**PCN Clinical Pharmacist Job Description and Person Specification**

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| **Job Title** | PCN Clinical Pharmacist |
| **Band / Pay** | Dependent on Experience |
| **Hours** | Part-time 2.5 days per week. |
| **Location** | South Rural Primary Care Network |
| **Contract** | Permanent |
| **Accountable to** | For HR purposes to the PCN Manager    For Clinical services to the supervising GP at the practice where they are placed    For Organisational and Administrative purposes to the Practice Manager of the practice in which they are placed |

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| **Job summary** |
| The post holder is a pharmacist, who acts within their professional boundaries, working alongside a team of pharmacists in general practice and within the Primary Care Network (PCN).  They will improve patients’ health outcomes and the efficiency of the primary care team by providing direct, accessible and timely medicines and expertise including face to face contact with patients.  The post holder will be an integral part of the general practice team, working in each practice and across the PCN, as well as part of a wider pharmacist network and multidisciplinary team. This includes being a conduit of patient medicines information into and out of hospitals. They will work to optimise medication issues to improve patient care and safety and support clinical staff in the management of patients.  As part of their employment, the post holder will achieve qualifications from an accredited training pathway, including independent prescribing, equipping the clinical pharmacist to be able to practice and prescribe safely and effectively in a primary care setting.  The supervision and mentorship network will be provided to support the clinical pharmacist. |

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| **Generic responsibilities** |
| All staff at South Rural PCN have a duty to conform to the following:  **Equality, Diversity and Inclusion**  A good attitude and positive action towards ED&I creates an environment where all individuals are able to achieve their full potential. Creating such an environment is important for three reasons – it improves operational effectiveness, it is morally the right thing to do and it is required by law.  Patients and their families have the right to be treated fairly and be routinely involved in decisions about their treatment and care. They can expect to be treated with dignity and respect and will not be discriminated against on any grounds including age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation. Patients have a responsibility to treat other patients and our staff with dignity and respect.  Staff have the right to be treated fairly in recruitment and career progression. Staff can expect to work in an environment where diversity is valued and equality of opportunity is promoted. Staff will not be discriminated against on any grounds including age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation. Staff have a responsibility to ensure that they treat our patients and their colleagues with dignity and respect.  **Safety, Health, Environment and Fire (SHEF)**  This PCN is committed to supporting and promoting opportunities for staff to maintain their health, well-being and safety.  The post holder is to manage and assess risk within the areas of responsibility, ensuring adequate measures are in place to protect staff and patients and monitor work areas and practices to ensure they are safe and free from hazards and conform to health, safety and security legislation, policies, procedures and guidelines.  All personnel have a duty to take reasonable care of health and safety at work for themselves, their team and others and to cooperate with employers to ensure compliance with health and safety requirements. All personnel are to comply with the Health and Safety at Work Act 1974, Environmental Protection Act 1990, Environment Act 1995, Fire Precautions (workplace) Regulations 1999 and other statutory legislation.  **Confidentiality**  The PCN and associated practices are committed to maintaining an outstanding confidential service. Patients entrust and permit us to collect and retain sensitive information relating to their health and other matters pertaining to their care. They do so in confidence and have a right to expect all staff will respect their privacy and maintain confidentiality at all times.  It is essential that, if the legal requirements are to be met and the trust of our patients is to be retained, all staff protect patient information and provide a confidential service.  **Quality and Continuous Improvement (CI)**  To preserve and improve the quality of PCN outputs, all personnel are required to think not only of what they do but how they achieve it. By continually re-examining our processes, we will be able to develop and improve the overall effectiveness of the way we work.  The responsibility for this rests with everyone working within the PCN and practices to look for opportunities to improve quality and share good practice and to discuss, highlight and work with the team to create opportunities to improve patient care.  South Rural PCN continually strives to improve work processes which deliver healthcare with improved results across all areas of our service provision. We promote a culture of continuous improvement where everyone counts and staff are permitted to make suggestions and contributions to improve our service delivery and enhance patient care.  Staff should interpret national strategies and policies into local implementation strategies that are aligned to the values and culture of general practice.  All staff are to contribute to investigations and root cause analyses whilst participating in serious incident investigations and multidisciplinary case reviews.  **Induction**  In addition to the induction process at South Rural PCN, where you will be provided with a full induction programme, when attending any practice within the network you will also be required to complete their practice induction programme.  Whilst across the PCN we aim to standardise this process, inevitably there will be nuances particular to each practice. In any such instance, the practice management team will support you with this.  **Learning and development**  The effective use of training and development is fundamental in ensuring that all staff are equipped with the appropriate skills, knowledge, attitude and competences to perform their role. All staff will be required to partake and complete mandatory training as directed by the practice manager. It is an expectation for this post holder to assess their own learning needs and undertake learning as appropriate  The post holder will undertake mentorship for team members and disseminate learning and information gained to other team members in order to share good practice and inform others about current and future developments (e.g. courses and conferences).  The post holder will provide an educational role to patients, carers, families and colleagues in an environment that facilitates learning.  **Collaborative working**  All staff are to recognise the significance of collaborative working and understand their own role and scope and identify how this may develop over time. Staff are to prioritise their own workload and ensure effective time-management strategies are embedded within the culture of the team.  Teamwork is essential in multidisciplinary environments and the post holder is to work as an effective and responsible team member, supporting others and exploring the mechanisms to develop new ways of working. To work effectively with others to clearly define values, direction and policies impacting upon care delivery  Effective communication is essential and all staff must ensure they communicate in a manner which enables the sharing of information in an appropriate manner.  All staff should delegate clearly and appropriately, adopting the principles of safe practice and assessment of competence.  Plans and outcomes by which to measure success should be agreed.  **Managing information**    All staff should use technology and appropriate software as an aid to management in the planning, implementation and monitoring of care and presenting and communicating information.  Data should be reviewed and processed using accurate SNOMED/read codes in order to ensure easy and accurate information retrieval for monitoring and audit processes.  **Service delivery**  Staff will be given detailed information during the induction process regarding policy and procedure.  The post holder must adhere to the information contained within PCN and local practice policies and regional directives, ensuring protocols are adhered to at all times.  **Security**  The security of the practice is the responsibility of all personnel. The post holder must ensure they remain vigilant at all times and report any suspicious activity immediately to their line manager.  Under no circumstances are staff to share the codes for the door locks with anyone and are to ensure that restricted areas remain effectively secured. Likewise, password controls are to be maintained and are not to be shared.  **Professional conduct**  All staff are required to dress appropriately for their role.  PCN staff members are to familiarise themselves and comply with local practice protocol. |

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| **Primary responsibilities** |
| The following are the core responsibilities of the PCN clinical pharmacist. There may be, on occasion, a requirement to carry out other tasks. This will be dependent upon factors such as workload and staffing levels:   1. To work as part of a multi-disciplinary team in a patient facing role to clinically assess and treat patients using expert knowledge of medicines for specific disease areas 2. To act as the PCN point of contact for all medicine related matters, establishing positive working relationships 3. To liaise with the practices and, where practicable, to standardise the medicines management process across the PCN 4. To consult patients within defined levels of competence and independently prescribe acute and repeat medication 5. To receive referrals and directed patients from triage services and other clinicians 6. To receive and resolve medicines queries from patients and other staff 7. To provide medication review services for patients in the practice and during domiciliary visits to the local nursing home 8. To manage a caseload of complex patients 9. To manage therapeutic drug monitoring system and recall of patients taking high risk drugs, i.e. anticoagulants, anticonvulsants and DMARDs etc. 10. To deliver long term conditions clinics and home visits particularly for patients with complicated medication regimes and prescribe accordingly 11. To provide pharmaceutical consultations to patients with long term conditions as an integral part of the multidisciplinary team 12. To review medications for newly registered patients 13. To improve patient and carer understanding of, confidence in and compliance with their medication 14. To encourage cost-effective prescribing throughout the PCN 15. To liaise with practices and implement and embed a robust repeat prescribing system for use across all practices 16. To provide advice and answer medication related queries from patients and staff 17. To organise and oversee the PCN’s medicines optimisation systems including the repeat prescribing and medication review systems 18. To improve the quality and effectiveness of prescribing through clinical audit and education to improve performance against NICE standards and clinical and prescribing guidance. 19. To develop yourself and the role through participation in clinical supervision, training and service redesign activities 20. To ensure appropriate supervision of safe storage, rotation and disposal of vaccines and drugs. To apply infection-control measures within the practice according to local and national guidelines 21. To provide subject matter expertise on medication monitoring, implementing and embedding a system 22. To support clinicians with the management of patients suffering from drug and alcohol dependencies 23. To actively signpost patients to the correct healthcare professional 24. To manage a caseload of complex patients and potential care institutions and to provide advice for the GP management of more complex patients or areas such as addictive behaviours, severe mental illness or end of life care 25. To review the latest guidance ensuring the practice conforms to NICE, CQC etc. 26. To provide targeted support and proactive reviews for vulnerable, complex patients and those at risk of admission and re-admission to secondary care 27. To handle prescription queries and requests directly 28. To provide proactive leadership on medicines and prescribing systems to the PCN multidisciplinary team, patients and their carers 29. To support in the delivery of enhanced services and other service requirements on behalf of the PCN 30. To participate in the management of patient complaints when requested to do so and participate in the identification of any necessary learning brought about through clinical incidents and near-miss events 31. To undertake all mandatory training and induction programmes 32. To contribute to and embrace the spectrum of clinical governance 33. To attend a formal appraisal with their manager at least every 12 months. Once a performance/training objective has been set, progress will be reviewed on a regular basis so that new objectives can be agreed 34. To contribute to public health campaigns (e.g. flu clinics) through advice or direct care 35. To maintain a clean, tidy, effective working area at all times. |

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| **Secondary responsibilities** |
| In addition to the primary responsibilities, the clinical pharmacist may be requested to:   1. Support delivery of QOF, incentive schemes, QIPP and other quality or cost effectiveness initiatives 2. Agree and review prescribing formularies and protocols and monitor compliance levels 3. Improve the data quality of medicines records and linking to conditions 4. Deliver training, mentoring and guidance to other clinicians and staff on medicine issues 5. Working in partnership with pharmacists and clinicians in local hospital(s), improve the safety and quality of prescribing after discharge from hospital admissions and attendance 6. Provide leadership and support to prescription administrative/dispensary staff 7. Produce pharmacy/prescribing newsletters or bulletins on a quarterly basis 8. Develop a specialist area of interest 9. Work with community pharmacists, hospital pharmacists and other stakeholders in the medicines supply chain to improve patient experience and manage incidents 10. Support virtual and remote models of consultation and support including e-consultations, remote medication review and telehealth and telemedicine 11. Undertake any tasks consistent with the level of the post and the scope of the role, ensuring that work is delivered in a timely and effective manner 12. Duties may vary from time to time without changing the general character of the post or the level of responsibility |

The person specification for this role is detailed overleaf.

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| **Person specification – Clinical Pharmacist** | | |
| **Qualifications** | **Essential** | **Desirable** |
| GPhC registered pharmacist | ✓ |  |
| Hold or be working towards an GPhC independent prescribing qualification | ✓ |  |
| Hold or be working towards CPPE primary care pharmacy education pathway | ✓ |  |
| Minor ailments certification |  | ✓ |
| Membership of the Royal Pharmaceutical Society |  | ✓ |
| Working towards faculty membership of the Royal Pharmaceutical Society |  | ✓ |
| Medicines Management Qualification |  | ✓ |
| MUR and repeat dispensing certification |  | ✓ |
| **Experience** | **Essential** | **Desirable** |
| Minimum of two years working as a pharmacist demonstrated within a practice portfolio | ✓ |  |
| An appreciation of the nature of GPs and general practice. An appreciation of the nature of primary care prescribing, concepts of rational prescribing and strategies for improving prescribing | ✓ |  |
| Experience in managing pharmacy services in primary care | ✓ |  |
| Experience and an awareness of common acute and chronic conditions that are likely to be seen in general practice | ✓ |  |
| In-depth therapeutic and clinical knowledge and understanding of the principles of evidence-based healthcare |  | ✓ |
| Understanding of the mentorship process |  | ✓ |
| An appreciation of the new NHS landscape including the relationships between individual practices, PCNs and the commissioners |  | ✓ |
| Broad knowledge of general practice |  | ✓ |
| **Skills** | **Essential** | **Desirable** |
| Ability to communicate complex and sensitive information effectively with people at all levels by telephone, email and face to face | ✓ |  |
| Excellent interpersonal, influencing and negotiation skills organisation skills with the ability to constructively challenge the view and practices of managers and clinicians | ✓ |  |
| Knowledge of IT systems, including ability to use word processing skills, emails and the internet to create simple plans and reports | ✓ |  |
| Ability to plan, manage, monitor, advise and review general medicine optimisation issues in core areas for long term condition |  | ✓ |
| Clear, polite telephone manner | ✓ |  |
| Good clinical system IT knowledge of EMIS/Systmone/Vision |  | ✓ |
| Ability to promote best practice regarding all pharmaceutical matters | ✓ |  |
| Effective time management (planning and organising) | ✓ |  |
| Demonstrate personal accountability, emotional resilience and work well under pressure | ✓ |  |
| **Personal qualities** | **Essential** | **Desirable** |
| Ability to follow legal, ethical, professional and organisational policies/procedures and codes of conduct | ✓ |  |
| Ability to use own initiative, discretion and sensitivity | ✓ |  |
| Able to get along with people from all backgrounds and communities, respecting lifestyles and diversity | ✓ |  |
| Ability to use own initiative, discretion and sensitivity | ✓ |  |
| Flexible and cooperative | ✓ |  |
| Ability to identify risk and assess/manage risk when working with individuals | ✓ |  |
| Sensitive and empathetic in distressing situations | ✓ |  |
| Able to provide leadership and to finish work tasks | ✓ |  |
| Problem solving and analytical skills | ✓ |  |
| Ability to maintain confidentiality | ✓ |  |
| Knowledge of and ability to work to policies and procedures, including confidentiality, safeguarding, lone working, information governance and health and safety | ✓ |  |
| **Other requirements** | **Essential** | **Desirable** |
| Flexibility to work outside of core office hours | ✓ |  |
| Disclosure Barring Service (DBS) check | ✓ |  |
| Evidence of continuing professional development | ✓ |  |
| Access to own transport and ability to travel across the locality on a regular basis, including to visit people in their own home | ✓ |  |

This document may be amended following consultation with the post holder to facilitate the development of the role, the practice and the individual.

All personnel should be prepared to accept additional, or surrender existing duties, to enable the efficient running of the practice.