MEDICATION SAFETY

EXPERT PROFESSIONAL PRACTICE CURRICULUM

Professional curriculum to support members with
the knowledge, skills, experience and behaviours
to advance in their practice

2014

ROYAL PHARMACEUTICAL SOCIETY
FACULTY

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This publication is intended as a guide and may not always include all information relating to its subject matter.

You should interpret all information and advice in light of your own professional knowledge and all relevant pharmacy and healthcare literature and guidelines.

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This curriculum has been produced by RPS Faculty partners to support continued advancement in all areas of pharmacy practice.

During 2014 the Curricula Panel of the RPS Faculty will continue to develop the vision for post graduate development to produce the highest quality pharmacy workforce. The Faculty will continue to work with experts and specialist groups to form new guidance for professional advancement. The layout and themes in these curricula may be subject to change. Reviews of curricula can be expected annually while the Faculty is being set up. Please check that you are using the most up to date version of the curricula on the RPS Faculty website (www.rpharms.com/faculty).

Acknowledgements

The mapping tables in this document use the Royal Pharmaceutical Society Advanced Pharmacy Framework (APF) which builds on the widely used Advanced to Consultant Level Framework (ACLF) which was developed by the Competency Development and Evaluation Group (CoDEG).

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Professional Curriculum for Advanced Pharmacy Practice in Medication Safety

Pharmaceutical Care in Medication Safety

This curriculum provides an overview of the knowledge, skills, experience and skills required to practice at advanced level in Medication Safety at three stages: Advanced Stage I, Advanced Stage II and mastery, in line with the requirements of the APF.

The document is intended to be used by practitioners to support the development of their practice at advanced level in Medication Safety. It encourages practitioners to think critically and to use knowledge in Medication Safety, supporting informed decision making using knowledge from this and other related therapeutic areas to promote optimal medicines management for patients. The curriculum also encourages the development of skills in informed, critically relevant, effective discussion with other health and social care practitioners, peers and managers, where appropriate, to maximise optimal medicines related care for patients.

This document is intended to be as useful to the wider community working with Medication Safety as possible from all sectors of care. The syllabus is not intended to cover every aspect of practice and inevitably overlaps with a number of specialities. Users are encouraged to link this syllabus with others in related fields, also known as critical adjacencies).

This curriculum will be reviewed annually as to whether any update or changes are required. Every five years there will be an external review including external experts to re-evaluate the curriculum. Feedback is encouraged to ensure that the document is error-free, fit for purpose and accurately reflects the needs of pharmacists working at the specified levels.

Knowledge, Skills, Experience and Behaviours

Practitioners will develop their portfolios linked to the APF. The recommended knowledge, skills, experience and behaviours which practitioners require to demonstrate competence at Advanced Stage I, Advanced Stage II and Mastery stage for the Expert Professional Practice and Collaborative Working Relationships clusters of the APF in an area of advanced practice, be that clinical, specialist or generalist, are listed here with additional notes and specific examples for Medication Safety. The APF mapping tables in this document links the recommended knowledge, skills, experience and behaviours with the relevant competency level descriptors. Examples of the recommended knowledge, skills, experience and behaviours are included below. For a comprehensive list see the mapping tables.

Advanced Stage I

- Demonstrates a basic knowledge of error theories and their application to medicines use.
- Demonstrates a basic understanding of the risk to patients in relatively high risk groups e.g. paediatrics, oncology, haematology, intensive care.
- Demonstrates a basic knowledge of incident investigation tools and their strengths and weaknesses.

Advanced Stage II

- Uses theoretical model(s) of error, such as Reason's Accident Causation Model, to influence local practice.
- Applies advanced knowledge and understanding of the Medication Safety literature and resources available at an organisational level.
- Contributes to the literature on medicines safety
- Identifies latent risks at different stages of a care pathway and across multidisciplinary boundaries.

Mastery

- Contributes to the knowledge base related to patient safety.
- Contributes research and opinion to the literature related to patient safety.
- Leads the development, implementation and evaluation of Medication Safety solutions within the organisation.
- Contributes to Medication Safety practice or development in the wider health economy.

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Resources for Curriculum Development

This list is collated from the recommendations of practitioners and is not meant to be comprehensive.

Useful Websites

- Department of Health Policy http://www.dh.gov.uk/health/category/policy-areas/nhs/ e.g. Quality accounts, patient safety thermometer, never events, clinical governance guidance.
- NHS Litigation Authority http://www.nhsla.com
- Care Quality Commission http://www.cqc.org.uk/
- NHS Patient safety website http://www.nrls.npsa.nhs.uk
- Medicines Healthcare Products Regulatory Agency (MHRA) http://www.mhra.gov.uk e.g. Yellow Card Reporting System, safety warnings, alert system, medical devices
- National Audit Office http://www.nao.org.uk
- NHS Institute of Innovation and Improvement http://www.institute.nhs.uk/
- Patient Safety First www.patientsafetyfirst.nhs.uk
- The Health Advanced Stage I http://www.health.org.uk
- Institute for Healthcare Improvement www.ihi.org
- Institute for Safe Medication Practices: www.ismp.org
- NHS Scotland. Scottish Patient safety Programme http://www.scottishpatientsafetyprogramme.scot.nhs.uk/programme
- Healthcare Improvement Scotland http://healthcareimprovementscotland.org/home.aspx
- American Society for Healthcare Risk Management www.ashrm.org
- Australian Patient Safety Advanced Stage I www.apsf.net.au
- Canadian Patient safety Institute http://www.patientsafetyinstitute.ca/English/Pages/default.aspx
- World Health Organisation (WHO) http://www.who.int/patientsafety e.g. Curriculum Guide

Textbooks

- Vincent C. Patient safety 2nd Ed. 2010 Oxford, BMJ Books, Wiley-Blackwell. http://www.wiley.com/legacy/wileychi/vincent/supp/Essentials_final_complete.pdf
- Naylor R. Medication Errors: Lessons for education and healthcare. 2002 Oxford, Radcliffe Medical Press.
- Runciman B. Merry A, Walton M. Safety and ethics in health care: a guide to getting it right. 2007 London, Ashgate Publishing.
- Merry A., McCall Smith A. Errors, Medicine and the Law. 2001 Cambridge, Cambridge University Press.
- Reason J. Human Error. 1990 New York, Cambridge University Press.

National Guidance

- Chief Medical Officer. An organisation with a memory. Report of an expert group on learning from adverse events in the National Health Service. 1999 London, Department of Health.
- National Patient Safety Agency. Seven steps to patient safety: your guide to safer patient care. 2003 London. http://www.nrls.npsa.nhs.uk
- Smith J. Building a safer NHS for patients: improving Medication Safety. 2004 London, Department of Health.
- National Audit Office. Department of Health. A Safer Place for Patients: Learning to improve patient safety. London: Comptroller and Auditor General 2005 (HC 456 Session 2005-2006)3.
- Manchester Patient Safety Framework (MaPSaF) 2006.
- Design for patient safety guides. London, NPSA. http://www.nrls.npsa.nhs.uk/resources/collections/design-for-patient-safety/ e.g. dispensary design, labelling and packaging of medicines
- NRLS/NPSA resources, Alerts, Rapid Response Reports, Signals, etc. http://www.nrls.npsa.nhs.uk/resources/
- Being Open Framework. London, NPSA 2009.
- Safety in Doses: Improving the use of medicines in the NHS. 2009 London, NPSA.
- Root Cause Analysis (RCA) Tools: Generating Solutions. 2010 London, NPSA.

- British Pharmacology Society. Ten Principles of Good Prescribing. 2009
  http://www.bps.ac.uk/SpringboardWebApp/userfiles/bps/file/Clinical/BPSPrescribingStatement03Feb2010.pdf
- National Prescribing Centre provided by NICE. 10 top tips for GPs: Strategies for safer prescribing. 2011
  http://www.npc.co.uk/evidence/resources/10_top_tips_for_gps.pdf

Supporting References and External Resources:

United Kingdom

- Failure Modes and Effects Analysis Tool. Institute for Health Improvement. USA, Cambridge. www.ihi.org
- National Patient Safety Agency. Patient Safety Toolkits and e-learning packages.
  https://report.npsa.nhs.uk/rcatoolkit/course/iindex.htm
- Reason: Human Error: models and management. BMJ. 2000 March 18;320(7237):768–770.
- Lewis PJ et al. Prevalence, incidence and nature of prescribing errors in hospital inpatients: a systematic review. Drug Safety 2009;32(5):379-89
- James KL, Barlow D, McArtney R, Hiom S, Roberts D, Whittlesea C . Incidence, type and causes of dispensing errors: a review of the literature. Int. J Pharm. Pract. 2009 Feb;17(1):9-30
- World Health Organisation (WHO) Patient Safety Curriculum Guide: Multi-professional edition. 2011.
- Cousins DH, Gerrett D, Warner B. A review of medication incidents reported to the National Reporting and Learning System in England and Wales over six years (2005–10) BJCP 2012;74(4):597-604
- Dornan T., Ashcroft T., Heathfield H. et al An in depth investigation into causes of prescribing errors by Advanced Stage I trainees in relation to their medical education – EQUIP study. Dec 2009 Manchester
  http://www.gmc-uk.org/FINAL_Report_prevalence_and_causes_of_prescribing_errors.pdf_28935150.pdf
- The Health Advanced Stage I. Evidence scan: Reducing prescribing errors
  http://www.health.org.uk/publications/reducing-prescribing-errors/
- Avery T., Barber N., Ghaleb M. et al. Investigating the prevalence and causes of prescribing errors in general practice: the PRACtICe Study. A Report for the GMC. May 2012. London, General Medical Council.
  http://www.gmc-uk.org/Investigating_the_prevalence_and_causes_of_prescribing_errors_in_general_practice___The_PRACtICe_study_Reoprt_May_2012_48605085.pdf

International

- World Health Organisation (WHO) (2011) Patient Safety Curriculum Guide: Multi-professional edition.
- Runciman WB et al. Adverse drug events and medication errors in Australia. International Journal for Quality in Health Care 2003;15(Suppl.1):S49–S59.
- Silver MP, Antonow JA. Reducing medication errors in hospitals: a peer review organisation collaboration. Joint Commission Journal on Quality Improvement 2000;26:332–340.
- Kohn LT, Corrigan JM, Donaldson MS, eds. To err is human: building a safer health system. 1999 Washington, DC, Committee on Quality of Health Care in America, Institute of Medicine, National Academies Press.
- Us Ascension Health system http://www.ascensionhealth.org/ht_safe/main.asp
- de Vries EN, Ramrattan MA, Smorenburg SM, Gouma DJ, Boermeester MA. The incidence and nature of in-hospital adverse events: a systematic review. Quality & Safety in Health Care 2008;17(3):216-23.

APF Mapping Tables

The following tables list the knowledge, skills, experience and behaviours recommended to demonstrate the APF competencies for the Expert Professional Practice and Collaborative Working Relationships clusters mapped against the relevant APF developmental descriptors. It is intended primarily to support practitioners to develop their practice, but may be useful for portfolio preparation. All statements relate to the practitioner's area of practice/clinical speciality.

The competencies listed for "Advanced Stage I", "Advanced Stage II" and "Mastery" are additive, i.e. those at "Advanced Stage II" build on the competencies established in "Advanced Stage I". Practitioners are expected to demonstrate "Advanced Stage I" first before moving on to "Advanced Stage II". Those wishing to demonstrate "Advanced Stage II" will usually be expected to have demonstrated "Advanced Stage I" level previously. Those wishing to demonstrate "Mastery" stage will usually be expected to have demonstrated "Advanced Stage II" previously.

A pharmacist starting to specialise in an area of Expert Professional Practice might be expected to be working towards attaining competencies at Advanced Stage I. A practitioner having attained Advanced Stage I in an area of Expert Professional Practice might be expected to be working towards attaining competencies at Advanced Stage II.

At Advanced Stage I practitioners are expected to build on the General Level Framework competencies for monitoring and implementing measures to improve Medication Safety.

At Advanced Stage II practitioners are expected to build on Advanced Stage I competencies and (for the relevant developmental descriptors) to demonstrate experience in monitoring and implementing Medication Safety.

At Mastery stage practitioners are expected to build on Advanced Stage II competencies and (for the relevant developmental descriptors) to demonstrate experience in monitoring, implementing Medication Safety and providing advice to other professional groups.

At the head of each column is a statement to indicate content. Underneath in parentheses is the original statement from the APF which is included here to give some context and link to the original. The main headings of the other sections of the APF are listed on page 13-14 for reference only.

Where the word 'local' has been used it signifies practice in relation to the individuals' organisation.

Expert Professional Practice – Expert Skills and Knowledge (Cluster 1.1)

Improving standards of pharmaceutical care for patients.

1.1 EXPERT SKILLS AND KNOWLEDGE		ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors		Demonstrates general pharmaceutical skills and knowledge in core areas. In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients in core areas.	Demonstrates in-depth pharmaceutical skills and knowledge in defined area(s). In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s).	Advances the knowledge base in defined area(s). In addition for patient focussed roles: Advances in-depth/complex pharmaceutical care programmes for patients.
Recommended knowledge, skills, experience and behaviours	Theory	Demonstrates a basic knowledge of error and safety theories and their application to medicines use. Demonstrates a basic understanding of the risk relating to patients, medicines and processes in relatively high risk groups. Demonstrates a basic knowledge and understanding of the literature and resources available. Understand how factors relating to patients, healthcare professionals, workplace design and the design of medication processes contribute to medication errors.	Uses error and safety theory to influence local practice. Demonstrates an advanced understanding of the risk relating to patients, medicines and processes in relatively high risk groups. Applies advanced knowledge and understanding of the literature and resources available. Contributes to the literature on Medication Safety.	Keeps abreast of current national and international developments in relation to error and safety theory and patient safety. Contributes to the knowledge base related to patient safety with specific reference to medicines. Contributes research and opinion to the literature related to patient safety.

Expert Professional Practice – Expert Skills and Knowledge (Cluster 1.1)

Improving standards of pharmaceutical care for patients.

1.1 EXPERT SKILLS AND KNOWLEDGE		ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors		Demonstrates general pharmaceutical skills and knowledge in core areas. In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients in core areas.	Demonstrates in-depth pharmaceutical skills and knowledge in defined area(s). In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s).	Advances the knowledge base in defined area(s). In addition for patient focussed roles: Advances in-depth/complex pharmaceutical care programmes for patients.
Recommended knowledge, skills, experience and behaviours	Organisation and Culture	Describes the contribution of organisational culture to patient safety and relate it to local practice. Describes local clinical governance/Medication Safety structures. Describes the respective roles and responsibilities of a multidisciplinary approach in relation to medicines safety. Describes the roles of local & external agencies involved in governance and risk (locally, regionally and nationally). Contributes to service development, audit and evaluation of safe medicines use Produces and disseminates information in relation to Medication Safety.	Critically appraises the local culture in relation to patient safety. Applies the relevant legal, ethical, professional and organisational policies and procedures and codes of conduct to issues of Medication Safety. Leads audit programmes to identify and improve unsafe medicines practice. Anticipates and provides information in relation to Medication Safety that meets the needs of relevant stakeholders within the organisation.	Influences patient safety culture. Critically appraises tools used to assess culture. Leads organisational strategic planning related to medicines safety including development of structures (Committees, pathways etc.). Embeds patient safety into organisational medicines policies. Monitors, reports and develops the effectiveness of organisational policies/procedures. Plans and provides relevant information to relevant external stakeholders.

Expert Professional Practice – Expert Skills and Knowledge (Cluster 1.1)

Improving standards of pharmaceutical care for patients.

1.1 EXPERT SKILLS AND KNOWLEDGE		ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors		Demonstrates general pharmaceutical skills and knowledge in core areas. In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients in core areas.	Demonstrates in-depth pharmaceutical skills and knowledge in defined area(s). In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s).	Advances the knowledge base in defined area(s). In addition for patient focussed roles: Advances in-depth/complex pharmaceutical care programmes for patients.
Recommended knowledge, skills, experience and behaviours	Medicines Incident Management	Reports medication incidents and adverse drug reactions. Demonstrates knowledge of different methods of detecting medication incidents and their strengths and weaknesses. Demonstrates a basic knowledge of, and limitations of incident reporting systems. Demonstrates an understanding of what type of incident should be reported where e.g. MHRA, NRLS. Performs basic analysis of reports. Demonstrates a basic knowledge of incident investigation tools and their strengths and weaknesses.	Influences what is reported. Demonstrates an advanced knowledge of, and limitations of incident reporting systems. Reviews individual medication incident reports for completeness. Interprets pooled data to identify themes and trends. Demonstrates advanced knowledge of the strengths and weaknesses of incident investigation tools. Contributes to the investigation of incidents involving medicines.	Influences incident reporting policy. Agrees suitable targets for reporting medication incidents. Influences the organisational risk agenda on the basis of incident monitoring. Contributes significantly to the development of new and improved incident reporting systems and mechanisms. Leads the investigation of incidents involving medicines. Provides expert advice for a medicines related serious incidents. Identifies and disseminates learning from patient safety incidents.

Expert Professional Practice – Expert Skills and Knowledge (Cluster 1.1)

Improving standards of pharmaceutical care for patients.

1.1 EXPERT SKILLS AND KNOWLEDGE		ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors		Demonstrates general pharmaceutical skills and knowledge in core areas. In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients in core areas.	Demonstrates in-depth pharmaceutical skills and knowledge in defined area(s). In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s).	Advances the knowledge base in defined area(s). In addition for patient focussed roles: Advances in-depth/complex pharmaceutical care programmes for patients.
Recommended knowledge, skills, experience and behaviours	Risk Assessment	Contributes to risk assessments related to medicines use. Demonstrates a basic knowledge of local risk registers and their use.	Identifies latent risks at different stages of a care pathway and across multidisciplinary boundaries. Performs risk assessments and contributes to the risk register. Leads a multidisciplinary group in undertaking a simple risk assessment.	Identifies active and latent risks prospectively at an organisational level. Critically appraises and maintains the medicines aspects of the local risk register. Leads a multidisciplinary group in undertaking a complex risk assessment.
	Implementing Safer Systems	Contributes to the development of policies, procedures and guidelines for safe medication practice. Contributes to the development and evaluation of Medication Safety solutions. Demonstrates how design of information [and Medication Safety solutions] can impact patient safety.	Contributes to policies, procedures and guidelines for safe m8edication practice. Develops and evaluates Medication Safety solutions for groups of patients. Demonstrates involvement in the design of information at a local level.	Leads the development of policies, procedures and guidelines for safe medication practice. Leads the development, implementation and evaluation of Medication Safety solutions within the organisation. Critically appraises and influences medication [and patient] safety solutions within the organisations. Contributes to Medication Safety practice or development in the wider health economy. Leads the development and implementation of systems of assurance for the organisation.

Expert Professional Practice – Expert Skills and Knowledge (Cluster 1.1)

Improving standards of pharmaceutical care for patients.

1.1 EXPERT SKILLS AND KNOWLEDGE		ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors		Demonstrates general pharmaceutical skills and knowledge in core areas. In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients in core areas.	Demonstrates in-depth pharmaceutical skills and knowledge in defined area(s). In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s).	Advances the knowledge base in defined area(s). In addition for patient focussed roles: Advances in-depth/complex pharmaceutical care programmes for patients.
Recommended knowledge, skills, experience and behaviours	Purchasing for Safety	Demonstrates an understanding of the contribution product design makes to patient safety. Identifies potential risks of new presentations of medicines.	Advises on the risks associated with purchasing decisions related to medicines.	Influences procurement of medicines and devices across the organisation.
	Training Others	Identifies need and is able to deliver training to multidisciplinary groups on medicines safety issues.	Educates & influences other HCPs about the medicines safety agenda & their roles and responsibilities.	Provides training to challenging audiences. Identifies training needs for Medication Safety issues at organisational level. Influences the design and provision of Medication Safety training within the organisation.

Expert Professional Practice – Delivery of Professional Expertise (Cluster 1.2)

Improving standards of pharmaceutical care for patients.

1.2 DELIVERY OF PROFESSIONAL EXPERTISE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates accountability for delivering professional expertise and direct service provision as an individual.	Demonstrates accountability for the delivery of professional services and expertise via a team or directly to groups of patients/clients/users.	Demonstrates accountability for the delivery of professional expertise at a defined higher level. May include providing expertise and service delivery nationally or at a strategic level.
Recommended knowledge, skills, experience and behaviours	Applies the principles of safe systems of prescribing, supply, administration, storage and monitoring. Applies the principles of safe prescribing, supply, administration, storage and monitoring to their own practice. To include identifying and rectifying Medication Safety incidents. Identifies which patients and which medicines may be more susceptible to adverse events. Advises patients on safe medication use and adherence to minimise risk of adverse events. Ensures that appropriate patient and medication documentation is maintained during episodes of care and on transfer between care settings. Demonstrates the NPSA 'Being Open' framework with respect to discussion of Medication Safety incidents with patients and carers. Discusses incidents that have resulted in no-harm or low-harm with patients and carers.	Proactively identifies and implements strategies to improve patient safety in different stages of the care pathway at a local level. Develops and implements local documentation that reduces the risk of harm to patients during episodes of care and on transfer between care settings. Follows up Medication Safety incidents that have resulted in no harm or low-harm with patients and carers; liaising with clinical teams and representatives for organisational governance.	Ensures that decisions are made and implemented at an organisational level that reduces the risk of harm to patients during episodes of care and on transfer between care settings. Involves patients/patient groups in local solutions to improve Medication Safety. Discusses Medication Safety incidents that have resulted in all levels of harm with patients and carers; liaising with clinical teams and representatives for organisational governance.

Expert Professional Practice – Reasoning and Judgement (Cluster 1.3)

Improving standards of pharmaceutical care for patients.

1.3 REASONING AND JUDGEMENT	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to use skills in a range of routine situations requiring analysis or comparison of a range of options. Recognises priorities when problem-solving and identifies deviations from the normal pattern.	Demonstrates ability to use skills to make decisions in complex situations where there are several factors that require analysis, interpretation and comparison. Demonstrates an ability to see situations holistically.	Demonstrates ability to use skills to manage difficult and dynamic situations. Demonstrates ability to make decisions in the absence of evidence or data or when there is conflicting evidence or data.
Recommended knowledge, skills, experience and behaviours	Recommends justifiable courses of action with respect to Medication Safety. Demonstrates accurate reasoning with respect to Medication Safety. Prioritises patient and Medication Safety problems to reduce the risk of harm. Recognises own limitations and refers appropriately with respect to Medication Safety. Makes decisions & recommendations on medicines safety matters (including near misses) in a timely manner.	Provides opinion and makes decisions in complex situations where there are several factors that require analysis, interpretation & comparison or with limited information. Interprets Medication Safety situations in the context of the patient, the organisation and national guidance.	Manages difficult and dynamic situations. Makes decisions in the absence of evidence or data or where there is conflicting evidence/data.

Expert Professional Practice – Professional Autonomy (Cluster 1.4)

Improving standards of pharmaceutical care for patients.

1.4 PROFESSIONAL AUTONOMY	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Is able to follow legal, ethical, professional and organisational policies/procedures and codes of conduct.	Is able to take action based on own interpretation of broad professional policies/procedures where necessary.	Is able to take action based on own interpretation of broad professional policies/procedures where necessary.
Recommended knowledge, skills, experience and behaviours	Follows legal, ethical, professional and organisational policies/procedures and codes of conduct.	Takes action based on own interpretation of policies/procedures where necessary.	Interprets overall health service policy and strategy in order to establish Medication Safety goals and standards for the organisation.

Syllabus for Medication Safety Pharmacists

This syllabus is a recommended list of the specific elements of pharmaceutical and related care that a practitioner developing towards an advanced and consultant level will need to know about and apply in their practice in Medication Safety.

These examples are not about non-medical prescribing or administration of medicines, which falls outside the scope of this document. Their purpose is to be used as an outline intended to guide practice rather than to be a prescriptive list that has to be adhered to in all cases.

Advanced Stage I

Scope

Entry Point: Diploma in General Practice Pharmacy and Statement of Completion of General Level Framework (e.g. Band 6 (DipGPP)) or appropriate proof of equivalent qualification and practice.

Completion Point: Statement of Completion of Advanced Stage I competencies (including application of knowledge during experience in the defined area of practice).

Description

Whilst working towards Advanced Stage I the aim is for practitioners to develop and deliver competent clinical care with a focus on Medication Safety.

The individual works towards becoming competent at delivering a clinical pharmacy service to patients through experience of delivering a safe service to these patients.

Advanced Stage II

Scope

Entry Point: Statement of Completion of Advanced Stage I competencies with (including application of knowledge during experience in the defined area of practice).

Completion Point: Statement of Completion of Advanced Stage II competencies (including application of advanced knowledge of Medication Safety).

Description

Whilst working towards Advanced Stage II the aim is for practitioners to continue to develop advanced knowledge and skills in Medication Safety. The practitioner is expected to be an integrated member of the wider multi-professional team and as such works alongside other professionals to achieve the aims of the teams, leading where appropriate.

Mastery

Scope

Entry Point: Statement of Completion of Advanced Stage II competencies with (including application of knowledge during experience in the defined area of practice.

Completion Point: Statement of Completion of Mastery stage competencies (including application of advanced knowledge during experience in Medication Safety).

Description

Whilst working towards Mastery stage the aim is for practitioners to continue to develop advanced knowledge and skills in order to deliver expert clinical care to the various groups of Medication Safety patients. The practitioner is expected to lead the development of pharmaceutical Medication Safety across sectors and in disciplines in their locality.

The following tables are the syllabus for Medication Safety which is based on the knowledge required in the APF mapping table above and informed by the Curriculum Guide of the World Health Organisation. The parentheses indicate whether the syllabus item is expected at General, Advanced Stage I, Advanced Stage II or Mastery stage I.

It is acknowledged that practitioners may have already covered some of this syllabus at general level. Practitioners are reminded that a piece of evidence of a specific knowledge should not be resubmitted to achieve the requirements for another award as credit can only be awarded once for each piece of evidence. However, knowledge gained previously could be used in conjunction with experience to develop and demonstrate competency at Advanced Stage I, Advanced Stage II or Mastery level of the APF.

Specialist knowledge is defined here as knowledge that is specific to Medication Safety, and is not generally used outside this area. Generalist knowledge is defined here as common knowledge that may be pertinent to other areas of practice outside Medication Safety.

1   Theory
2   Organisation and Culture
3   Medication Incident Management
4   Risk Assessment
5   Implementing Safer Systems
6   Purchasing for Safety
7   Training Others
8   Patient Care Focus
9   Reasoning and Judgement
10 Professional Autonomy

1 Theory	
	General, Advanced Stage I, Advanced Stage II or Mastery
Understand the scale of medication error.	Adv I
Understand that using medications has associated risks.	G
Understand common sources of error.	G
Understand where in the process errors can occur.	G
Understand the concept of clinical governance.	G
Knowledge of theoretical model(s) of error, such as Reason's Accident Causation Model applied to Medication Safety.	Adv I
Risks relating to patients, medicines and processes in relatively high risk groups or high risk medicines.	Adv I
Medication Safety literature relating to specific themes/topics.	Adv I and Adv II
Approaches of international organisations involved in patient safety.	M
Understand how factors relating to patients, healthcare professionals, workplace design and the design of medication processes contribute to medication errors.	Adv I
A knowledge and understanding of the literature and resources available.	Adv I, Adv II and M

2 Organisation and Culture	
	General, Advanced Stage I, Advanced Stage II or Mastery
Local clinical governance/Medication Safety structures.	Adv I
Understanding complex organisations.	Adv II
Using written and oral communication channels within organisation/local information governance systems.	Adv I, Adv II and M
Communication channels external to organisation relating to Medication Safety.	M
Managing fatigue and stress in relation to self.	G
Role of Care Quality Commission and NHSLA relating to medicines management standards.	Adv I
Role of NHS Commissioning Board Specialist Health Authority.	Adv I
Use of audit methodology and evaluation methods for safe medicines use.	Adv I
Contribution of organisational culture to patient safety and relate it to local practice.	Adv I
Responsibilities of the members of the multidisciplinary team with respect to medication use.	Adv I
Benefits of a multidisciplinary approach to Medication Safety.	Adv I
Common hazardous situations.	G
Tools used to assess culture.	M
Methods used to measuring organisational effectiveness with respect to med safety, improvement science tools.	Adv II and M

3 Medication Incident Management	
	General, Advanced Stage I, Advanced Stage II or Mastery
Recognising medication incidents and near misses.	G
Methods of detecting medication incidents including risk assessment.	Adv I
Incident investigation tools.	Adv I and Adv II
National Reporting and Learning System.	G
Yellow Card Reporting System.	G
Categorisation/ grading of Medication Safety Incidents.	Adv II
Local adverse incident reporting system and reporting.	G
Report and learn from medication errors.	Adv I
Basic knowledge of, and limitations of incident reporting systems.	Adv I
Demonstrates an understanding of what type of incident should be reported where e.g. MHRA, NRLS.	G
Investigation of serious incidents.	Adv II and M

4 Risk Assessment

	General, Advanced Stage I, Advanced Stage II or Mastery
A basic knowledge of local risk registers and their use.	Adv I
Proactive risk assessment methodologies.	Adv I
Risk assessment in relation to medicines use, including the preparation of injectable medicines.	Adv I

5 Implementing Safer Systems

	General, Advanced Stage I, Advanced Stage II or Mastery
Rationales for publications of NPSA alerts, rapid response reports and signals.	Adv I
Strategies for managing risks with high risk medicines including responses to NPSA alerts.	Adv II
Learning from errors to prevent harms.	Adv I
Using, developing and evaluating quality improvement methods to improve care.	Adv I and Adv II
Developing and implementing policies, procedures and guidelines.	Adv I
Change management.	G
Monitoring change in Medication Safety including audit.	G

6 Purchasing for Safety

	General, Advanced Stage I, Advanced Stage II or Mastery
Contribution of product design to patient safety.	Adv I
Assessing risk of new presentations of medicines.	Adv I

7 Training Others

	General, Advanced Stage I, Advanced Stage II or Mastery
Delivering training to multidisciplinary groups.	Adv I
Developing training materials.	Adv II

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8 Patient Care Focus	
	General, Advanced Stage I, Advanced Stage II or Mastery
Safe systems of prescribing, supply, administration, storage and monitoring.	G
Developing and implementing systems that reduce risk of harm to patients on transfer between care settings.	Adv II
Developing checking habits.	G
Identifying patients susceptible to adverse events.	G
Role of patients in reporting and improving Medication Safety systems.	Adv II
Maintaining appropriate documentation.	G
Understand that using medications has associated risks.	G
Know which medicines and processes are high risk in your area and take precautions.	G
Tailor medicines to individual patients.	G
Use memory aids.	G
Involving patients and carers as partners in healthcare.	Adv II
Communicating honestly with patients and carers after an adverse event or a near miss.	Adv II
Principles of the Being Open framework.	Adv I
Managing complaints.	Adv I
Obtaining consent.	G
Being culturally respectful and mindful.	G
Learn ways to make medication use safer.	G

9 Reasoning and Judgement	
	General, Advanced Stage I, Advanced Stage II or Mastery
Demonstrating accurate reasoning.	G
Prioritising problems.	G
Recognising limitations.	G
Using complex information and multiple factors or limited information to make decisions.	G

10 Professional Autonomy	
	General, Advanced Stage I, Advanced Stage II or Mastery
Ethical behaviour and practice.	G
Maintaining fitness to practice.	G

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