

Example records

For revalidation for pharmacy professionals

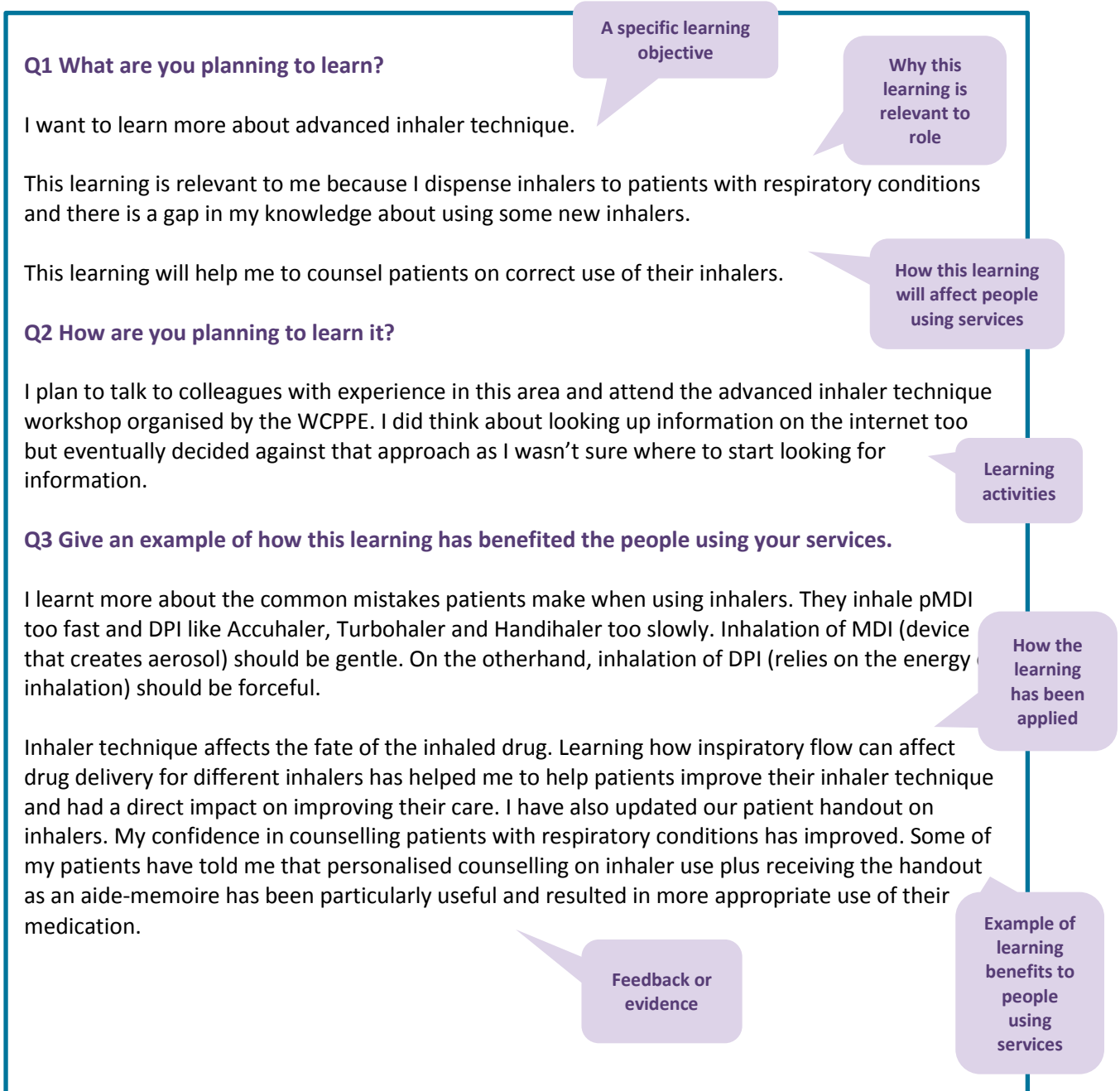


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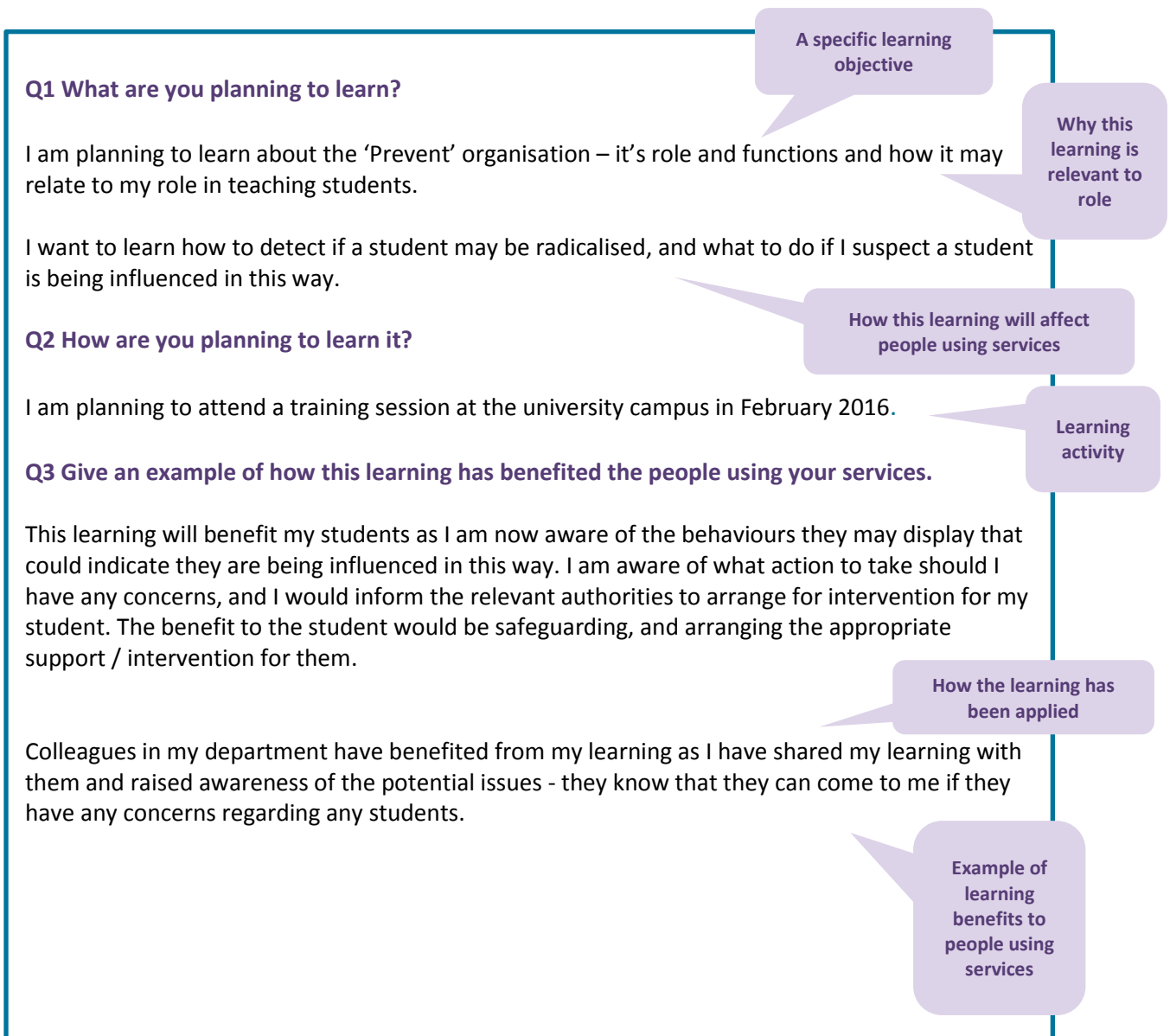
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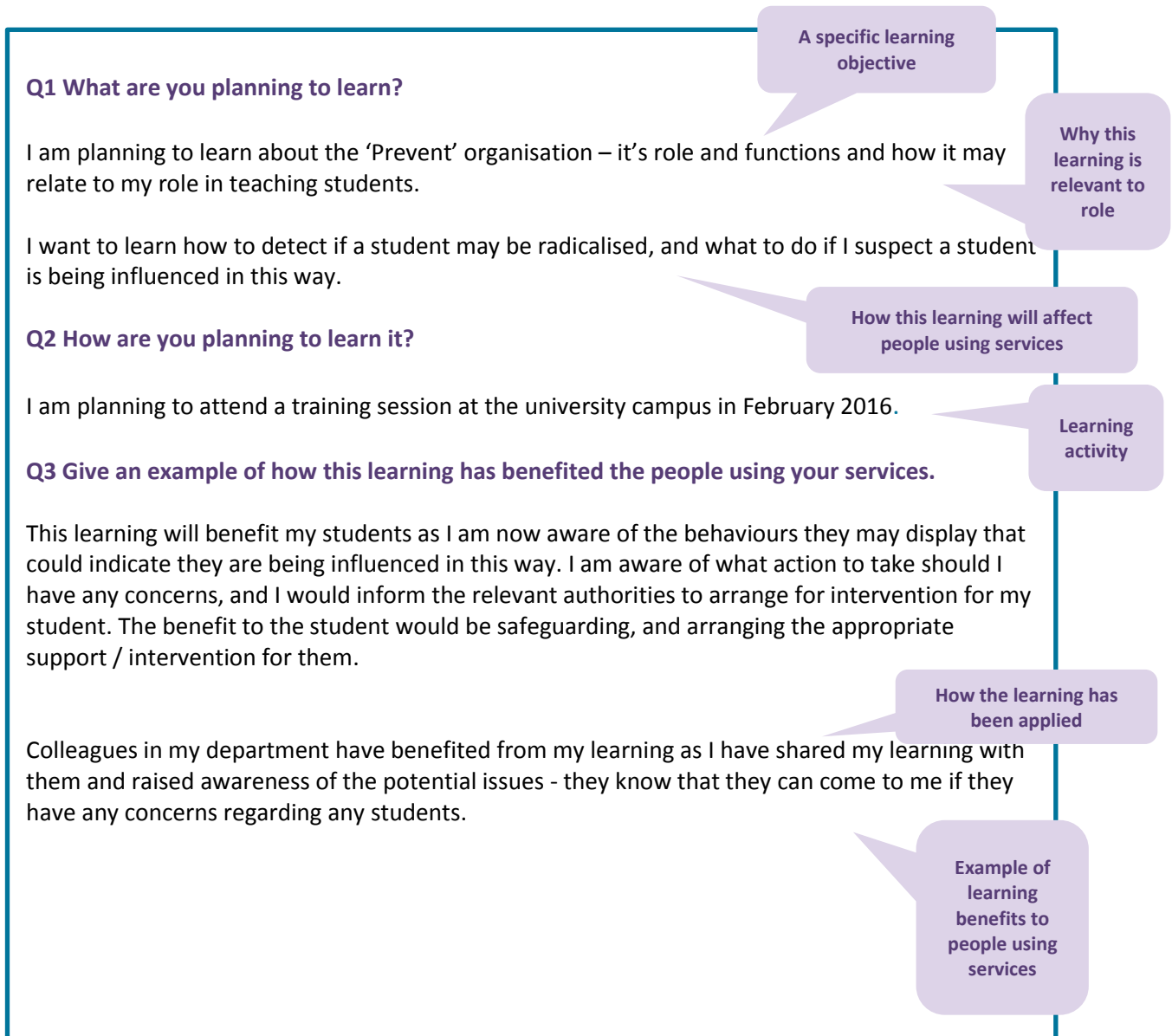
Planned CPD - hospital



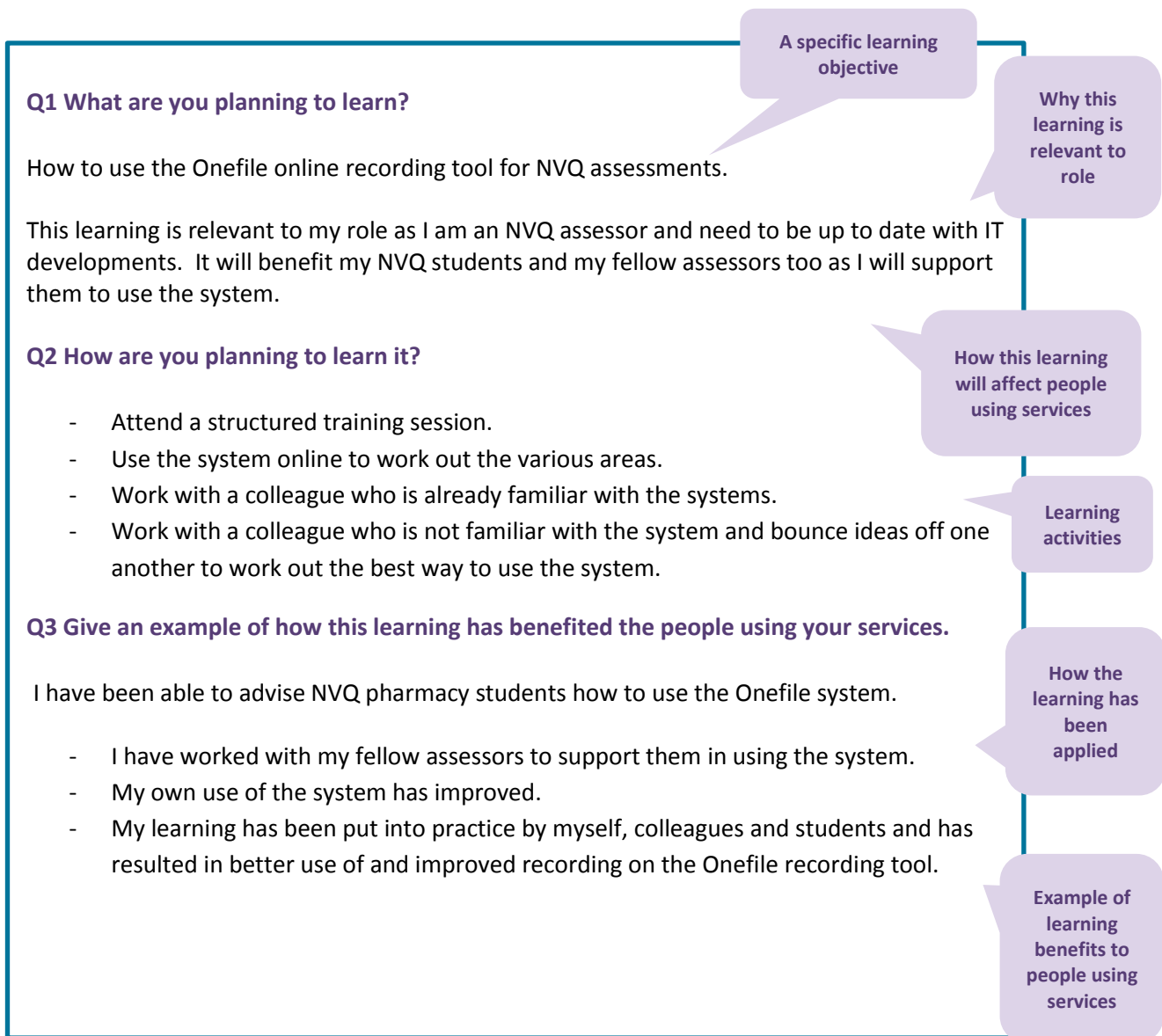
Planned CPD – community



Planned CPD - academia



Planned CPD - NVQ assessor



Unplanned CPD - hospital

Q1 Describe an unplanned event or activity that enabled you to learn something new or refresh your knowledge or skills

I attended a recent in-house hospital clinical meeting on paediatric nutrition.

I learnt about different milk products and allergies and when you would use regular formula, hydrolysed proteins and amino acids. I also learnt about products included in our hospital paediatric formulary and when they should be used.

Q2 Give an example of how this learning benefited the people using your services.

We sometimes receive enquiries from nursing staff and parents about paediatric nutrition. My confidence and understanding of the issues faced by parents of babies with intolerances and allergies has improved. When I receive a prescription I can now safely validate it and supply the appropriate product for the patient.

Last week, for example, I received a prescription for a particular milk product for a 9 month baby. I checked the paediatric formulary and confirmed that the product was appropriate for the child and the dosage correct.

I am interested in finding out more about paediatric medicines and plan to attend other clinical meetings related to paediatrics.

Description of event or activity

Description of what you have learnt

How the learning has been applied

Example of learning benefits to people using services

Next steps

Unplanned CPD - community

Q1 Describe an unplanned event or activity that enabled you to learn something new or refresh your knowledge or skills

Whilst conducting a medicines usage review (MUR) the patient mentioned that he had recently been experiencing an increased incidence of palpitations and missed heart beats. The patient was a 49 year old male, did not smoke, took moderate exercise and was not overweight. He said he had no previous cardiac history. I checked his blood pressure and it was within the normal range. He explained that the problem came and went but had recently got worse and thought it might be linked to stress at work.

We discussed his medication. He took amitriptyline daily for prophylactic management of migraine and cluster headaches and had recently increased the dose to manage the headaches. I recalled that amitriptyline might have cardiac side effects but wanted to check the details.

BNF: Amitriptyline [unlicensed indication] – ‘arrhythmias and heart block occasionally follow the use of tricyclic antidepressants, particularly amitriptyline, and may be a factor in the sudden death of patients with cardiac disease; other cardiovascular side effects include postural hypotension, tachycardia and ECG changes’

Online literature search:

- PJ 15th October 2014. Thomson, C and Wright, P. “Long QT syndrome”
- BMJ 29 Jan 2013:346:F288. Castro, VM et al. “QT interval and antidepressant use: a cross-sectional study of electronic health records”

The references confirmed that amitriptyline could cause long QT syndrome, primary symptoms may include palpitations and that symptoms were dose related. I concluded that his symptoms might be linked to either stress / dose-related side-effect of his amitriptyline, contacted the patient, informed him of my conclusions and suggested that he should be referred to his doctor for a more thorough assessment.

Q2 Give an example of how has this learning benefited the people using your services.

This CPD benefited the patient directly. He visited his GP and was referred to a cardiologist. He was found to have some abnormalities with his ECG and was diagnosed with ectopic heartbeats, which may not necessarily have been caused by the medication but could have been exacerbated. The patient is now under the care of the cardiologist and was grateful for the advice I provided.

Description of event or activity

Description of what you have learnt

How the learning has been applied

Example of learning benefits to people using services

Feedback or evidence

Unplanned CPD - academia

Q1 Describe an unplanned event or activity that enabled you to learn something new or refresh your knowledge or skills

I was asked to provide an internal review for the e-assessment questions linked to the new CPPE learning programme on Summary Care Records (SCR).

Although mainly reviewing for educational robustness, I completed the associated learning programme to ensure the answers to the questions were correct and could be answered by completing the learning programme.

This provided me with knowledge about SCR and how they can be accessed and used in community pharmacy, including what information they contain, when they can be accessed and governance requirements around their use.

Q2 Give an example of how this learning benefited the people using your services.

This learning has allowed me to ensure that the learners who access this programme and the linked assessment are provided with accurate knowledge and testing so that they can be confident that they are acting within the law when accessing records in community pharmacy. Ultimately this will have a direct impact on patients who will be able to access improved care from the pharmacy when they need it.

This learning will also benefit the users of any learning I develop in the future as I will be able to incorporate this knowledge into programmes to allow them to think how access to SCR can have a positive impact on patient care.

Description of event or activity

Description of what you have learnt

How the learning has been applied

Example of learning benefits to people using services

Next steps

Unplanned CPD – industry

Q1 Describe an unplanned event or activity that enabled you to learn something new or refresh your knowledge or skills

I am a pharmacist and work for a pharmaceutical company. We have a standard operating procedure (SOP) for Product Recalls that need, in line with good working practices, to be tested on an annual basis. A recall might occur for example when a company has to remove a product because of design or production defects that may compromise safety, efficacy and purity of the product or because of government regulation. Our company performs 'mock product recalls' to check that the various steps in the SOP work and that a product can be recalled in a timely manner, fully reconciled and accounted for, should this be required. We recently instigated a mock recall that highlighted some potential business risks.

Description of event or activity

Description of what you have learnt

The following learning points were identified:

- When conducting a mock recall, careful consideration needs to be given to who to contact and when. In this particular study there are over 150 active sites. Our Recall Committee deliberated on who to contact and eventually decided to contact a sample of 10 sites. This decision making took valuable time and resource and delayed the notification to sites.
- Although the Packing Organisation who prepared the supplies, the Clinical Contract Research Organisation who monitor the study and the targeted sites all responded, the mock recall was a notification exercise only. No reconciliation was performed.
- The Packing Organisation provided a stock inventory, but did not perform a physical stock count. Similarly, the target sites did not do a physical count to ensure they could locate the affected kits provided on the shelves in their clinics.

From the mock we identified areas for improvement within our Product Recall SOP.

Q2 Give an example of how this learning benefited the people using your services.

The Product Recall SOP has been updated to reflect these key learnings. We have also introduced standard letter templates into the Product Recall SOP (in line with the MHRA Guidelines). This will simplify and speed up the process of contacting the Packing Organisation who prepares the supplies, the Clinical Contract Research Organisation (CRO) who monitor the study and the clinical sites that run the study and dose the patients.

How the learning has been applied

My colleagues at work have benefited because they have a better understanding of what is required of them. Patients will also benefit if a genuine product recall was ever to take place.

For future mock recalls, the recall committee will also be more specific in terms of its requirements, to ensure the information can be obtained in a more time efficient manner.

Example of learning benefits to people using services

Peer discussion – hospital

Describe how this peer discussion changed your practice for the benefit of the people using your services.

I chose another medicines information (MI) pharmacist as my peer because I work in a hospital MI unit and wanted feedback from someone in the same field. As part of my role I have to participate in an annual peer review process (hospital to hospital) plus a regional MI inspection conducted every three years. In preparation for the MI inspection, we have to conduct a User Survey as evidence of the level of service provided.

My peer discussion (held as part of the annual peer review process) focused mainly on my MI management role. We ran through examples of enquiries that my team has dealt with, departmental protocols and also looked at some of my personal CPD entries.

The feedback received is helping to guide and enhance my practice. It has also given me the opportunity to reflect on some areas for development. I have for example, re-visited some of our in-house procedures and tweaked them to ensure that they are all up to date and in accordance with national MI procedures.

I have also shared how I put my learning into practice with colleagues and ensured that everyone in the team is up to date. We already collate service user feedback - the evidence of an enhanced service will be provided in the form of improved quality of documented MI query answers, and improved responses from the MI Users Survey.

Description of why you chose this peer

How this peer discussion helped you reflect on your practice

Description of change to practice

Example of how change has benefited people using services

Peer discussion – academia

Describe how this peer discussion changed your practice for the benefit of the people using your services.

I chose a health psychologist /academic to be my peer. I chose this peer because I have worked with her previously and think she would make a good mentor.

My peer discussion helped me to think about how to write up research. As a result of the discussion I have written up a piece of research in a format that would be deemed suitable for publication in a peer reviewed journal. This was a new skill I was developing and therefore involved learning by doing. I used the feedback provided to identify what further learning I needed to undertake to complete the writing of this journal article and to reflect on where I had made good progress.

We developed an action plan and produced a final draft that has been published.

The outcome of my learning and this research article is that I have increased the evidence base for the rationale for a patient centred approach to consultations and how it benefits patients and patient outcomes. Publishing my research has raised awareness of the concept of patient centred consultation skills amongst peers who read the article and I will also be a role model for this concept. There will be an indirect benefit to patients too as the intent is for pharmacy professionals enhance their consultation skills.

Description of why you chose this peer

How this peer discussion helped you reflect on your practice

Description of change to practice

Example of how change has benefited people using services

Reflective account – senior leadership role (pharmacist)

Provide us with a reflective account of how you met one or more of the standards for pharmacy professionals. [This particular record relates to standard 3].

I am a pharmacist owner of a chain of a dozen community pharmacies based in the Midlands.

My service users are varied and include patients, staff, suppliers and other healthcare professionals such as GPs.

Ensuring good and effective communication is part of my everyday role. It can range from speaking to patients about their medicines, updating policies and procedures and to ensuring that staff are well trained and motivated. As a business owner I try to have good relations and listen to the people using my services and make improvements on a continual basis. As part of my reflections on how I meet Standard 3 I identified an issue of increasing mental health issues within our pharmacy professional population and as a result felt that more could be done to improve communications regarding mental health and where to go for help. I contacted the Pharmacist Support charity and attended one of their 'wellbeing' workshops to understand how we could manage the trend and provide solutions to this issue. I have deployed the same training to our pre-registration pharmacists on 'wellbeing' to ensure that new registrants have the learning before they start their career. I believe that this new approach has benefited my colleagues as they now have a better understanding of mental health issues and where to go if they need advice.

I plan to continually monitor feedback on incidents of mental health issues and provide support as and when required.

Setting of practice and main roles

Typical users of service(s)

Meeting the standard(s) with example(s)

Feedback or evidence

Reflective account – senior leadership role (pharmacist)

Provide us with a reflective account of how you met one or more of the standards for pharmacy professionals. [This particular record relates to standard 3].

I am a senior manager in a large London teaching hospital. I have responsibility for managing a team of clinical pharmacists and pharmacy technicians and my role includes day to day running of the hospital clinical pharmacy services.

Setting of practice and main roles

The users of my services include the pharmacy team, other hospital staff and patients.

Typical users of service(s)

For my team to work effectively and for the pharmacy services to run efficiently good communication within the team is essential. Staff need to be able to get on with each other.

Whilst attending a study day on coaching, the Thomas-Killman Conflict Mode Instrument (TKI) was discussed as part of a session discussing giving feedback.

The model explores how assertiveness is not about dominance, but about holding the values of others to an equal value of my own values. It discussed how the only win-win outcome for any issue about conflict requires collaboration (defined as assertive cooperation) and relies on both parties acknowledging the difference in the other.

This learning is directly linked to communication and made me reflect on what improvements I could make to the way my team members communicate with each other. Within my work environment there is one member of staff who appears to come into conflict with other individuals. As a member of the management team, part of my role is to help her to understand how her behaviour affects others and provide support to resolve any conflict issues. However, up until now, finding the right approach to opening the discussion has been difficult.

Meeting the standard(s) with example(s)

Having started to understand the TKI approach, I know understand that her behaviour is more dominant than assertive, which is unable to lead to win-win situations. I have changed my approach to managing staff and have shared thinking around the TKI model with the team. I have also spoken to the individual directly and discussed the model in more detail with the aim of helping her to reflect / increase her self-awareness of behaviours and to support her in resolving the conflict she is experiencing. Putting my learning into practice has benefited the team as well as the individual as we now all have an increased awareness of how to handle and resolve areas of tension.

It is still early days but the feedback from team members has been very positive, the team is working better as a result of the change and the incident log of complaints has reduced.

Feedback or evidence

Reflective account – dispensary pharmacy technician

Provide us with a reflective account of how you met one or more of the Standards for Pharmacy Professionals. [This particular record relates to standard 3].

I am a pharmacy technician in a busy hospital pharmacy department. I am an accuracy checking pharmacy technician and I also have responsibility for a team of assistants involved in the filling of dosett (MDS) boxes.

Setting of practice and main roles

The users of my services include the pharmacy team, other hospital staff and patients.

Typical users of service(s)

For my team to work effectively and for the dosett service to run efficiently good communication within the team is essential. We manage an average of 20 boxes a day and we often have to respond to urgent requests which means changes to our workload and prioritisation. This can prove challenging in a small team with other responsibilities

I arranged a meeting with the dispensary manager to discuss the dosett service and where I felt improvements could be made and the problems I have experienced with managing the team.

Meeting the standard(s) with example(s)

The meeting was helpful in terms of reflecting on my style of management and in particular how I communicate within the team. I have been able to reflect on the importance of communicating more effectively within the team so that we can improve the service we provide to patients. It is important to understand everyone's role and how difficult it is to deal with conflicting priorities. I have learnt the importance of good listening skills within the team and consider how I overcome barriers in communication which is particularly relevant as one of my team has dyspraxia and finds some particular tasks more challenging. We have introduced a method of handover with a view to improving the continuity of the service and reduce the risk of errors posed by poor handover of tasks within the team.

The feedback from team members has been very positive, the team is working and communicating better as a result of the changes to my approach. The written handover has meant a reduction in the number errors made in the dosett service and we are meeting more deadlines for patient discharge involving dosett dispensing.

Feedback or evidence