

# Kingston Hospital NHS Foundation Trust Pharmacy Risk-based Review (education lead conversation)



## Quality Review report

26 June 2018

Final Report

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## Quality Review details

<b>Training programme</b>	Pharmacy
<b>Background to review</b>	An Education Lead Conversation (ELC) was arranged as a follow-up to the Programme Review (on-site visit) that was conducted on 10 May 2017. The focus of the ELC was to discuss the progress that the Trust had made with the outstanding mandatory requirement and two recommendations, specifically in relation to pre-registration trainee pharmacy technicians (PTPTs) and medicines management optimisation.
<b>HEE quality review team</b>	<p>Liz Fidler, Associate Head of Pharmacy Health Education England London and Kent, Surrey and Sussex</p> <p>Kulpna Daya, Education Programme Director for Pre-Registration Trainee Pharmacy Technicians The Royal Marsden NHS Foundation Trust</p> <p>Adora Depasupil, Learning Environment Quality Coordinator Quality, Patient Safety &amp; Commissioning Team Health Education England London and Kent, Surrey and Sussex</p>
<b>Trust attendees</b>	<p>Judith Foy, Chief Pharmacist</p> <p>Nicola O'Brien, Education Programme Director for Pre-Registration Trainee Pharmacy Technicians (PTPTs)</p> <p>Karen Matthews, Operations Manager</p> <p>Devashri Sisodia, Senior Pharmacist for Education &amp; Training and Education Programme Director for Pre-Registration Pharmacists (PRPs)</p> <p>Roshni Thoppil, Senior Principal Pharmacist</p>

## Conversation details

Reference number	Summary of discussions	Action to be taken? Y/N
PH1	<p><b>Trust Overview</b></p> <p>The quality team invited the chief pharmacist to give an overview of any key Trust strategic policies that had impacted on education since the visit in 2017. The quality review team heard that one of the key strategic plans of the Trust in 2018 was to focus on addressing the education training aspect of the appraisals process. The Chief Pharmacist explained that the staff survey conducted by the Trust towards the end of May 2018 indicated that staff were happy with the appraisal process which were identifying their training needs but that there was a lack of resources and opportunities including time constraints which had limited their access to training identified in the appraisals. The Chief Pharmacist stated that the organisation was developing a Trust-wide Education &amp; Training policy.</p> <p>The quality review team heard that the pharmacy department had submitted a business case prior to the review to rebuild pharmacy which was awaiting agreement and approval by the end of 2018. The Chief Pharmacist reported that pharmacy staff members were located in different areas of the Hospital: with the main department and the Boots store in the outpatients building and the junior ward-based pharmacists based on the fifth floor of Esher Wing nearer the wards meant that often the junior team felt isolated. However, the Chief Pharmacist was hopeful that once the business case had been approved by the end of 2018, that the department would work quickly to ensure that all pharmacy staff would be integrated in one location within three years' time.</p> <p>The Chief Pharmacist reported that there was a new education group called the Training and Education Committee (TEC), and that the first meeting at the Trust that a pharmacy representative attended was held in May 2018 prior to the ELC review. The Senior Principal Pharmacist stated that the next TEC meeting was scheduled to take place in July 2018; and that the pharmacy department was going to be represented by the Governance Pharmacist. The Chief Pharmacist stated that the TEC meeting was focused on amalgamating policies to be inclusive of multi-disciplinary teams. The quality review team heard that the TEC terms of reference were still in draft form and the committee may be the forum for the pharmacy team to access learning and development funding supported by Health Education England (HEE) as well as from other external funding, and that this would be confirmed in the new policy which was in the finalisation stages at the time of the review.</p> <p>In relation to medicines management optimisation strategy, the Chief Pharmacist stated that the department had applied for a significant amount of funding in 2017 to support the expansion of medicines management pharmacy technicians (MMPTs). It was heard that the department had increased its MMPTs from one to three since the 2017 review and had clear plans to expand the skill set of dispensary-based staff to undertake this role. The Chief Pharmacist stated that the development of the MMPT training would be supported within the corporate strategy. It was discussed that completion of the HEE Medicines Optimisation Programmes (MOP) would support this in a timely manner and would complement the in-house training. It was agreed that the Education Programme Director (EPD) for PTPTs will review how to utilise the MOP to reduce duplication and support timely completion. It was agreed that the Trust was not required to provide any evidence for this at the time of the review but that the quality team would obtain trainee feedback in March 2019 (please see open action P5.1b on the Trust Master Action Plan).</p>	

	<p>The Chief Pharmacist stated that the department had nine foundation pharmacists and so diplomas were expensive to deliver; hence a strategic direction was still needed to be formalised and that the Trust was working alongside the other Trusts in south west London to see how this training model can be delivered.</p> <p>The quality review team heard that the pharmacy department at Kingston Hospital had no significant retention issues. The Chief Pharmacist reported that in terms of recruitment, the department had been successful in recruiting Band 6 pharmacists but had difficulties with recruiting Band 7 pharmacists which was noted to be a nation-wide problem.</p>	
PH2	<p><b>Apprenticeship Programme</b></p> <p>The Chief Pharmacist stated that there was a concern that the Trust had not been able to utilise apprenticeship programme in terms of pharmacy assistant training. The review lead explained that through the EPD Network Days, HEE had been running events to support EPDs with developing local plans, to support pharmacy assistants to undertake the Level 2 National Vocational Qualification (NVQ) Certificate in Pharmacy Service Skills through apprenticeship programme.</p> <p>The review lead explained that the Trust apprentice lead would be the first point of contact for the pharmacy department to assess the department's establishment and to determine how the pharmacy assistants would benefit from the apprenticeship programme when they were no longer apprentices and eventually took on a substantive post. The review lead further explained that there were varying models across the regions which had been shared at the EPD network events. It was noted that discussions surrounding apprenticeship models needed to be reflective of the local workforce and recruitment opportunities so should be adapted by the Trust to support uptake. Additionally, it was also discussed that the Trust could also utilise administrative and clerical apprenticeship.</p> <p>The Operations Manager asked the quality review team if there had been any issues in terms of salary, for instance between an apprentice and somebody who was not an apprentice but was doing the same job. The quality review team gave an example of how the role of apprentice was advertised at the Royal Marsden Hospital (RMH) – that managers were asked to advertise posts Band 4 and below as an apprentice depending on the expected role. It was explained that the advertisement for the fixed-term contract post needed to clearly state apprenticeship in order to recruit the right person who was interested in role development. Once successfully trained through apprenticeship and the certificate had been granted upon completion of studies, RMH would then advertise for a full-time permanent post; therefore, resulting in successful recruitment and retention processes. The review lead added that there were other Trusts that had been converting established posts to apprenticeship or training posts and advised the Kingston Hospital pharmacy educational leads to think about the future roles and what would be most helpful for the pharmacy department at the Trust.</p>	
PH3	<p><b>Local Faculty Group Meeting</b></p> <p>The Senior Principal Pharmacist reported that as a response to the May 2017 quality review mandatory requirement, the local faculty group (LFG) meeting was established after the May 2017 quality review. The Trust had provided LFG minutes as evidence; therefore, this action was considered addressed and consequently closed during the review. The quality review team heard that the pharmacy department - with the support of the medical education centre at the Trust - will set up a way for the pharmacy LFG to feed into the wider Trust education governance structures. The Chief Pharmacist explained that it could be raised at the next TEC meeting in July 2018 with the Director of Medical Education, Medical Education Manager, Director of Nursing, Director of Workforce and the leaders of Allied Health Professional (AHP) teams to align pharmacy under the appropriate structure to ensure that the department was fully supported,</p>	Yes, please see PH3 below

	<p>and feedback was provided in terms of improving the training experience and environment. The Senior Principal Pharmacist stated that there was an established Local Academic Board (LAB) meeting at the Trust although not regularly attended by the pharmacy team. The review lead explained that the purpose of the LAB meetings was to focus on training experience, progression and curriculum in line with the HEE Framework. It was advised that the pharmacy team needed to ensure that there was a representative at the LAB meetings for the department.</p>	
PH4	<p><b>Developing the Workforce</b></p> <p>The Chief Pharmacist further stated that in terms of the integration plan of moving all pharmacy staff in one location, that this would ensure an integrated approach to training and that sufficient support and supervision would be provided to the PTPTs. In terms of the expansion plan regarding the pharmacy workforce, the Chief Pharmacist stated that the Trust had shown support to invest in the department to further develop the service on the wards.</p> <p>The Senior Principal Pharmacist stated that the department had at the time of the review an Education Programme Director (EPD) post for pre- registration pharmacist training in addition to the EPD for technicians and that this post had been successfully recruited to as will be outlined in more detail in the following section below. The quality review team heard that the department had three qualified MMTs at the time of the review. The EPD for PTPTs reported that a new training plan had been developed for the PTPTs, and that the EPD was in the processing of completing a plan for the MMTs. The Chief Pharmacist indicated that as the pharmacy department was able to retain staff quite well but succession planning was recognised as a significant risk, that the department had staff in place to be developed further. Therefore, succession planning still needed attention and needed to be well managed in the department to develop staff into leadership roles in the future.</p> <p>The quality review team ascertained that the Trust had two first year PTPTs and had no commission for new trainees for the September 2018 intake. The Operations Manager stated that the Trust usually recruited two pharmacy trainees every other year and that the Trust was likely to continue with this model. The Chief Pharmacist stated that at the time of the review, the Trust did not have the capacity to provide more training due to workload, intensity of service demand, and due to the geography of the department as aforementioned.</p> <p>In terms of the medicines management training strategy, the quality review team heard that the Trust was expecting for one of the first year PTPTs to rotate in January, and the other one in February 2019. The EPD for PTPTs outlined some of the weekly training programme plans for the PTPTs medicines management rotation. Week 1 and 2 included the following learning: for the PTPTs to shadow and observe the EPD and MMT when taking drug histories, documenting them and checking discrepancies on the drug chart. Week 3 and 4 included learning for the PTPTs to work under the supervision of the MMT, and the EPD to observe the PTPTs when taking drug history and documenting on the HEE MOP medicines reconciliation form.</p> <p>The review lead advised that the PTPTs be enrolled on the HEE MOP scheme to prevent duplication of learning and workplace-based assessments, and the EPD stated that there was a plan for this to be undertaken for the next cohort of PTPTs.</p>	<p>Yes, please see PH4 in Other Actions below</p>
PH5	<p><b>Education Programme Director (EPD) Post</b></p> <p>The quality review team discussed the other recommendation from the May 2017 review, which was in relation to the PTPT and Pre-registration Pharmacist (PRP) EPD posts and the Trust was recommended to provide job descriptions. The Trust produced copies of job descriptions for both the PTPT and PRP EPDs, which</p>	

	<p>outlined the roles and responsibilities that reflected the changes in education and service delivery. Therefore, this action was also closed during the review. The quality review team heard that the PTPT EPD spent mornings on the ward, and afternoons in the dispensary to spend time with the pre-registration pharmacists in her practice supervisor role and with the PTPTs, and in order to obtain feedback from the practice supervisor from dispensary to see if the PTPTs needed extra support. The quality review team heard that the EPD was still new to the MMT role and so was still trying to balance the time spent between the roles.</p> <p>The PTPT EPD stated that the network days had been interesting and that the EPD was able to obtain some feedback and new ideas to be brought forward to the local team. The quality review team heard that the EPD had organised Continuing Professional Development (CPD) meetings for technical staff. It was reported that the PTPTs at the time of the review were included in the department clinical meetings schedule for case presentations. The quality review team also heard that the EPD worked closely with the Senior Pharmacist for Education &amp; Training (E&amp;T).</p> <p>The quality review team heard that the pharmacy department had trained two practice supervisors, but one left the Trust and the other was on maternity leave at the time of the review. Therefore, the Operations Manager reported that the department was in the process of training another two practice supervisors to provide further support to the EPD role.</p>	
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## Next Steps

### Conclusion

The quality review team thanked the Trust attendees for their participation in the follow-up ELC review of the pharmacy training at Kingston Hospital NHS Foundation Trust. It was noted that there had been progress made since the May 2017 quality review. Therefore, the mandatory requirement and the recommendation regarding the EPD roles and responsibilities were closed. Following the review, a new mandatory requirement had been set and the recommendation had been updated as noted in Other Actions below.

### Immediate Mandatory Requirements

Req. Ref No.	Requirement	Required Actions / Evidence
N/A	None	None

### Mandatory Requirements

Req. Ref No.	Requirement	Required Actions / Evidence
PH3	HEE would like to see evidence of how the pharmacy department integrates with education governance within the Trust.	The Trust to provide minutes of TEC and LAB meetings.

### Recommendations

Rec. Ref No.	Recommendation	Recommended Actions
N/A	None	None

**Other Actions (including actions to be taken by Health Education England)**

	<b>Responsibility</b>
PH4 – The Health Education England will obtain feedback from the trainees in March 2019 to ensure that they have completed the medicines management rotation and associated training as per Recommendation P5.1b from the 10 May 2017 quality review.	Health Education England and the Trust

**Signed**

<b>By the HEE Review Lead on behalf of the Quality Review Team:</b>	Liz Fidler
<b>Date:</b>	1 August 2018