

TALKING POINT

ISSUE 1 | OCTOBER 2015

Best Practice
in Community
Pharmacy

In association with

PharmacyVoice
Speaking up for community pharmacy

TACKLING
SMOKING
AND OBESITY
THROUGH
PHARMACY



INNOVATIVE
AREAS CHANGING
HEALTHCARE
DELIVERY



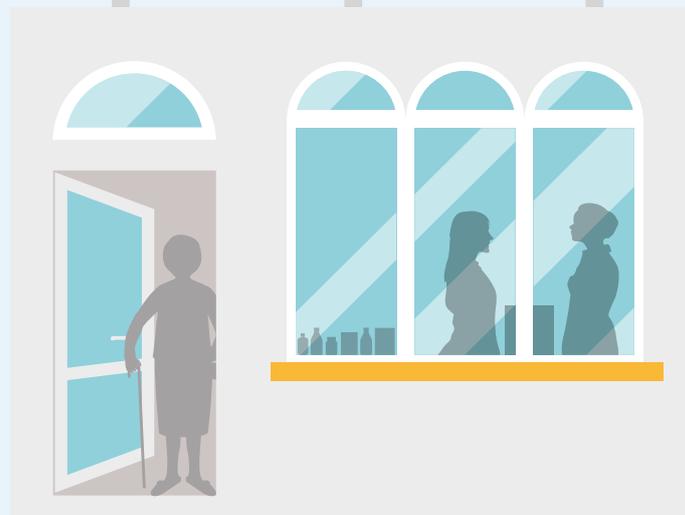
RIGHT
ROUTE:
RIGHT
CARE
CAMPAIGN



 **PHARMACY**

MAKING A
DIFFERENCE
TO PATIENTS

AWARD
WINNING
COPD
SERVICES



Helping commissioners, policy makers and pharmacy teams unlock the full potential of community pharmacy

a letter from **pfizer**



Paul Wilson,
Commercial Account Director

INTRODUCTION FROM PAUL WILSON



Pfizer Healthy
Partnerships

It gives me great pleasure to welcome you on behalf of Pfizer UK to the first edition of Talking Point. We are delighted to be working alongside Pharmacy Voice to provide a means of sharing best practice in pharmacy, bringing to life examples of delivering exceptional patient care across England.

Now more than ever before, it is widely recognised that pharmacists will play an increasingly integral role within our dynamic health service. The Five Year Forward View puts community pharmacy at the heart of an integrated care model, helping to steer more appropriate use of primary care providers and easing pressure from urgent and emergency care networks.

Initiatives such as Right Route: Right Care, developed by Pfizer Healthy Partnerships and endorsed by Pharmacy Voice, is an example of a step towards delivering a change in mind-set in patients, to ensure access to the most appropriate care at the right time and importantly, understand the valuable services offered by pharmacy.

Changes in the National Health Service (NHS), which includes the prevention of long-term conditions, present another ever-growing opportunity for the pharmacy community. Easing pressure on the system through routes such as enhanced services in pharmacy are critical to securing a sustainable future for the NHS. In this issue, we see several case histories of prevention working in practice - we hope this will stimulate thoughts and ideas so examples such as this can be adopted more widely across the country.

At Pfizer Healthy Partnerships, we remain committed to delivering an ongoing programme of high quality, accredited training and support initiatives, working in partnership with Pharmacy Voice. We hope this will assist in improving the integration of patient care in the community setting.

I hope you find this first issue of Talking Point engaging and we look forward to continuing to share examples of best practice in this ever-changing environment.

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a letter from **pharmacy voice**



Professor Rob Darracott,
Chief Executive of Pharmacy Voice

INTRODUCTION FROM ROB DARRACOTT

PharmacyVoice

Speaking up for community pharmacy

At Pharmacy Voice we know the community pharmacy sector is full of great pharmacists, and passionate pharmacy teams giving it their all every day to deliver excellent patient care. We know how many innovative services there are being led by the community pharmacy network across the country. But how many times have you heard politicians and policy makers describe our sector in terms of ‘untapped potential,’ or ‘underutilised resource’? These statements suggest the case for pharmacy is made, but the possibilities not yet fully realised. So, how can we speed up progress in properly integrating community pharmacy into primary care?

We hope that this series of Talking Point publications can help. We want to highlight what we believe are best practice examples of the work by pharmacy teams to help deliver innovative NHS and public health services that get results and improve patient outcomes. You will learn about several of these in this issue: from weight management and smoking cessation services being delivered in Hoxton, to Healthy Living Pharmacies in Lancashire and the impressive results

tackling COPD from the Community Pharmacy Futures team. But this publication is not just about showing what people are doing. Crucially, we want to show how they got there. How do these great services actually get commissioned and delivered? How can you resource them? How do you overcome the complicated commissioning process and fundamentally how do you convince people to get past “untapped” and “underutilised” to make a difference to patients and the public through community pharmacy?

We hope commissioners, policy makers, politicians, those working in the NHS, local government, as well as members of the public reading this, are excited about seeing the potential of community pharmacy turned into action, and recognise how integral it is in providing a sustainable, patient-centred NHS. And for those working in community pharmacies we hope that Talking Point will inspire you to see what is possible, and encourage you to get out there and see what your LPC and LPN is doing, talk to your area team, CCGs and others and to secure better opportunities to provide more care for patients

If you have great examples of best practice in community pharmacy you would like to share get in touch:

melissa.fife@pharmacyvoice.com or via [@PharmacyVoice](https://twitter.com/PharmacyVoice)

Click [here](#) to sign up to the Pharmacy Voice weekly newsletter.



areas to watch



Irfan Tariq,
Chair, Lancashire Local Pharmaceutical Committee

LANCASHIRE

A LEADING AREA WHERE COMMUNITY PHARMACY IS CHANGING HOW HEALTHCARE IS DELIVERED LOCALLY.

SERVICES TO BE PROUD OF

- The Healthy Living Pharmacy (HLP) programme runs Lancashire-wide and is being used as a quality outcomes framework
- An easy example to illustrate its value is the smoking cessation service. Under the HLP programme the stop smoking rates were higher and costs lower: 43% quit rate at a cost of £92 vs non HLP pharmacy quit rate of 38% at a cost of £110

OUR TIPS FOR GETTING LOCAL COMMUNITY PHARMACY SERVICES COMMISSIONED

- Identify your main stakeholders, develop an understanding of their priorities and goals and meet with them to discuss how you can help
- Use evidence-based examples to begin discussions and help develop a shared agenda enabling community pharmacy to be part of the solution

HOW IS COMMUNITY PHARMACY WORKING INNOVATIVELY IN LANCASHIRE?

There are two key things that demonstrate our innovation: our ambition and our success at aligning work plans. Our ambition is shown by our willingness to demonstrate how we can be part of evolving new models of care such as the Prime Minister's Challenge Fund, the Vanguard and Urgent and Emergency Care programmes. Our ambition to succeed means we provide a lot of support to contractors and their pharmacy teams, offering face-to-face support, by healthy living champions, technicians and pharmacists to help to implement Healthy Living Pharmacies.

We have worked hard to align the work plans and strategy for all pharmacy groups across Lancashire through great collaboration between the LPC and the LPN. This work has subsequently helped ensure that community pharmacy is a part of the NHS driven 'Healthier Lancashire' programme which is aligning plans across the whole Lancashire system.

WHAT HOLDS COMMUNITY PHARMACY BACK FROM PLAYING A BIGGER ROLE?

There is still a perception that community pharmacies primarily exist as retail outlets. In fact, more than 95% of most pharmacies turnover is from their NHS contract – we are really an NHS service that should be more central within primary care. Complicated commissioning processes slow the pace of change and patchy, localised commissioning means that it is very difficult for the public to understand what they can expect when they visit their local pharmacy.

In fact, more than 95% of most pharmacies turnover is from their NHS contract.

Within the sector it is a challenge to develop the right skill mix to help pharmacy teams engage and effectively deliver current and new services. This is not helped by the pharmacy contract being based on supply rather than improving patient outcomes. In Lancashire this is being helped in the pharmacies that are embracing the HLP ethos through leadership and change management training for the whole team. We are very encouraged that PHE is looking to double the numbers of HLPs by 2020.



Liz Stafford,
Lancashire LPC member

“IN LANCASHIRE WE HAVE A STRONG GROUP OF COMMUNITY PHARMACY CHAMPIONS WORKING AT LOCAL AND NATIONAL LEVEL WITH SHARED GOALS TO IMPROVE OUR POPULATION’S HEALTH”



Robbie Turner, Chief Executive
Community Pharmacy West Yorkshire

WEST YORKSHIRE

A LEADING AREA WHERE
COMMUNITY PHARMACY IS
CHANGING HOW HEALTHCARE IS
DELIVERED LOCALLY.

SERVICES TO BE PROUD OF

- The flu vaccination service increases patient choice as well as patient access and keeps people well. It also recognises and rewards pharmacy on a level playing field with other providers. We had to work very hard to negotiate it, but it has paid off

OUR TIPS FOR GETTING LOCAL COMMUNITY PHARMACY SERVICES COMMISSIONED

- Understanding commissioners' views on the health priorities and supporting them is a far more successful way of making pharmacy part of the solution than getting buy-in for a service proposition you've identified yourself
- Working with commissioners locally as part of the System Resilience Groups has enabled a more effective Pharmacy First service, which has now been commissioned in five CCG areas. This wouldn't have been possible without the commissioners and us working together

HOW IS COMMUNITY PHARMACY WORKING INNOVATIVELY IN WEST YORKSHIRE?

I believe our focus on supporting implementation and delivery of services is critical to our success. We probably spend more time on these elements than on developing and negotiating new services. This gives local commissioners vital confidence in our ability to deliver. The implementation of our Pharmacy Urgent Repeat Medicine (PURM) service is a good example of this. We supported pharmacy teams through the application process, designed the service to make it as easy as possible to deliver in a high quality way, provided step-by-step service guides and visited each and every pharmacy to make sure they understood what to do. Since the launch we've made sure we keep in touch with pharmacies so they can feed back any issues and we can keep them motivated and up-to-date.

DO YOU THINK PEOPLE UNDERSTAND WHAT COMMUNITY PHARMACY CAN OFFER?

People still lack understanding and respect for the work that pharmacy teams do day-in and day-out including commissioners and other healthcare professionals. Pharmacy teams really work hard to support vulnerable patients; without pharmacy teams they would find it impossible to use their medicines safely.

Community pharmacy should play a bigger role in improving medicines usage. Medicines are the most common intervention we use to help people manage their long term conditions and yet around 50% of people don't take their medicines correctly. I'd like to see more services built around this which would improve health outcomes and reduce

waste within the NHS. Supporting patients with asthma or COPD to get the right inhalers for their condition and regularly supporting them to effectively self-manage their condition would be a good place to start.

WHAT HOLDS COMMUNITY PHARMACY BACK FROM PLAYING A BIGGER ROLE IN PRIMARY CARE?

Capacity is a big barrier and we need to make sure holistic patient care from community pharmacy is recognised and funded adequately in the contract.

Something easier to fix is confidence. There is great potential for pharmacy teams who recognise how important the small conversations with patients are. Giving someone a tip on how they can better remember to take their medicines (eg keep them by your toothbrush) or making sure people injecting insulin know the importance of rotating their injection site doesn't always happen. These conversations require some confidence and know-how but make a huge difference to patients.

HOW SHOULD COMMISSIONERS MAKE BETTER USE OF COMMUNITY PHARMACY?

Patients demand and deserve better support to help self-manage their conditions. They want easily accessible advice and support from someone who has the knowledge and ability to help them reach their goals. The skills of the whole pharmacy team should be utilised to support patients to look after their own health problems to keep them healthier for longer.

tackling public health

COMMUNITY PHARMACY SUCCESSFULLY HELPING PEOPLE TO STOP SMOKING AND LOSE WEIGHT



Raj Radia,
Community pharmacist

Two years ago Doreen Stewart* could barely make it out of her house. Struggling with a BMI close to 45 her local community pharmacist Raj Radia encouraged her to start a 24 week weight management service. Today life couldn't be more different. With her BMI below 40 and continuing to drop Doreen's outlook has been transformed: she walks regularly, plays with her grandchildren and has fewer health complaints.

This story is not unusual among patients at Spring Pharmacy in Hoxton, London which Raj has run for the past 27 years, taking on the business when he was just 25. He is passionate about the role for

community pharmacy in supporting public health issues. In turn, his work helps prevent more serious health problems and their knock on impact on the health service. To illustrate this Raj cites another patient, an ex-boxer with an initial BMI of 38 who is mid-way through the weight management service. He is steadily losing weight and the bowel problems he had been taking medication for have cleared up.

Raj's track record on weight management and smoking cessation reflect his passion. There is a waiting list for his weight management service despite referrals to other local pharmacies. On smoking cessation Raj celebrates an average of over 60 quitters a year.

This success didn't come without hard work. Raj explains, "*Way back when I started out, there were no extra services in community pharmacy but I've always felt there is huge potential. In Hackney there are high levels of social deprivation, many different cultures and also a growing number of City workers. Across all these groups people appreciate the accessibility, convenience and informality of their pharmacy. Locally both independents and multiples have worked together to help take our profession to the next level.*"

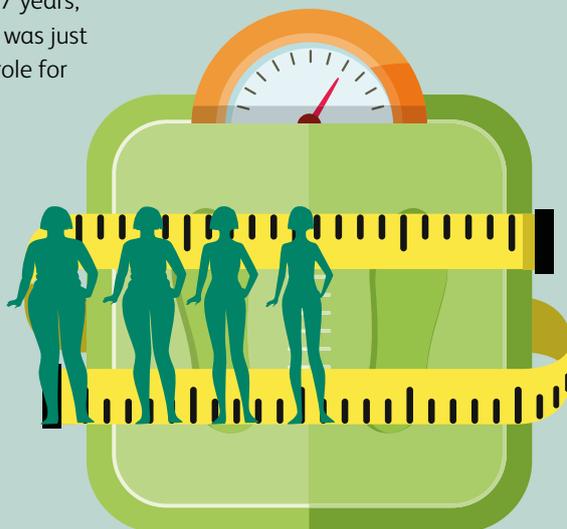
He continues, "Local commissioners are unlikely to take a chance on pharmacy unless you show them. Look at Health and Wellbeing Boards. Many in pharmacy complain that they don't have pharmacy represented – but the meetings are publicised and they are open door. If you want greater representation go to them and make sure pharmacy is part of the discussion! Having a broader understanding of local issues will also help when it comes to negotiating services."

Raj believes that in order to change pharmacy needs to think innovatively and do things differently. For Spring Pharmacy this has meant bringing in a second pharmacist. "*There are two things that have been central to our success in public health interventions: employing a second pharmacist and understanding the importance of training. I looked at what services I wanted us to do and what level we would need to do to bring in a second pharmacist. I then worked towards that. We also do flu vaccinations and have a travel clinic, both of which greatly benefit from having a second pharmacist on site.*"

"*The right training for the whole pharmacy team is very important. You need to work to improve skills on public interaction for example, to help identify when you can have the right conversations with patients.*"

Looking to the future, the City and Hackney LPC which Raj Radia chairs is still hard at work to help continue to support many others like Doreen Stewart. The LPC is working towards introducing a Healthy Living Pharmacy model and they have created a provider company to enable local authorities and Clinical Commissioning Groups to contract with one body and simplify the commissioning process.

*patient name has been changed.





CITY AND HACKNEY COMMUNITY PHARMACY WEIGHT MANAGEMENT SERVICE

WHO IS ELIGIBLE?

Local residents with a BMI of over 30. If the patient has co-morbidities this lowers to 25. The pharmacist screens potential candidates via a form and informal conversation to ensure adequate motivation.

HOW LONG IS THE PROGRAMME?

Six months.

WHAT HAPPENS AT THE INITIAL CONSULTATION?

One of the pharmacy team measures height, weight and blood pressure. The pharmacist has an initial consultation discussing the process, nutrition information, exercise information.

DOES THE PROGRAMME INCLUDE MEDICATION?

Patients are prescribed Orlistat which is a weight loss aid. For every 2lbs lost the patient will lose an additional 1lb.

HOW MUCH CONTACT IS THERE WITH THE PHARMACIST?

Month 1: Initial consultation and then weekly meetings. Month 2 & 3: fortnightly consultation. Month 4-6: monthly consultation. The initial consultation lasts approximately 30 minutes, subsequent consultations last 15 minutes.

IS THERE OTHER ASSISTANCE?

The pharmacist refers patients to the local gym where they receive a three month free membership. Fees are then only gradually introduced taking two years to reach full price.

HOW IS THE PHARMACY REMUNERATED?

The six month fee is £200 (roughly £20 per consultation) and the prescription fee for Orlistat. The service is not capped and Spring Pharmacy manages to take on 12 patients on the programme at any one time.

ARE THE PHARMACISTS TRAINED?

Pharmacists and pharmacist technicians receive training from NHS dieticians as well as completing accredited CPPE training.

HOW IS THE SERVICE PROMOTED?

This is down to the pharmacist. Spring Pharmacy has had success through in-store TV screens, leaflets and engaging patients directly.



CITY AND HACKNEY COMMUNITY PHARMACY SMOKING CESSATION SERVICE

WHO IS ELIGIBLE?

Local residents or those who work locally are both eligible. There is a screening process to ensure the patient has adequate motivation.

HOW LONG IS THE PROGRAMME?

12 weeks.

WHAT HAPPENS AT THE INITIAL CONSULTATION?

A member of the pharmacy team initially offers some brief advice and invites them back for an official consultation if the patient is engaged. During this session a member of the pharmacy team discusses nicotine reduction therapy (NRT) options and behaviour change.

DOES THE PROGRAMME INCLUDE MEDICATION?

The programme has a choice of NRT products or varenicline (chamfix).

HOW MUCH CONTACT IS THERE WITH THE PHARMACIST?

The initial consultation is 30-45 minutes followed up by shorter weekly consultations over the 12 weeks. This service is not totally dependent on the pharmacist and all Spring Pharmacy counter assistants are at least Level 2 trained.

HOW IS THE PHARMACY REMUNERATED?

Payment is by results and is £138 if the patient quits within five weeks. Some NRT is also covered. It is a popular service and Spring Pharmacy has between 15-20 people on the programme at any one time.

ARE THE PHARMACISTS TRAINED?

Yes, pharmacists and counter assistants at Spring Pharmacy are trained to Level 2 standard.

HOW IS THE SERVICE PROMOTED?

Public awareness that pharmacy offer smoking cessation services is fairly good through Public Health England promotion. Help from a healthcare professional means you are five times more likely to quit smoking.



right route: right care

A NEWLY UPDATED VERSION OF THE 'RIGHT ROUTE: RIGHT CARE' CAMPAIGN HAS BEEN LAUNCHED BY PFIZER HEALTHY PARTNERSHIPS (PHP) WITH ENDORSEMENT FROM PHARMACY VOICE.

IT AIMS TO SUPPORT PHARMACY TEAMS IN ENCOURAGING THE PUBLIC TO MAKE THE MOST EFFECTIVE USE OF THEIR LOCAL NHS SERVICES, WHICH IN TURN WILL HELP TO REDUCE THE STRAIN ON HOSPITAL ADMISSIONS IN THE UK AND ENSURE THAT PATIENTS GAIN THE RIGHT INFORMATION ABOUT THEIR HEALTHCARE.

"THE RIGHT ROUTE: RIGHT CARE CAMPAIGN WAS FIRST LAUNCHED IN SEPTEMBER 2014. DURING THE INITIAL ROLLOUT, WE CONDUCTED A SURVEY OF 125 PATIENTS IN OUR PHARMACY IN SLOUGH. AS A RESULT OF THE CAMPAIGN OVER HALF OF THOSE SURVEYED INDICATED THAT THEY WOULD CHANGE THEIR BEHAVIOUR AND 17% WERE VISITING PHARMACY."⁶

Andrew Lane,
Alchem Healthcare,
Slough



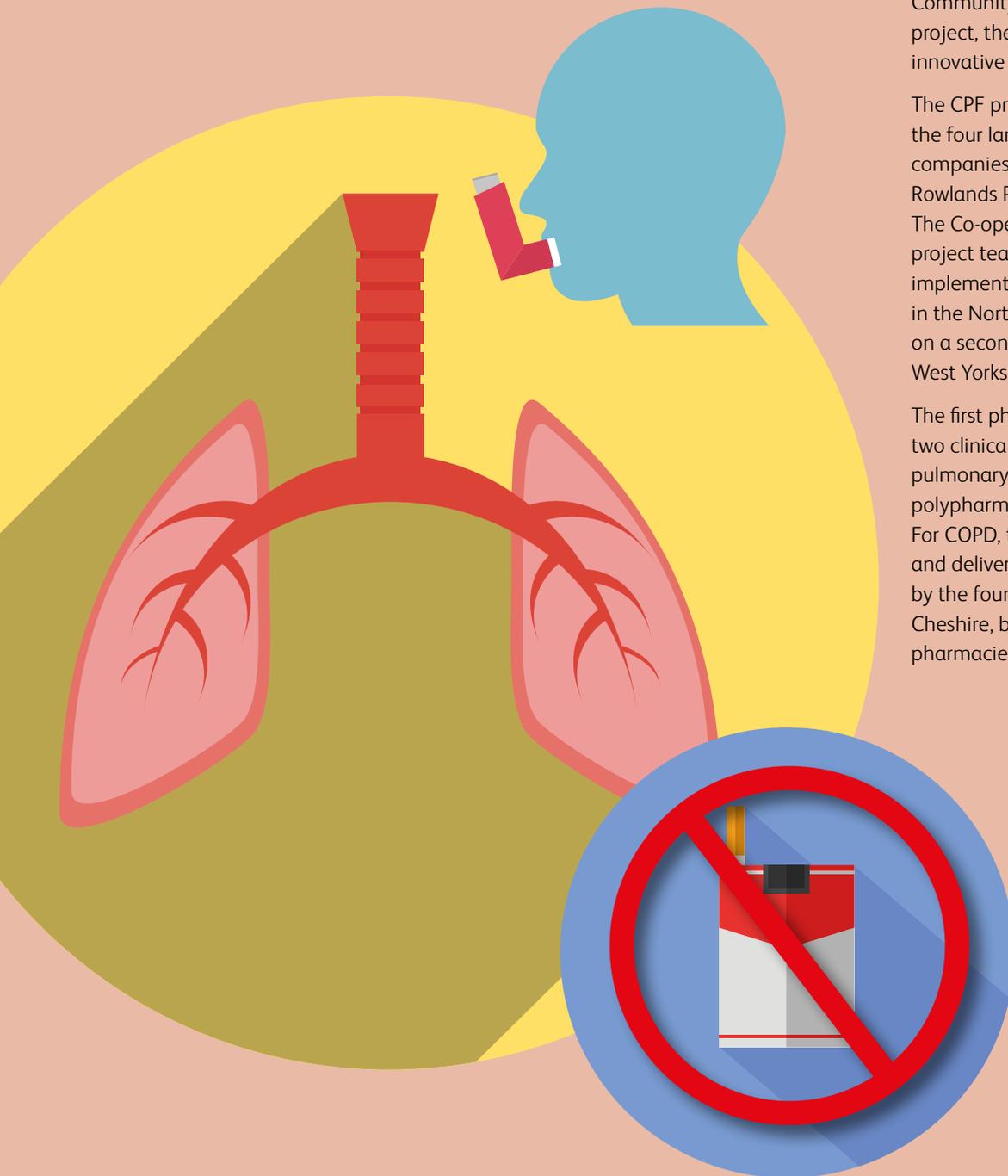
award-winning services **that** **improve the lives of people** **with COPD**

.....
**COMMUNITY PHARMACY
FUTURE**
.....

Patients in north-west England have seen significant improvements in their quality of life and the outcomes of their treatments thanks to tailored support from their community pharmacies. This success for patients has been reflected in national awards for the Community Pharmacy Future (CPF) project, the team behind the innovative services.

The CPF project is a collaboration between the four largest community pharmacy companies, Boots UK, LloydsPharmacy, Rowlands Pharmacy and Well (formerly The Co-operative Pharmacy). The joint project team has successfully designed, implemented and evaluated three services in the North West and is now working on a second, more integrated service in West Yorkshire.

The first phase of the project focused on two clinical areas – chronic obstructive pulmonary disease (COPD) and polypharmacy among older patients. For COPD, two services were set up and delivered from pharmacies owned by the four companies on the Wirral, Cheshire, before being extended to other pharmacies in the area.





faces of **the future**

EVERY DAY COMMUNITY PHARMACISTS ACROSS THE COUNTRY MAKE A DIFFERENCE. HEAR HOW THEY DO IT FROM OUR GRASSROOTS CHAMPIONS



*Adenola Olayide,
Pharmacist manager*

Adenola Olayide has worked with Day Lewis for 13 years and is currently manager and responsible pharmacist at a branch in East Dulwich, London. Ade also is a pharmacist prescriber, a pre-reg tutor, a pharmacy adviser and inspector.

WHAT INSPIRES YOU?

Patient interaction; as a community pharmacist you are always available to both patients and customers which is highly rewarding.

WHAT IS THE MOST SATISFYING ASPECT OF YOUR ROLE?

It is the moments when patients come back to show appreciation and you know you've made a difference. For example, recently the wife of one of my patients came back to thank me for saving her husband's life. He came to buy some antacids for what he thought was heartburn. His symptoms suggested to me that it was more serious, so I referred him to his doctor who immediately called an ambulance. He was later rushed to theatre for an operation because he was having a heart attack.

WHAT DO YOU NEED TO GO FAR IN COMMUNITY PHARMACY?

Community pharmacy is a service industry so you must be confident and ready to engage with customers and your team as well as offer excellent patient care. Good communication skills are vital and you need to learn to work well with other healthcare professionals.

DO YOU THINK PHARMACY TEAMS CAN RELIEVE THE PRESSURE ON GPs AND A&E?

Absolutely. The local minor ailment scheme is a great example. Just last week a mother came to the pharmacy explaining her child had a rash but she couldn't get a doctor's appointment. She was thinking of going to A&E. I signed her up to the local minor ailment scheme and offered her the necessary treatment. Three days later she came and thanked me as the rash was clearing up. The flu vaccination service is another example. We doubled the number of people vaccinated this year and our customers were delighted with the service because of the ease of it. They could have the jab while they waited for their prescriptions. Our local GP was so impressed that they referred their patients to us, again relieving pressure on them.

WHAT ADVICE WOULD YOU GIVE TO SOMEONE STARTING OUT IN COMMUNITY PHARMACY?

Show that you are passionate about the profession. Be ready to promote the profession at any opportunity in social or professional circles. Take time to build a professional network and always strive to do the utmost for patients.

pathways to representation

MAKING THE CASE FOR COMMUNITY PHARMACY TO HAVE GREATER LOCAL REPRESENTATION

Is it game over if, when it comes to getting your voice heard, you have no representative on Health and Wellbeing Boards and Clinical Commissioning Groups? Pharmacy Voice has found that community pharmacy is not alone in asking this question. It is a challenge shared by optometry and audiology, and one that we decided to tackle.

One solution came indirectly via the collaboration of Pharmacy Voice, the Optical Confederation and the National Community Hearing Association (NCHA) at the political party conferences in the autumn of 2014. Under the banner of 'We Are Primary Care' we attended and exhibited together and met with a wide range of national and local politicians and activists. There was a high level of political engagement, interest and excitement at what we had to offer. This encouraged us to challenge local representation at a political level.

Not long after the conference a pharmacy visit by the Labour MP for Ealing Southall, Virendra Sharma, provided the opportunity. He shared our frustration that local healthcare services weren't listening enough to each other and became an advocate. Later that day he tweeted, *"The integration of health and social care which spans across both pharmacy's and optician's work is key to improving outcomes."*

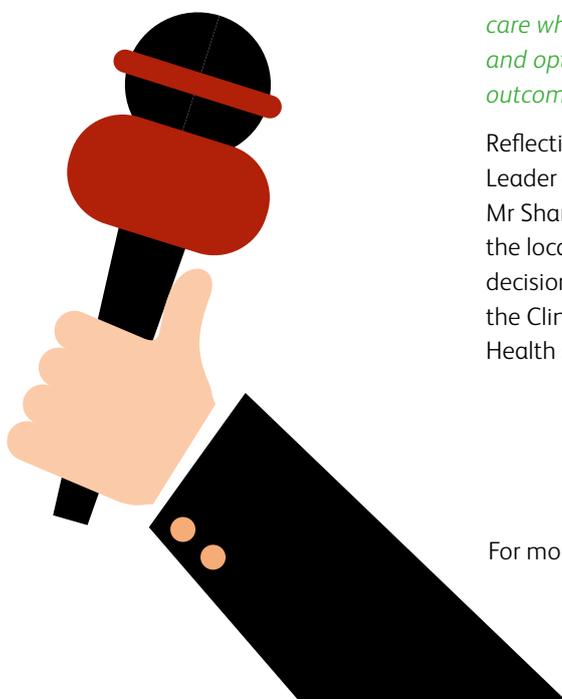
Reflecting the local MP's concern, the Leader of Ealing Council invited Mr Sharma and representatives from the local council to meet with local health decision making groups. This included the Clinical Commissioning Group, the Health and Wellbeing Board the Local

Pharmaceutical Committee (LPC), Local Optical Committee Support Unit (LOCSU), the NCHA and Pharmacy Voice to talk about improvements needed to benefit the local population.

The meeting held in February 2015 was the first of its kind in Ealing. The discussions focused on improving local care to residents with each representative listening and sharing insight on current activity and how they could contribute more to better patient outcomes. Many of the conversations highlighted the needs of people living with long term conditions and strategies for improving self care.

Hiten Patel, Pharmacy Voice Board member and owner of Mattock Lane Pharmacy, Ealing commented, *"In NHS England's Five Year Forward View, the integrated healthcare system is a central theme, but it can only be achieved through collaboration. This means pharmacy needs to be in the same room and at the table when discussions about how to improve and redesign care are taking place. The meeting has helped move us forward. I secured agreement to become a member of the Better Care Fund Committee and also the Steering group for Self Care. All parties could see how valuable it is for community pharmacy to be represented in these forums. Other areas should consider how they too can make sure the right people are listening – your local MP is a good place to start."*

The leader of Ealing council has proposed a follow up meeting later in 2015 to assess progress.



For more information please visit: <http://www.middlesexlpcs.org.uk/>

php training

IT IS A TIME OF CHANGE FOR THE NHS. AS A RESULT THERE IS A SIGNIFICANT IMPACT ON THE ROLES OF THE PHARMACIST AND THE PHARMACY TEAM, WHICH NEED TO EVOLVE TO MEET NEW DEMANDS IN A CHALLENGING ENVIRONMENT.¹

THE TRADITIONAL ROLE OF DISPENSING MEDICINES NOW EXISTS ALONGSIDE ADVANCED OR ENHANCED SERVICES, SUCH AS PATIENT CONSULTATION THROUGH MEDICINES USE REVIEWS (MURS), NEW MEDICINES SERVICE (NMS) AND ADHERENCE PROGRAMMES TO HELP SUPPORT PEOPLE USING MEDICINES.¹

Pfizer's commitment to supporting the future of pharmacy is represented by Pfizer Healthy Partnerships (PHP).

Forming part of the PHP Pharmacy Support Programme are a number of on-demand learning resources and skills development training that pharmacists may hopefully find valuable to their professional development.

These modules and workshops are designed to help equip pharmacy with the skills needed to move forward with their evolving role, which in turn could help enhance the patient experience and achieve better patient outcomes.

PHP is supported by a dedicated team who are in regular dialogue with pharmacists, both in primary and secondary care environments. The resources available now and those in development are as a result of feedback from pharmacy.

CONFIDENT CONVERSATIONS

The 'Confident Conversations' on-demand training modules are accredited by the Royal Pharmaceutical Society. They aim to stimulate thinking and are dedicated to examining and practising soft skills tools for effective communication with patients and colleagues.

The modules cover the following areas:

- Exercises to help boost confidence levels
- Defining effective listening
- Practising how and when to build rapport
- Questioning techniques

PAIN TRAINING

Talking to patients and asking questions about the type of pain they are experiencing will enable pharmacy teams to offer advice about medicines and lifestyle changes that could help patients better manage their pain. PHP aims to support pharmacy teams in these consultations with the pain-specific resources that are available on Access Pfizer:

Supporting Patients with Pain Training Modules

These training modules aim to enhance education and training, to help improve patient pain management and focus on:

- Pain – the scale of the problem
- Categorising pain
- The pain cycle
- Measuring pain

Pain management resources materials

Resources to help you support patients with pain:

- Neuropathic Pain: Pharmacists Counselling Guide
- A better picture of chronic pain
- Chronic pain resources

INDISPENSIBLE LEADERSHIP SKILLS

This on-demand module is dedicated to examining and practising soft skills tools for leadership development. The areas that are covered include:

- Top tips on identifying leadership behaviours
- Principles of good communication, motivation, coaching and feedback
- Feedback checklist



ANTIMICROBIAL STEWARDSHIP MANAGING IV TO ORAL

Also accredited by the Royal Pharmaceutical Society, this resource aims to:

- Provide insights into how IV to oral switch fits within the principles of antimicrobial stewardship
- Raise awareness to national guidelines and local trust policies for IV to oral antibiotic switching
- Consider opportunities for early discharge through implementing IV to oral switches

All the on-demand learning resources and skills development training modules referred to in this article are available to view within the Supporting Professional Development pages at accesspfizer.co.uk

In 2016 Pfizer will continue to work with several key leaders across pharmacy to develop further resources. These resources aim to support pharmacy in line with the needs identified in the General Pharmaceutical Council Strategic Plan 2015-18.² Pfizer believe that working in collaboration can help unlock the full potential of pharmacy as a whole, and the capacity of pharmacy professionals moving forward, which in turn can help improve patient outcomes.

THERE IS EVIDENCE THAT PAIN IS IN AN AREA IN WHICH A MAJORITY OF PEOPLE ALREADY SEEK HELP FROM PHARMACISTS, AND EXPECT THEM TO HAVE A SPECIAL EXPERTISE.³

Relieving Persistent Pain, Improving Health Outcomes, UCL School of Pharmacy and the Clinical Pharmacy Association

THERE IS NOW A POLICY CONSENSUS THAT THE TIME IS RIGHT FOR PHARMACISTS TO TAKE ON A BROADER ROLE IN THE NHS AND SOCIAL CARE, AND THAT IN DOING SO THE PROFESSION CAN MEET IMPORTANT NEEDS, BOTH FOR PATIENTS AND FOR THE INCREASINGLY STRAINED WIDER HEALTH AND SOCIAL CARE SYSTEM.⁴

Now More than Ever: Nuffield Trust



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