apprenticeships as a source of funding. Doesn't help to meet national drivers, e.g. Darzi review to increase uptake – this is stopping us meeting these targets. Where was the consultation about it? Susan Sanders (SS) and VE will speak to Janet Flint from the RPSGB. Ideally looking for an extension to this date and a detailed explanation of this decision. Need to engage employers to increase numbers. If accessing Train to Gain (T2G) and Joint Investment Framework (JIF) funding then how much more does apprenticeship offer? Apprenticeships money can support salary replacement costs and T2G/JIF can be used for training costs. From a progression point of view, apprenticeships demonstrate meeting key skills. AS stated that if budgets are reduced then we need to be more resourceful about where we get funding from.

Action: VE & SS (from main committee) to draft a response from the group to the LSC



NHS GIG CYMRU



Technical Specialists Education and Training Group (TSET) update - GR

Not a lot has changed since the last information sent out by GR. Discussions took place regarding Qualified Persons (QPs) and how they will be trained, primarily through the Pharmaceutical Technology & Quality Assurance (PTQA) course. The TSET website is still down and a link will be sent as soon as it is ready. The University of Leeds School of Engineering department can help with any queries. GR is involved in a project for development of an underpinning knowledge module for all grades of pharmacy staff. This is an introductory course on aseptic processing technology. GR will send out an update when more information becomes available. Get in touch with GR if you wish to pilot this in your region.

South West eportfolio rollout - SK

SK outlined the South West strategy for introducing eportfolios for pharmacy NVQ candidates. Several companies came and presented their eportfolios – chose Skillwise VQ Manager. Difficult to choose but choice based on ease of use and the ability to adapt the eportfolio to the training organisation's needs. 40 pre-registration trainee pharmacy technicians (PTPTs) will be starting in September 2009 using eportfolios. A cascade system was used to train assessors in its use. No maintenance costs and payment is per candidate. Can adapt it for other courses too, the aim is to develop it for the medicines management course. Candidate progression through different qualifications can be tracked as well. Everybody needs an email address and assessment sites need to have scanners, digital voice recorders, etc. SK has sent out a questionnaire asking for responses on views of paper portfolios and will send another one when eportfolios have been in place to see how people are finding it. Assessment and verification can be carried out electronically although still a requirement for face to face assessment. SK stated that they will carry out site visits to check on progress. Developing templates for generic assessment plans and can be used for standardisation.

Action: SK to send an email to TB with information about eportfolios and feedback is encouraged from members who have any experience to share.

Progress on SW medicines reconciliation elearning programme - EB

The Elearning programme for medicines reconciliation will be ready to pilot in a week's time. The programme has been developed in collaboration between the SHA and industry. The programme is suitable for any Healthcare Professional (HPC) undertaking the role, and consists of four training modules and assessment. GlaxoSmithKline are helping with the PR aspect of the launch. The programme was developed in response to identification of the need for this training for all HPCs. Takes community hospitals and metal heath trust into account. Launch date for south west is 15 September 2009 – there will be a link on the SW website. Organisations outside of South West can register for a fee. Commercial and Academic Services (COACs) have helped with this and will run the administration of it. There is a Stage 1 and stage 2 assessment depending on level required.







6. SSG objectives Regulation - MB

The Support Staff Advisory Group meeting was cancelled. Responses from the Pharmacy Technician Code of Conduct consultation have been good and positive. This will be passed through the Education Committee and then through council. Janet Flint has sent out the first draft of the document outlining underpinning knowledge programme future requirements, considering the revised qualification structure. SSAG advised what should be in this programme. The Practice Framework consultation for pharmacy technicians is nearly ready to be sent out.

National projects - DP/AS

Main activity at the moment is the unit writing for the new qualifications. The Learning & Development National Occupational Standards are being reviewed and this includes the assessor and internal verifier qualifications. It has been confirmed that assessors and internal verifiers will still be required when the new qualifications commence.

Some consultations will take place about how the current assessor and verifier qualifications are updated. AS also stated that the GPhC Education & Standards Group is a subgroup meeting to look at pharmacy technician education standards.

Action: AS will provide updates from this group.

Funding - TB/AS

TB outlined the problem at present with T2G funding not available as the LSC have run out of funds. This has caused a big problem with some of the consortium members in London being unable to access the money for on-going candidates and not being able to put new learners onto the system. There should be some further guidance form the LSC on this in August 2009. AS also informed the group that JIF funding can be used for bands 1 to 4. ACPTs band 4 to 5 can also access this funding. This information was derived through the Skills Academy, which offers access to training, access to employment and careers advice to support new, existing and future employees. Funding is allocated at 50% upon enrolment and 50% on completion. AS also commented that the BTEC Pharmaceutical Science course can access funding. AS stated that North West has used this funding for their Pharmacy Assistants. AS accesses it centrally and give the names to Skills Academy and they pay the trusts. The LSC in its current form ceases to exist in March 2010 and this may have implications for funding.

ACPT - DB/KS

There was discussion around the difficulties of knowing what is a recognised course from other sectors and equivalence to the national framework, e.g. NPA course not being recognised in hospital. Diane Blunden (DB) is carrying out some work to assist with this. HK asked about the South East requirement of two years post qualification experience before undertaking the ACPT scheme and asked what others are doing. VE stated that this is a local decision. DB is collating data on failure rates. South West are collating error rates. SK did a comparison locally and will send out the figures to the group.



NHS WALES GIG CYMRU



Support & develop higher level qualifications - GR/EB

Foundation Degrees (FDs) are running well. What happens next, do they stay where they are? GR is looking at pharmacy technician career pathways. There is an article in registered technician in the Pharmaceutical Journal on this. The two strands of work involve evaluating the FDs and looking at return on investment. What are the differences in practice? The second involves progression after completion of the FD and different career pathways. The first cohort of FD completers will be mapped and monitored as to what they do afterwards. Should we collate information on what pharmacy technicians are accessing? EB says that SW want to use pharmacy technicians in a more clinical capacity but not sure how. A framework or guidance on what level a PT with that qualification can do is needed. Some people who have completed have left because they are not using the skills they have learnt. This is part of the Skills Escalator – should have PTs Included in the advanced practitioner role. AS said NW have a BSc in medicines management. This is via a distance learning route and trusts are required to pay for this.

Action: Members to send GR any information that relates to this work by 30 September

Support work based facilitation – TB/SW

Technician Level Framework (TLF) – Jane Hough is the lead on this – pilot ended in December last year. Jane interested in members from this group taking work with the TLF forward. There will be a launch later on in the year.

Discussed uptake of holistic assessment nationally, as well as streamlined assessment processes. TB & DP gave feedback on their experience to date on using eportfolios for their assessor and internal verifier candidates. Eportfolios had worked well with some candidates but not with others. Access to a computer and time were some of the barriers. London had not rolled out eportfolios across all of the trusts for the pharmacy NVQs as not all of them had the resources required to enable effective assessment electronically.

Action: TB to send the document outlining TLF progress to members.

Pharmacy support staff training in aseptics – SK/KS/GR

The work on pre and in-process checking has now been completed. Next area to focus on is the final release – still a contentious issue – some PTs and pharmacy assistants are involved with pre and in process checking and final checking, however, pharmacists are carrying out the final release check. South West are concerned about basic grade pharmacists' responsibility in relation to this and whether adequate training and support is given to them to carry out this role safely. South West identified that basic grade pharmacists need some extra clinical knowledge on day 1 around final release checking and technical aspects. This is to be discussed at TSET to see if there is any training in place already for basic grade pharmacists to develop in technical services. There is a DH document from paediatric pharmacists for checking in paediatric TPN services emerging. There is also a chemotherapy checking consultation due out that may act as a driver for developing this. This would help with resident pharmacists too. Should if possible be included in the degree syllabus and pre-registration year.

Action: SSS group to email SK if they know of any training already developed in this area by 30 September 09



website: www.nhspedc.nhs.uk including Northern Ireland





Workforce planning - VE/DW

Need to analyse PTPT destination data when it is all available. We will have three years worth of data – still need extra information on reasons for attrition. Please ensure the exit questionnaire is used for summer completers to obtain a picture of where the workforce is going. It would also be useful to have information on new starters and where they have come from? This work also links in with workforce planning which is an important topic for PTPTs and pre-registration trainee pharmacists (PTPs). VE is going to add another question in to questionnaire that asks why they made the decision to change sector. Start collating this data for the October 2009 meeting. Data needs to be sent to VE by Mid September.

Action: VE to add extra question to questionnaire and send to group.

Action: All members to have sent this data to VE by Friday 18th September 2009.

7. Modernising pharmacy careers (MPC) board

AS spoke to Keith Ridge to request additional PT representation on the board; the APTUK education officer is now a member. The meeting on 25 June highlighted a lack of awareness of what PTs do in general. Looking at the white paper and how PTs can be included to provide pharmacy services. Group agreed that key areas of PTP and PTPT training, standardisation of requirements, how techs can be used more innovatively and looking at a joined up approach for training post qualification need to be addressed. AS will send a document to TB to circulate that was approved by the group – doesn't cover all workforce issues. Pharmacy assistants included as well. Extended roles for techs were discussed with work split into pre–registration and post-registration requirements. This group has an opportunity to influence some of the issues that arise regarding PT issues through this Board. The MPC website is being developed.

Action: AS to send MPC document to TB

8. Update from Strategy Group

Workforce planning was a main part of the agenda from the morning meeting. There will be a focus event in October to look at different topics to focus on for the forthcoming year, new objectives will be identified. Let VE know what you feel the Support Staff Group should focus on for the year ahead. Also looking at recruitment & retention issues, modernising pharmacy careers update, training up to registration and post qualification training. There will also be a review of any key issues from the new GPhC and professional leadership body review, membership of the group and terms of reference. Agreement was made about ensuring that the work plan is followed, objectives stay relevant and communication between the group is maintained effectively.

Action: VE to work on incorporating this information into a document

9. Pharmacy Practice Framework Consultation

Not out yet but imminent

10. Edexcel update - BW

Edexcel working on the new Qualification - the units for the NVQ part have to be in to the QCA for 1st August 2009 and the RPSGB will have their template for the technical certificate finished for autumn 09 so work can start on writing underpinning knowledge units then.



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11. City & Guilds update

C&G are working on the new units. Deadline for this work to be finished is 31/7/09.

12. APTUK update

The APTUK conference was very successful motivating. Keynote speakers demonstrated support of PTs and APTUK's future professional leadership role. There was an extra session delivered by Sue Ambler from the Department of Health related to registration and PT perspectives on this.

13. Skills for Health

Nothing to report

14. RPSGB Support staff advisory group

Cancelled so nothing to report.

Any Other Business

Life long learning conference in Pharmacy

DP – Life long learning conference in Finland – not a huge PT presence – worth going to – it is the only international pharmacy education & training conference.

EB – advised that it should be good practice to see original occupational certificates from locum pharmacy technicians as there has been an incidence of someone working as a pharmacy technician who had not completed the course.

SK – There is a QA Symposium on 28 & 29 August 2009 – topics cover issues relating to technical services and quality assurance

Receipt of these minutes prior to the date of the next meeting implies that they are unconfirmed minutes.



