



L to r: Dr Catherine Duggan, Professor Anne Watson,  
Professor Rose Marie Parr, Gail Caldwell

NES / RPS  
PHARMACY SEMINAR  
2016



*On 17th May 2016 an event was held to bring front line pharmacy practitioners together to share ideas, best practice and explore ways to work together, as well as allowing individuals to identify their own personal development needs and opportunities.*

*Over 190 delegates attended this national event, run jointly by NHS Education for Scotland (NES) and The Royal Pharmaceutical Society (RPS) in Scotland. This included presentations from:*

### Professor Rose Marie Parr, Chief Pharmaceutical Officer, Scottish Government

"Integrated pharmaceutical care needs to be safe, effective and sustainable and designed around the needs of the patient. Strong clinical leadership is the single most effective force to prevent failings in the future. We need to change our style of decision making and build a personalised approach to care, becoming improvers and innovators to transition pharmaceutical care."  
**rosemarie.parr@gov.scot**

### Gail Caldwell, Director of Pharmacy, NHS Forth Valley & Chair of the Directors of Pharmacy

"The shift to integrated care demands more emphasis on holistic, joint work across and within services; if we understand all the problems, we can see the whole person. We need to combine generalist as well as specialist skills in medicines. We are the medicines specialists and need to work at the top of our professional capabilities".  
**gail.caldwell@nhs.net**

### Dr Catherine Duggan, Director of Professional Development and Support, Royal Pharmaceutical Society

"Professional development is key to meeting future challenges. The profession needs to be more flexible, more adaptable and more able to step up to deliver patients' needs and the RPS works closely with NES to ensure they have the support and development opportunities to advance and meet these needs".  
**catherine.duggan@rpharms.com**

## Unconference session

An unconference session was held during lunch, the aim of which was to bring people with similar interests together to discuss anything related to;

### Prescribing

fiona.reid@nes.scot.nhs.uk

### Research

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rachel.joynes@rpharms.com

### RPS faculty

catherine.duggan@rpharms.com and

### Yellow Card Reporting

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**Contact:**

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Annamarie McGregor, Practice Development Lead, RPS  
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# WORKSHOPS

*The morning session allowed delegates to participate in workshops specific to one of three sectors of practice. They considered the future for patient facing pharmacists and pharmacist prescribers to improve quality and safety in patient care.*

## Community

This workshop allowed delegates to identify existing and potential opportunities for service development and ways to collaborate better with the wider healthcare team. Areas identified were; development of discharge prescription supply from community pharmacy, pharmacist management of long term conditions, polypharmacy reviews conducted within community pharmacies, and advancing existing services (e.g. MAS and CMS). Improvements to IT, with access to patients' medical records, and better communication pathways with the wider healthcare team are vital for development. All services need a strong evidence base to inform their future development.

### Chairs:

Professor Harry McQuillan [harry.mcquillan@cps.scot](mailto:harry.mcquillan@cps.scot)  
Matthew Barclay [matt.barclay@cps.scot](mailto:matt.barclay@cps.scot)

## Primary Care

A discussion was held on the developing role of the primary care pharmacist. 96% of workshop participants agreed that advanced practice is more than being an independent prescriber.

81% felt that advanced practice is managing complex patients with multiple co-morbidities. 94% felt that between 50-75% of a pharmacist's time should be patient facing. Effective use of different skill sets, including upskilling pharmacy technicians and maximising the role of the community pharmacist, was considered essential for the success of pharmacy in primary care.

### Chair:

Dr Ailsa Power [ailsa.power@nes.scot.nhs.uk](mailto:ailsa.power@nes.scot.nhs.uk)



## Hospital

This workshop showcased a number of successful initiatives from pharmacist prescribing at the front door in accident and emergency in NHS Ayrshire and Arran to extending the hospital pharmacists specialist knowledge to benefit colleagues in GP practice in NHS Tayside. The session also explored how to maximise efficiency, by upskilling the pharmacy technician workforce to ensure 90% of medicine history is completed within 24 hours of admission to hospital in NHS Forth Valley, and by the use of triage and "Pharmacy View" in NHS Tayside. The session provided encouragement to delegates to increase therapeutic partnerships and deliver holistic care with acknowledgement that joint sector appointments allow everyone to further develop clinical skills. The chair would welcome further ideas to progress development of clinical leadership and embed pharmacist prescribing in the hospital setting.

### Chair:

Janice Watt [janice.watt@ggc.scot.nhs.uk](mailto:janice.watt@ggc.scot.nhs.uk)

*The afternoon workshops focused on:*

## Managing Patients

This session showcased some of the opportunities for pharmacists and pharmacy technicians to utilise their skills in GP and community settings in managing a patient caseload. Delegates heard about the success and challenges in setting up a post MI referral process in NHS Greater Glasgow & Clyde. Pharmacy technicians in NHS Tayside highlighted their work with the enhanced community support team and support for patients in their own home around medicine review and concordance. The practical use and learning from NES clinical skills and consultation skills were highlighted by a pharmacist working in a university campus pharmacy in NHS Forth Valley. A prescribing community pharmacist in NHS Grampian detailed brief intervention considerations to a respiratory care pathway in the treatment of asthma.

### Chair:

Jonathan Burton [jonathan@rightmedicinepharmacy.com](mailto:jonathan@rightmedicinepharmacy.com)



# WORKSHOPS

## Using chronic condition care bundles to improve care and quality

Care bundles have been described as “a structured way of improving the processes of care and patient outcomes: a small, straightforward set of evidence-based practices — generally three to five — that, when performed collectively and reliably, have been proven to improve patient outcomes”. During this workshop delegates were introduced to the concept of care bundles and were invited to develop a care bundle for COPD, for depression or for patients requiring anti-TNF therapy.

The workshop participants believe using care bundles would require engagement across all sectors and particularly from Specialist Interest Groups (SIGs), to ensure consistency across Scotland. SIGs have been asked to progress the concept of Care Bundles for their area of interest.

### Chair:

Gail Caldwell [gail.caldwell@nhs.net](mailto:gail.caldwell@nhs.net)



Alex MacKinnon

## Pulling together and transforming out of hours/urgent care

The OOH review ‘Pulling together: transforming urgent care for the people of Scotland’, December 2015, identified that ‘Community Pharmacy should have a greater profile and urgent care role going forward’. The group were updated on the ‘Pharmacy First’ scheme operating in NHS Forth Valley which has further developed the pharmacists’ contribution to the management of common clinical conditions. The vital role that community pharmacists play in OOH care was also discussed. By ensuring that we effectively use the Unscheduled Care Tools of eMAS, PGD & Emergency Supply, Direct Referral and the NHS 24 Professional to Professional direct line, we can maximise care provided to patients in the Out of Hours period, enabling optimum patient journeys.

### Chair:

Dr John McAnaw [john.mcanaw@nhs24.scot.nhs.uk](mailto:john.mcanaw@nhs24.scot.nhs.uk)

## Sustaining and developing pharmacy services - how do we build the evidence for pharmacy? An opportunity to ask the expert and get involved

Short presentations highlighted strategic drivers from the RPS scientific strategy ‘new medicines, better medicines, better use of medicines’ to increase research capacity. The Research and Evaluation Cluster of the Faculty Portfolio and the specific research objective included in the RPS 5-year strategy were also highlighted. Delegates had the opportunity to choose which area of research was important to them, get support and guidance from experts and engage in sharing of best practice. Delegates were enthusiastic about becoming more involved in research but feedback suggested that those new to research would need ongoing access to experienced researchers. This will help them articulate a ‘researchable question’ of relevance to both pharmacy and the wider health care community, while involving the appropriate collaborators and identifying funding streams.

### Chair:

Professor Christine Bond [c.m.bond@abdn.ac.uk](mailto:c.m.bond@abdn.ac.uk)

