

**AGENDA FOR CHANGE
NHS JOB EVALUATION SCHEME**



JOB DESCRIPTION

1. JOB IDENTIFICATION

Job Title: Area Principal Pharmacist (Medicines Management and Information)

Reports to: Head of Specialist Pharmaceutical Services

Department, Ward or Section: Pharmacy Department

CHP, Directorate or Corporate Department: Clinical Services and Support Directorate, SSU

Job Reference: SSCLSSRAIGPHAR05

No of Job Holders: One

Last Update (insert date): August 2001

2. JOB PURPOSE

Manage and develop the Medicines Management and Information Service with its associated staff and be responsible for the services which it provides.

Direct and complete the work of the Medicines Guidance Team to formulate and deliver clinical policies or advice relating to medicines use, engaging with a wide range of health care professionals and patients and co-ordinating their contribution, in order to assure the quality of final policies, protocols or guidelines. It is the post holder's responsibility to ensure that all guidance:

- meets legal requirements
- is evidence based
- is clinically appropriate and
- is in the best interests of patients

Provision of specialist pharmaceutical support, direction and advice ensures safe and effective use of medicines by impacting on the professional practice and clinical care of a range of healthcare professionals and patient groups.

Make and contribute to decisions on a range of issues relating to medicine use which can have:

- national implications eg commenting on consultation documents for extending prescribing rights
- implications for staff and patients across NHS Highland eg local adoption of national guidance on the safe handling and use of medicines on all clinical areas
- implications for local hospitals only eg prescribing policies for intravenous therapies
- implications for groups of patients eg introduction of new drug for limited indications.

3. DIMENSIONS

Population	210,000
Geographical area	10,000 square miles
SSU	
• Medical staff	373
• Nursing staff	1105
• Pharmacy staff	92 (3.5WTE directly managed by this post holder)
Prescribing Support Pharmacists	10
Community Pharmacy contractors	45
GP Practices	70 (including 28 dispensing practices)
GPs	250
Hospital sites	18
Hospital pharmacy departments	4
Community Health Partnerships	3
Drugs budget 2004/5	£48.5m (SSU and Community Health Partnerships(CHPs))

Holds Budget for:

Books & Journals	£7500
MM&I education and training	£1500

Line Manager for:

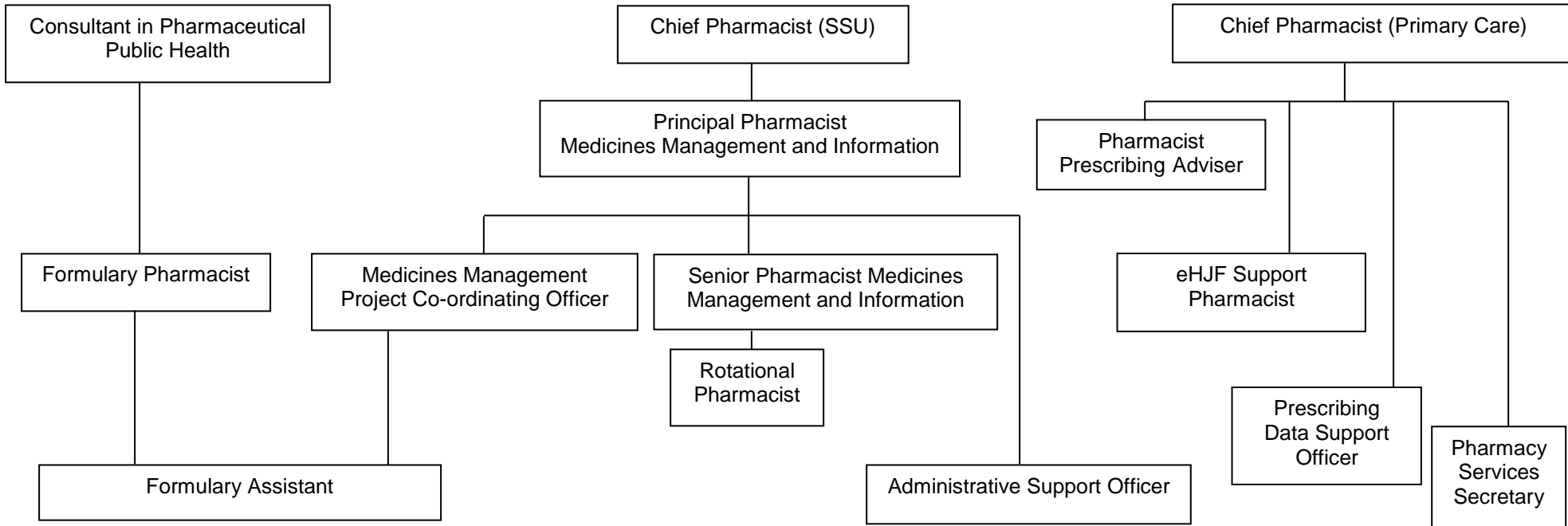
Medicines Management and Information Project Co-ordinator Officer
Senior Pharmacist Medicines Management and Information
Medicines Management and Information Administrative Support Officer.

The Medicines Information service encompasses enquiries from community nurses, community pharmacists, general practitioners, prescribing advisors, primary care pharmacists, hospital nurses, hospital pharmacists, consultants, registrars, senior and junior house officers, other healthcare professionals and members of the public. In 2004, Medicines Information pharmacists answered 1837 enquiries.

4. ORGANISATIONAL POSITION

See attached Medicines Guidance Organisation Chart
See attached Medicines Guidance Teams Table
Departmental Organisational Chart appended at end of document

ORGANISATION CHART – MEDICINES GUIDANCE



MEDICINES GUIDANCE – MEMBERSHIP OF TEAMS

MEDICINES GUIDANCE		
<p align="center"> Consultant in Pharmaceutical Public Health Principal Pharmacist Medicines Management and Information* Pharmacist Prescribing Adviser* Medicines Management Projects Co-ordinating Officer * Formulary Pharmacist Formulary Assistant Senior Pharmacist Medicines Management and Information Administrative Support Officer Medicines Management and Information Rotational Pharmacist Prescribing Data Support Officer Pharmacy Services Secretary eHJF Support Pharmacist </p> <p>All staff listed above undertake area wide functions in relation to medicines guidance in addition to functions completed within the teams listed below.</p>		
MEDICINES INFORMATION	PRESCRIBING ADVICE	FORMULARY TEAM
<p align="center"> Principal Pharmacist Medicines Management and Information* Senior Pharmacist Medicines Management and Information Rotational Pharmacist Administrative Support Officer Medicines Management and Information </p>	<p align="center"> Pharmacist Prescribing Adviser* Prescribing Data Support Officer Pharmacy Services Secretary </p>	<p align="center"> Principal Pharmacist Medicines Management and Information* Pharmacist Prescribing Adviser* Formulary Pharmacist Medicines Management Projects Co-ordinating Officer * Formulary Assistant Administrative Support Officer eHJF Support Pharmacist </p>

* The **Principal Pharmacist Medicines Information and Management**; the Pharmacist Prescribing Adviser and the Medicines Management Projects Co-ordinating Officer split their time between the teams, devoting more time to one team or another at peak times.

5. ROLE OF DEPARTMENT

Role of the Department

The function of the pharmacy service is to develop and provide integrated patient-focused pharmaceutical care, which meets the present and anticipated needs of the population of NHS Highland in accordance with the Local Health Plan and national strategies. The intention of the service is to link all branches of the profession in order to better co-ordinate pharmaceutical care for patients and members of the public. The focus is on active participation in, and contribution to multi-disciplinary, multi-professional and multi-agency teams in a fully integrated manner. The main responsibilities are :

- the development and operational delivery (managed services) of pharmaceutical care across NHS Highland
- the provision of expert advice on community pharmaceutical matters to the NHS Board and its committees, including the Direct Health Services Committee, to the Specialist Services Unit and the three Community Health Partnerships, and to senior managers and prescribers
- the implementation of robust clinical, corporate and staff governance systems to minimise risk and assure patient and staff safety and well being.

Medicines guidance is an area-wide service provided by a team based within pharmacy at John Dewar Building, Assynt House and Raigmore Hospital (detail in table above). The team aims to provide leadership, strategy and support on areas relating to medicines use in populations of patients, groups of patients or individual patients. The medicines guidance team provide specialist pharmaceutical advice and contribute to the planning, development and implementation of policies and systems which allow NHS Highland to deliver effective, safe and cost effective medicine use. The team has direct responsibility for the drafting of particular policies, co-ordinating the contribution of others and quality assuring the final policy, protocol or guideline. Guidance relates to the professional practice of a range of healthcare professionals in relation to the clinical use of medicines.

The role of the **formulary team** is to plan, co-ordinate, support and participate in the development and production of the Highland Joint Formulary (HJF). The HJF is a publication that contains recommended medicines choices, dosing advice and local prescribing information and guidelines. The aim of the team is to ensure that the HJF remains an up-to-date, relevant guide for prescribers, helping them to make logical choices relating to medicines by providing a rational selection of drugs based on evidence of safety, efficacy, cost-effectiveness and consideration of patient acceptability. Members of the formulary team have responsibility for dissemination and promoting implementation. The level of implementation is also monitored.

The medicines information team is part of a national network of medicines information centres across the UK. The team provides quality assured answers in response to questions about medicines from any health care professional working in the NHS Highland area. Each answer is drawn from a systematic search of published literature. The information is then critically appraised and using the pharmacists' professional knowledge an answer is formulated. Where there is a lack of information the pharmacist will be called upon to provide advice based on their professional knowledge. Each enquiry varies in the complexity and subject matter and enquiries can take anywhere from 5 minutes to 5 working days to complete. The increasing number of enquiries requires the pharmacist in charge on a day-to-day basis to make decisions about priorities and clinical risk in the order in which enquiries are answered. The answer is designed to allow the enquirer to make decisions about the treatment of individual patients or about groups of patients and contributes to the safe, effective treatment for the patients involved.

6. MAIN TASKS, DUTIES AND RESPONSIBILITIES

Medicines Guidance

Contribute to the work of SSU Drug and Therapeutics Committee (DTC) and Area DTC (ADTC):

- Actively participate in discussions of each agenda item providing evaluated information or informed professional opinion.
- Contribute agenda items particularly relating to national guidance or legislation on medicine use.
- On an individual basis, complete work allocated by each committee providing assessment of information available; gauging the opinions of stakeholders, involving other staff or patients; looking at and appraising the options available; assessing the resource implications and presenting this in a concise form to meetings.
- As part of a multidisciplinary group, develop policy, guidance and procedures for groups of staff or patients within NHS Highland relating to medicine use for presentation at SSU DTC or ADTC.
- Ensure that items from the SSU DTC, which require to be discussed at an area level, are included in the ADTC agenda and *vice versa*.

At SSU DTC act as professional secretary ensuring that:

- Appropriate pieces of guidance and legislation and any matters relating to medicines use in SSU are considered by the membership
- Action points are clear, agreed, and are followed up
- That minutes are drafted and disseminated
- Appropriate communications occur on behalf of the committee
- Practical arrangements for each meeting are made
- The opinions of a wide range of health care professionals across SSU and peripheral hospitals are sought and considered and, where there are widely differing practices or viewpoints, help the committee to reach consensus, obtain clarity or agree a practical way forward.

Proactively advise managers in pharmacy, nursing, medicine, finance and clinical risk management of the need to respond to changes in practice in use of medicines ie in prescribing legislation or where areas of risk have been identified eg responding to inappropriate requests for high risk medicine administration at home or temporary or permanent withdrawal of an essential medicine. The post holder will suggest appropriate courses of action to address the issues involved.

Direct Provision of Medicines Guidance

Work with the Pharmacist Prescribing Adviser to develop and maintain the system for managing Patient Group Directions within NHS Highland. Provide a professional check on all Patient Group Directions in SSU, ensuring that they meet legal requirements, are evidence based, clinically appropriate and that they are in the best interests of patients.

Provide a strategic overview and pharmaceutical advice on policies for handling, storage and administration of medicines in clinical areas.

Develop and manage a system for medicines which do not hold a UK marketing authority. As the Committee on Safety of Medicines in UK has not assessed these for efficacy or safety there are particular risks in using such medicines.

Process requests to supply a new unlicensed medicine:

- ensure that all licensed medicines which are available have been tried or are inappropriate.
- check that published evidence provides assurance of efficacy and safety.
- check that budgetary and shared care issues have been addressed for individual patients.
- find a suitable supply of the medicine.
- obtain prescribing and patient information.

On request, provide pharmaceutical advice or information directly to individual health care professionals or members of the NHS Highland management team to help them make decisions on the safe, effective use of medicines. This advice can:

- relate to care of individual patients, groups of patients or relate to an overarching principle on medicine use.
- be supplied at a strategic level eg to Chief Pharmacists (SSU and Primary Care), Medical Director Direct Health Services (DHS) or members of the NHS corporate team.
- involve considering legal, ethical and clinical governance issues relating to medicines use eg commenting on letters from politicians, members of the public or clinical staff on availability or appropriateness of providing certain treatments, dealing with certain aspects of a complaint.
- relate to a retrospective situation about care already delivered or prospectively to services to be developed.
- involve collating highly detailed, highly complex, often diverse information which is assessed and summarised or providing professional advice in the absence of information.

Address medicine related problems which can be area wide, specific to clinical areas not covered by a directorate pharmacist or relating to individual patients which require a knowledge of medicine supply issues, legal issues relating to medicines, local policy and procedures and clinical knowledge to resolve them. This often involves working with groups of staff from many disciplines and a range of settings in both SSU and CHPs.

In the absence of the Chief Pharmacist handle medicines related problems or complaints from the public about the service provided by other health care professionals and pharmacists relating to the use of medicines.

Formulary Development

Provide a strategic lead, alongside the Pharmacy Prescribing Adviser, within the Formulary Team by:

- setting priorities and objectives with the Team.
- providing guidance and managerial assistance to all Team members during updating, printing, dissemination and implementation.
- ensuring that the Formulary Team and Formulary Sub Group (FSG) have sufficient support to deliver their objectives.
- managing those aspects of service development which are identified and progressing work to secure resources where they are required.

As part of the Formulary Team the post holder will:

- contribute to identifying those areas of the formulary which require further review.
- take a lead on completing reviews of therapeutic areas allocated by the team or participate as a member of working groups reviewing therapeutic areas.
- ensure that the evidence base, patient acceptability, financial and prescribing data are all considered during these processes and that the evidence is critically appraised.

Contribute to meetings of the Formulary Subgroup (FSG) of the ADTC the post holder will:

- review the evidence presented to support the addition of new and established medicines to the Highland Joint Formulary for accuracy around efficacy, safety and budgetary impact and provide advice based on this appraisal and on professional knowledge and experience.
- contribute pharmaceutical advice on drug selection at formulary level.
- help prescribers to complete formulary submissions.
- occasionally provide the FSG with an evaluation of the evidence for a medicine.
- obtain medicine information enquiry answers to specific questions to support each of these processes.

Contribute to the promotion and implementation of the Highland Joint Formulary within SSU and other hospitals across NHS Highland by:

- working with local medical and pharmacy staff when a new drug will be introduced into practice, particularly where there is little local clinical experience of using it, to develop systems to allow safe introduction to practice and provide appropriate feedback to ADTC or FSG if required.
- delivering training to junior doctors.
- writing, contributing to or commissioning policies and procedures to support application of the Highland Joint Formulary in clinical practice.
- reviewing formulary compliance and prescribing trends within SSU and supporting Senior Pharmacists in completing this effectively at Directorate level.
- developing and oversee a system for managing the use of non formulary medicines within SSU.

Drugs Budget Planning Process

Provide information on cost pressures which will need to be considered in setting the drug budget for the coming financial year and year-on-year, which will allow an appropriate level of clinical activity including the introduction of new medicines. The post holder contributes to this by:

- co-ordinating a comprehensive horizon scanning exercise in conjunction with clinicians and directorate pharmacists within SSU to estimate the budget impact of new drugs likely to come to market in the next financial year.
- using information generated in horizon scanning to estimate the uplift required for new drug developments within the next financial year.
- working with the Pharmacist Prescribing Adviser to identify areas of pressure within the existing budget which may have an impact from primary care to secondary care or *vice versa* and from this estimate the alteration in budget required.
- working with finance staff in SSU to identify the cost pressures expected each coming financial year in relation to changes in service provision which are anticipated and estimate the impact of these.
- monitoring drug spend within SSU throughout the year and identifying any trends which may affect the next year's budget.
- feeding this information into the drug budget planning process, where possible providing advice on the variability of each parameter.

Devise and implement systems for monitoring the drug budget and spend.

Liaise with Directorate Pharmacists to ensure they feed back accurate financial and prescribing trend information to their Directorates.

Management of the Medicines Management and Information (MM&I) Service

Take overall responsibility for the management of the Medicines Management and Information service and its associated staff and resources and equipment, based at Raigmore Hospital.

In consultation with the staff in MM&I and Medicines Guidance be responsible for the direction and development of medicines management and medicines information services in the Highlands in line with legislation, practice development, national strategy, UKMI and other national standards and local need. Delegate tasks as appropriate to ensure development occurs.

Provide leadership, support and any necessary specialist advice for Pharmacy staff providing MM&I services across the Highlands.

Prioritise staff training needs within the MM&I section and authorise training events based on need identified within PDP&R process, priority within section and the sections training budget (£1500 per annum).

Responsible for maintaining the Pharmacy Department's book and subscription costs within the annual budget (£7,500 per annum at present), balancing the need to procure up to date sources of information with limitations of resource.

Responsible for ensuring that pharmacy staff, students and seconded pharmacists are trained to UKMI standards in medicines information.

Responsible for delivering training on the provision of medicine guidance for these staff.

Provision of proactive medicines information in the form of a local newsletter 'The Pink One' and any other bulletins or staff memos which are required to keep staff informed of developments in medicines use.

Output from the MI service is reviewed by using a User Satisfaction Survey, self-performed Annual Audit and peer review of individual enquiries with pharmacists in the Aberdeen and Dundee MI centres. Feedback from these will be interpreted and assessed by the Senior Pharmacist MMI and then discussed with the post holder to establish and agree ways of developing the service to achieve a better quality output.

Support to Medicines Information service

Provide a direct MI service in the absence of either the Senior Pharmacist (MM&I) or the rotational pharmacist or during periods of high workload in MI. Whilst doing this:

- prioritise enquiries by clinical urgency and risk assessment.
- directly supervise the work of less experienced pharmacists.
- use expert information searching and analysis skills to provide advice, ranging from simple to highly specialised.
- assess information which ranges from simple to highly complex and may involve weighing up the merits and risks of several options.
- tailor the advice to the broad spectrum of enquirers (general practitioners to specialists) so that it can be used to inform the diagnosis, treatment and care of individual patients or identified groups of patients.
- ensure that relevant aspects of efficacy and safety are considered within the answer provided.
- support answers by highest quality evidence available eg clinical trials or if there is little quality information available makes decisions using expert knowledge, experience and an advanced level of reasoning and judgement.
- responsible for delivering training in Medicines Information in the absence of or on the request of the Senior Pharmacist in Medicines Management and Information.

Personnel Management

- Process Medicines Information Service staff requests for leave ensuring continuity of all functions and efficient deployment of staff.
- Manage the implementation of personnel policies within the Medicines Management and Information Service ensuring that personnel issues are carried out in line with NHS Highland policy and that staff are managed in line with the principles of good staff governance.
- Develop, implement and review policies and procedures for staff induction within the Medicines Management and Information Service.
- Participate in the recruitment and selection of appropriate staff in Raigmore Pharmacy Department and the Medicines Guidance Team, including review of posts, review of job descriptions, preparation of all relevant recruitment documentation, shortlisting, participating in and usually chairing interview panels and providing feedback to interviewees.
- Participate in the appraisal and development of staff within the framework of the organisation's

PDP&R policy. Carry out PDP&R interviews and provide advice and support to other staff who carry out PDP&R interviews.

Pharmacist additional duties and responsibilities undertaken Out of Hours (OOH), including Saturday Mornings, Public Holidays and whilst on Emergency Duty Commitment (EDC).

Pharmacists participate in Saturday Morning Rota work and work on approximately half the Public Holidays. Pharmacists participate in EDC responsibilities as required, in agreement with pharmacy management to maintain a 1 in 10 rota according to their contract. At any one time therefore, approximately half of the Pharmacists participate in EDC work. The following paragraphs provide an overview of the duties and responsibilities undertaken in OOH and EDC work within the various sections of the Pharmacy Department. Whilst providing EDC the pharmacist is in a position of sole responsibility for the EDC pharmacy service to all hospitals in NHS Highland with the exception of those covered by the EDC pharmacy service from Caithness General Hospital.

Production

Rarely required to perform final release checks on aseptically dispensed cytotoxic chemotherapy and extemporaneously dispensed non-sterile pharmaceuticals eg creams or suspensions.

Quality Assurance

Rarely required to action an urgent alert or recall notice, received out of hours, for a defective or potentially defective item. The same could apply to a serious or potentially serious defect identified by NHS Highland staff.

Clinical Pharmacy

Rarely required to provide clinical pharmacy service OOH but frequently provides a clinical pharmacy service during EDC. Elements could include advice on the pharmaceutical care of individual patients, for example: drug choice, medication dosing, administration or monitoring; clarification of medication histories for patients on complex medication regimens; discharge medication counselling for patients with concordance/adherence problems; or the management of adverse drug reactions.

Dispensary

Frequently required to receive, clinically screen, label, dispense and despatch prescriptions as required. Within EDC, the pharmacist is solely responsible for the accurate completion of all prescriptions received; under all other circumstances dispensing is checked by a second qualified member of staff. This situation significantly increases the responsibility of all EDC pharmacists.

Distribution

Frequently required to review orders for medicines and associated medical sundries, process the orders on the Pharmacy Department computer, pick the items and distribute them. This may require the organisation of emergency transport OOH, including taxis, hospital drivers and air transport that requires communication with the Duty Manager and other hospital(s) staff.

Medicines Information

Occasionally required to answer simple medicine information enquiries. Rarely required to answer more complex enquiries.

Procurement

Rarely required to obtain urgent stock from manufacturers, wholesalers or other hospital pharmacy departments out with Highland. This requires contacting EDC pharmacy staff in other hospitals and arranging ad hoc transport arrangements. Discussions frequently involve clinical input in discussing the situation with senior medical staff.

Security

When in the Pharmacy Department providing OOHs or EDC services the pharmacist is on their own and has sole responsibility for security of the department and medicines stored within.

Other duties

Undertake sufficient continuing professional development to meet the demands of the post and to maintain registration.

Authorised signatory for medicine orders to the value of £10,000 for drugs to be purchased for SSU (two or three times per week).

Deputise as Head of Department when requested or required (rarely – three or four times a year).

Other duties appropriate to the post as required by the Chief Pharmacist.

7a. EQUIPMENT AND MACHINERY

Personal Computer, laptop and CD Drive.

Use the data projector or overhead projector to project presentations electronically or on acetate.

Telephone, Mobile Phone, Telephone Answering Machine, Microfiche Reader, Laser Printer, Photocopier, Fax Machine and Driving Hire Cars.

7b. SYSTEMS

Responsible for the design, development and management of all paper and electronic systems to index, catalogue store and retrieve all Medicines Management and Information enquiries. Completes detailed paper records of individual medicines information enquiries.

Responsible for the design, development and management of the Medicines Management and Information reference library. This demands an expert knowledge of a wide range of medical literature in the form of bibliographic databases, textbooks, journals, internet websites, guidelines (local and national) and Government communications.

Microsoft Office computer package including:

- Word - to produce, archive and retrieve documents, letters and reports.
- Excel – to produce and analyse spreadsheets and tables.
- PowerPoint – for presentations.
- Access – to produce a variety of databases.
- Outlook - to communicate by e-mail.

Use of several computer programmes simultaneously on a regular basis.

Incremental discharge letter (IDL) hospital system. Used to inform GP of the details of patients' admission to hospital, it also contains a section for the prescriber to order the medicines patients require prior to discharge. Authorise these prescriptions after checking them against the background clinical details to ensure that the therapy is safe and appropriate for each patient.

Computerised pharmacy stock control system (DMAS). Used to find stock items on the system, locate them, identify the stock levels and whether an order has been placed for that item.

Internet - To search the internet for information relevant to medicines management issues or medicines

information enquiries. Designs and effectively uses structured search patterns for complex medical literature databases eg Medline and Embase.

Information in the Highland Joint Formulary (HJF) is issued as a paper publication; an electronic version; internet pages and incorporated into the WeBNF, another electronic prescribing information system. The post holder is a member of the Formulary Team which manages plans, co-ordinates, supports, and participates in the design, development and production of this information system. This system provides advice in relation to the care, well-being or education of an individual, or groups of patients/clients.

Set and monitor the NHS Highland drug budget. This involves development and management of a system for pulling together:

- relevant information from disparate sources.
- recording this information for ongoing monitoring.
- analysis of existing activity.
- horizon scanning and forecasting.

8. ASSIGNMENT AND REVIEW OF WORK

The post holder will report to the Chief Pharmacist, with whom objectives will be agreed and performance reviewed annually, according to NHS Highland's Personal Development Planning and Review process.

Medicines Management tasks result from risk management issues identified via medication incidents or medicines information enquiries, requests from patients, colleagues or other professionals or from guidance around medication use issued nationally.

The post holder is the local Medicines Management and Information expert and is guided by general health, organisational and broad occupational policies and establishes the way in which these should be interpreted including:

- national clinical standards and guidelines (eg SIGN, NICE).
- NHS and government directives/policy relating to medicine use.
- advice issued by Scottish Medicines Consortium and NHS QIS around the use of new medicines.
- UK Medicines Information strategy.
- legal and professional frameworks governing pharmacy practice and clinical practice in relation to the procurement, storage, handling, prescribing and use of medicines.
- audits including Audit Scotland.
- benchmarking exercises or NHS Quality Improvement Scotland Reports.
- Drug and Therapeutics Committee.
- Area Drug and Therapeutics Committee.
- Formulary Subgroup of the ADTC.
- Highland Joint Formulary.

This provides a broad range of objectives although new objectives will arise during the year after annual objectives have been set, which may therefore involve a reprioritisation of objectives with the Chief Pharmacist.

The postholder is expected to act decisively and autonomously in their professional and managerial capacity and to provide leadership to their team, being accountable for their actions, without regular need to refer to line management.

The post holder is the line manager for the Medicines Management and Information Section and identifies and prioritises the training needs of Medicines Management and Information staff against available resource.

They allocate work; manage disciplinary and grievance matters; make recruitment and selection decisions; set annual objectives, goals and standards and carry out PDP&R annually for the following members of staff:

- Medicines Management and Information Project Co-ordinator Officer
- Senior Pharmacist Medicines Management and Information
- Medicines Management and Information Administrative Support Officer.

They will have responsibility for managing and monitoring the activities of a wide range of staff for whom they have no direct line management responsibility and will have to persuade busy staff in all disciplines, with other priorities, to engage in Medicines Management issues. At times, the post holder may allocate a significant workload to these other staff.

9. DECISIONS AND JUDGEMENTS

Analyses and interprets clinical and pharmaceutical data to provide expert independent advice to clinicians, patients and managers on complex clinical and pharmaceutical use of drugs. Provides opinions on therapeutic and cost benefits of one drug versus another where there is either no current comparative research to guide the decision or evidence that is available is conflicting. The decision may have significant clinical and financial consequences. This is carried out at Board and SSU committee level and occasionally impacts on both primary and secondary care.

Makes decisions about strategic direction for the development of medicines policies and the local formulary which will impact across NHS Highland.

In answering medicines information enquiries there may be little quality information available and the post holder has to make decisions using expert knowledge, experience and an advanced level of reasoning and judgement. This may involve the use of uncommon medicines in situations out-with their licensed use, in groups of patients at higher risk eg spinal injections, renal impairment, children, pregnancy. There may be a need to state a case and defend a point of view to other experts with opposing views.

Initiate and co-ordinate the forecasting of the SSU component of the combined Area Drugs Budget for submission to the Board. This involves negotiating, prioritising and risk managing drug developments within available resource in collaboration with clinicians. The aim is to balance perceived clinical need and desire for clinical freedom against the constraints of a limited drug budget. Difficulties in providing the correct level of funding can lead to management pressure to increase accuracy where spend is both below and above budget. In addition there is pressure from clinical staff, the public and government to provide the latest treatments. The latter makes the introduction of new drugs particularly difficult to manage.

Affects service delivery outwith profession by provision of advice on medicines use legislation.

Judges the competency of individual members of staff to perform particular tasks and the level of training required often in the context of objective assessment as a part of formalised training programmes.

Clinical risk management decisions involving advice to overcome medicine or device supply or preparation problems, drug alerts, immediate messages, drug withdrawals and safety hazard notices.

The post-holder writes guidelines and protocols independently or in collaboration with other specialists to guide the choice and administration of medicines in specific therapeutic areas, as requested, to improve the care of patients throughout NHS Highland in all care settings. Expert advice is given to a range of healthcare professionals regarding the clinical content of policies with broad ranging applications eg Enteral Feeding Guidelines, Intravenous Administration Guidelines.

Decisions are made on a day to day and longer term basis around staff management in both Medicines

Management and Information and the wider Medicines Guidance Team eg:

- recruitment
- deployment
- development
- absence management
- disciplinary and Grievance
- health and Safety

Decisions are made about the direction and development of the Medicines Management and Information Service in line with national standards and local priorities.

Budgetary decisions are made around allocation of training for staff within Medicines Management and Information and purchase of books and journals for the whole pharmacy department.

10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB

Prioritising the wide range and high volume of demands on the post holder from a variety of sources.

Actively contributing to discussions and decisions at committee/working group meetings, the post holder provides a pharmaceutical overview of each topic and must be prepared to put forward this view point in the face of opposing views from other members or to bring other elements which have not been considered to the discussion. This requires an excellent background knowledge of each topic and its relevance to practice.

When dealing with complaints patients and carers can be in distress and irate. The post holder will need to listen, reassure, investigate and once issues are resolved, communicate with all parties with subtlety and tact. The post-holder will facilitate multi-disciplinary communication, education of other health care professionals and initiate a process of medicines management to prevent the issue from arising again.

Engaging other health professions in producing, implementing and auditing policy and guidance around medicines management.

Balancing the staff requirements against the requirement of a busy Medicines Management and Information Section.

Maintaining staff engagement and motivation in the wide range of tasks which are on-going and keeping track of their progress.

Finding appropriate avenues to address some medicines management problems.

Risk of either duplicating the work of others within the large organisation of NHS Highland or finding that colleagues are working at cross purposes to other staff.

Ensuring that senior management within SSU and NHS Highland are aware of and understand their legal and corporate responsibilities around medicines management.

When the published data does not provide sufficient evidence to support requests for unlicensed, non-formulary or new medicines then alternatives have to be sought with the prescriber or patient.

Developing the drug budgeting process to make it more accurate.

Strategically planning and developing a new and advanced Medicines Management and Information Service using negotiating, communication and influencing skills whilst maintaining existing services.

11. COMMUNICATIONS AND RELATIONSHIPS

The need for highly developed interpersonal and communication skills, written and verbal, formal and informal is essential for the level of communication and networking demanded by this post. The post holder will utilise excellent influencing and negotiating skills to persuade busy staff in all disciplines with other priorities to participate in Medicines Management issues and to establish and maintain good working relationships. Communication will be by telephone, e-mail, in writing, by fax, face to face with a wide range of staff and organisations including:-

Area Drug and Therapeutics Committee
Drug and Therapeutics Committees, SSU
Formulary Sub Group of ADTC
Wound Care Sub Group of ADTC
Medical Director
Clinical Directors
Conveners of specialties
Lead Clinicians
Consultants
Nursing Staff
Chief Pharmacists
Consultant in Pharmaceutical Public Health
Pharmacist Prescribing Adviser
Formulary Pharmacist
Pharmacists within the managed service
Medicines Information pharmacists throughout UK
Technicians
Managed Clinical Networks
Community Pharmacists
Patients
Patient Representative Groups/Patient Partnership Fora
General Practitioners
Community/District Nurses & Midwives
Dental Staff
Finance Department Staff
Supplies Department Staff
IM&T Department Staff
Medical Illustration Department Staff
Health Promotion Department Staff
Quality & Nursing Department Staff
Staff Colleagues from other UK health board areas
Scottish Executive Health Department
Professional and Regulatory Bodies eg The Royal Pharmaceutical Society of Great Britain)
Scottish Medicines Consortium
NHS Quality Improvement Scotland
NHS 24
Pharmaceutical Industry - company representatives weekly, discussions relating to new products and indications, budgetary implications.
Medicines and Healthcare Products Regulatory Agency (MHRA).

Management of Medicines Information Service

The ability to assimilate a wide range of material, which often encompasses clinical, managerial, legal and professional elements, is required. This material must then be distilled and presented in verbal,

written or electronic format in a variety of settings including committee meetings, teaching sessions or to individuals.

Actively participate in the National and Regional MI network and use networking opportunities to develop new contacts and share best practice. Attend quarterly meetings of Association of Scottish Medicines Information Pharmacists, and annual conference of UKMI.

Delivery of the Medicines Information Service

Specific medical, pharmaceutical and social background information must be elicited. The nature of this information can be highly complex and several factors can influence any decision making and recommendations, particularly in patient groups that may be the most vulnerable eg breastfeeding neonates, terminally unwell, multiple disease states.

The information may be highly sensitive with potentially dramatic outcomes, for example to determine the risk of foetal abnormalities due to drug use during pregnancy where the advice given can influence a decision to terminate a pregnancy.

The post holder must select a method of communication appropriate to the nature of the enquiry and enquirer, with formal written answers provided where the subject matter is contentious, complex or sensitive.

The enquirer must be made aware of the demarcation between facts and advice. Developed communication and negotiating skills are required to explain to clinicians, carers and patients why certain treatment options are preferred or less suitable (unsafe, ineffective or expensive medicines).

Education and Training

Ensure that Medicines Management policies are transferred into and change practice; that staff knowledge, skills and systems are updated, adjusted and in place. Diplomacy, tact, persuasive, motivational, negotiating, empathic or re-assurance skills are essential, as well as an ability to present and convey highly complex, sensitive or contentious information, in a form readily understood by a variety of audiences, to convince professionals to alter clinical practice. This may involve the post holder delivering, devising and organising training and being responsible for ensuring staff change their practice alternatively the post holder will ensure training is devised and delivered by others who will have the responsibility for ensuring staff change their practice.

Education and training is provided to colleagues in specialised therapeutic areas eg Intravenous Administration and medicines related enquiries for NHS 24. Formal presentations on subjects relating to medicines will be delivered to audiences who may be unknown to the post holder. The audiences may be small groups of 10-20 people, larger groups of 30-40 people or conferences of 100-150 people (in a lecture theatre). A variety of presentational aids may be used, including, PowerPoint, overheads, flip charts, etc.

Education and training is provided to other pharmacists, pre-registration pharmacists, technicians, and students about the principles and practice of providing Medicines Information to answer clinical questions. This includes: formal communication skills; textbook, database and internet searching; identification of valid and useful information; critical appraisal of research; legal and ethical issues; documentation.

Support for Medicines Management

Regularly provide written and verbal reports on Medicines Management issues to various operational

management and professional committees utilising excellent oral and written communication skills, including presentation skills.

Chair or lead working group meetings, sub group or committee meetings at which complex data is assessed and analysed eg: prescribing data; financial data; evidence base from clinical trials; Scottish Medicine Consortium (SMC) papers and requests for additions/deletions to the formulary.

The post holder will be a permanent or co-opted member of key operational management and professional committees, where advice may be challenged eg Formulary Sub Group, the Wound Care Sub Group, the New Prescribers Group, a wide variety of Working Groups, and Implementation Groups.

In the senior multi-disciplinary environment the post holder requires a good understanding of the background of each profession to engage them in the work involved and to understand their point of view.

12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB

Physical skills and demands:

There is a frequent requirement for sitting in a restricted position for a substantial proportion of the working time:

- must possess fast, accurate, advanced keyboard skills.
- rarely standing checking prescriptions in dispensary.

Mental demands:

There is a frequent requirement for intense concentration:

- this post requires concentration on a wide range of material which can be complex and conflicting for prolonged periods each day.
- formal proof reading of publications requires occasional periods of prolonged, intense concentration and close reading. Often this equates to 3-4 hours at a time or more.
- involvement in assessment and analysis of complex data including: prescribing data; financial data; business plans; evidence base; clinical trials; SMC (Scottish Medicine Consortium) papers and requests for additions/deletions to the formulary or Committee/Working Group meetings.
- frequently subject to unpredictable interruptions and the need to respond to changing, and sometimes conflicting priorities, of multiple ongoing demands, often at very short notice at the demand of others in an unplanned manner.
- concerted concentration required for answering Medicines Information enquiries; writing reports, policy and procedures; gathering statistics; reading and interpreting complex medical and pharmaceutical literature from more than one strand; dealing with performance issues with staff on most days, often to short timescales.

Emotional demands:

- Emotional demands related to managing and implementing change whether organisational, policy, practice or service on occasion. Often the introduction of new practice can be unsettling for staff. They need reassurance and appropriate information to help them accept and implement change and often have to be convinced of the need to change. Due to the area wide nature of many of the changes this can involve addressing the needs of several services, staff and patient groups across a range of working environments. Where individual members of staff are not directly communicated with, the method by which change is addressed must consider staff governance issues systemically.
- Emotional demands specific to coping with colleagues and their diverse personalities and personal

and professional support needs. Managing staff and encouraging their development can occasionally involve dealing with conflict or inappropriate behaviour.

- Dealing with the people involved when investigating and resolving complaints and politically sensitive questions and complex and sensitive personnel management problems.
- The provision of advice in sensitive areas such as the need to provide certain therapies within a limited financial resource or where therapies may not be appropriate but there is a patient demand. At times this may involve denying patients access to medication or services.
- Where a risk to staff or patients is identified, staff involved can feel threatened by the fear of blame. The approach taken to each problem must provide staff support to recognise the need for change and provide the correct resources to facilitate the changes required.

Environmental demands:

- A large proportion of every day, 4 to 5 hours, is spent sitting at a desk using a VDU and keyboard or proof reading.
- Noise and distractions in an open plan office.
- Rarely subject to verbal aggression when dealing with irate staff, healthcare professionals or patients.
- Drive or travel throughout the NHS Highland Board area, as well as outwith the area. At times this will take place during adverse weather conditions.

13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB

Qualifications

- Master of Pharmacy degree at undergraduate level or equivalent.
- Registered as a practicing pharmacist with the Royal Pharmaceutical Society of Great Britain (MRPharmS) (4 years + 1 year pre-registration).
- Post-graduate qualification in clinical pharmacy (MSc or equivalent).
- The post holder must also have demonstrated the competencies outlined in 'A competency framework for medicines information' issued by UK Medicines Information in 2001 to level 2, completed the Training Workbook (UKMI) and the National Introductory Medicines Information Training Course.

Experience

- At least 6 years post qualification experience within a recognised area of pharmacy practice within the managed service.
- At least 2 years supervisory experience at Grade D or above within the NHS or equivalent.
- At least 4 years clinical experience.
- At least 2 years experience providing a MI service.
- At least 2 years experience of staff management.
- Wide-ranging experience in one or more branches of pharmacy.
- Wide ranging knowledge and understanding of pharmacy practice across all spectrums, including legal and ethical requirements.
- Experience of managing resource with budgetary responsibility in services or project management.
- Experience of managing change.
- Experience in delivering education and training to pharmacy staff, other hospital staff and patients.
- Previous experience of committee work. The post holder must have worked with multidisciplinary groups to develop guidance or policy for groups of staff or patients.
- Commitment to continuing professional development (CPD).
- Experience of developing audit and research.
- Experience and previous involvement in business planning.

Knowledge and Skills

- Demonstrate expert clinical knowledge, clinical reasoning and judgement in pharmaceutical matters, often where complicated decisions involving a mixture of unforeseen or unique complicated factors must be considered and no obvious solution exists.
- A working understanding of NHS policies, processes, structures, systems and clinical practices.
- A knowledge of managed and contracted pharmaceutical services and their place in health and healthcare structures in primary, secondary and tertiary care.
- A knowledge of current national UKMI standards and strategy.
- Ability to work unsupervised, meet targets and deliver projects on time.
- Ability to prioritise many competing demands from different aspects of the job both short and long term.
- Ability to work at a high level within a complex organisation utilising excellent oral, presentation and written communication skills with staff of all disciplines, colleagues and patients.
- Excellent interpersonal skills and the ability to liaise with staff at all levels of the organisation.
- Ability to work under pressure and meet tight deadlines.
- Demonstrated ability to use persuasive, motivational, negotiating, empathic or re-assurance skills to receive and deliver highly complex, highly sensitive or highly contentious information to achieve desired outcomes.
- Excellent planning and organisational skills.
- Demonstrated ability to work with other colleagues as part of a team.
- Demonstrated initiative and self motivation.
- Knowledge of clinical and non-clinical risk management, health and safety and COSHH.
- Current knowledge of principles of staff performance management, including PDP-R and training needs assessment.
- A good working knowledge of Microsoft Office Applications – used to communicate electronically, generate written material, manage data and produce presentations.

14. JOB DESCRIPTION AGREEMENT

I agree that the above Job Description is an accurate reflection of my duties and responsibilities at the date of signing.

Job Holder's Signature:

Manager's Signature:

Date:

Date:

PERSONAL SPECIFICATION

POST OF: AREA PRINCIPAL PHARMACIST – MEDICINES MANAGEMENT AND INFORMATION

REF:SSCLSSRAIGPHAR05

BASED: Pharmacy department Raigmore Hospital

Attributes	Essential	Desirable
<p>1. Qualifications</p>	<p>Master of Pharmacy degree at undergraduate level or equivalent.</p> <p>Registered as a practicing pharmacist with the Royal Pharmaceutical Society of Great Britain (MRPharmS) (4 years + 1 year pre-registration).</p> <p>Post-graduate qualification in clinical pharmacy (MSc or equivalent).</p> <p>Demonstrated competencies outlined in 'A competency framework for medicines information' issued by UK Medicines Information in 2001 to level 2, completed the Training Workbook (UKMI) and the National Introductory Medicines Information Training Course.</p>	
<p>2. Experience</p>	<p>At least 6 years post qualification experience within a recognised area of pharmacy practice within the managed service.</p> <p>At least 2 years supervisory experience at Band 7 or above within the NHS or equivalent.</p> <p>At least 4 years clinical experience.</p> <p>At least 2 years experience providing a MI service.</p>	<p>Experience of developing audit and research.</p> <p>Experience and previous involvement in business planning.</p> <p>Experience of managing resource with budgetary responsibility in services or project management.</p> <p>Wide ranging knowledge and understanding of pharmacy practice across all spectrums, including legal</p>

	<p>At least 2 years experience of staff management.</p> <p>Experience of managing change.</p> <p>Previous experience of committee work.</p> <p>Previous experience of working with multidisciplinary groups to develop guidance or policy.</p>	<p>and ethical requirements.</p> <p>Experience in delivering education and training to pharmacy staff, other hospital staff and patients.</p>
<p>3. Skills/Knowledge</p>	<p>Demonstrate expert clinical knowledge, clinical reasoning and judgement in pharmaceutical matters.</p> <p>A working understanding of NHS policies, processes, structures, systems and clinical practices.</p> <p>A knowledge of current national UKMI standards and strategy.</p> <p>Ability to work unsupervised, meet targets and deliver projects on time.</p> <p>Ability to prioritise many competing demands from different aspects of the job both short and long term.</p> <p>Ability to work under pressure and meet tight deadlines.</p> <p>Excellent oral, presentation and written communication skills</p> <p>Excellent interpersonal skills</p> <p>Excellent planning and organisational skills.</p> <p>Ability to work with other colleagues as part of a team.</p> <p>A good working knowledge of Microsoft Office Applications – used to communicate electronically, generate written material, manage data and produce presentations.</p>	<p>Ability to persuade, motivate and negotiate staff, patients and managers to achieve desired outcomes.</p> <p>Current knowledge of principles of staff performance management, including PDP-R and training needs assessment.</p>

4. Personal Characteristics	Self motivated Organised Diplomatic	
5. Other		

ISSUE DATE: