

## JOB DESCRIPTION

<b>Job Reference</b>	
<b>Job Title:</b>	<b>Senior Clinical Pharmacist</b>
<b>Grade:</b>	<b>Band 8a equivalent</b>
<b>Hours:</b>	<b>37.5</b>
<b>Location:</b>	<b>One or more practices</b>
<b>Responsible to:</b>	<b>Lead GP</b>
<b>Accountable to:</b>	<b>Lead GP</b>
<b>Responsible For Supervising:</b>	<b>Practice Clinical Pharmacist</b>

### Job Summary:

- To plan and organise the post holder's own workload, including audit and project work, and training sessions for members of the medicines management team, practice team, community pharmacy team, community nurse team, patients, carers, etc
- To prioritise, supervise and support the day-to-day work of clinical pharmacists, working under the direction of practices with guidance from the post-holder. This includes any agreed HR-related activity and any formal and informal teaching of medicines management colleagues, as required
- To record personally generated information and maintain a database of information relating to the work done in the practice(s)
  - personally generated information includes information and records relating to audit and clinical work undertaken by the post holder, reference notes relating to clinical/technical information, etc
  - the database includes maintaining up-to-date, detailed records of all work done in the practices for which the post holder is accountable (done by the post holder or others)
- To develop and facilitate a good working relationship with community pharmacists and other local providers of healthcare
- To maintain registration as a pharmacist and comply with appropriate professional codes
- As appropriate to the post, to maintain and develop professional competence and expertise, keep up to date with medical/therapeutic evidence and opinion, and local and national service, legislation and policy developments, agree objectives and a personal development

plan and participate in the appraisal process

- To attend local, regional and national meetings of relevance
- To undertake any other duties commensurate with the post holder's grade as agreed with the post holder's line manager
- All employees should understand that it is their personal responsibility to comply with all organisational and statutory requirements (e.g. health and safety, equal treatment and diversity, confidentiality and clinical governance)

### **Principal Responsibilities:**

#### **Support to and Supervision of Clinical Pharmacists**

- To provide day to day support to clinical pharmacists
- To work in conjunction with the requirements of the NHS England pilot
- To ensure appropriate data collection in relation to the pilot's KPIs
- To provide monthly clinical supervision sessions to your practices' to clinical pharmacists

#### **Responsibilities within your own practice(s):**

#### **Management of medicines at discharge from hospital.**

- To reconcile medicines following discharge from hospitals, intermediate care and into care homes; identify and rectify unexplained changes; manage these changes without referral to the GP; perform a clinical medication review; produce a post--discharge medicines care plan including dose titration and booking of follow--up tests, and working with patients and community pharmacists to ensure patients receive the medicines they need post discharge.
- Set up and manage systems to ensure appropriate medicines review high--risk groups of patients (e.g. those with medicine compliance aids or those in care homes).
- Work in partnership with hospital colleagues (e.g. care of the elderly doctors and clinical pharmacists) to proactively manage patients at high risk of medicine--related problems before they are discharged to ensure continuity of care.

#### **Risk stratification**

- Design, development and implementation of computer searches to identify cohorts of patients at high risk of harm from medicines.
- Responsibility for management of risk stratification tools on behalf of the practice.
- Working with patients and the primary care team to minimise risks through medicines optimisation.

#### **Unplanned hospital admissions**

- Devise and implement practice searches to identify cohorts of patients most likely to be at risk of an unplanned admission and readmissions from medicines.

- Work with case managers, multidisciplinary (health and social care) review teams, hospital colleagues and virtual ward teams to manage medicines-related risk for readmission and patient harm.
- Put in place changes to reduce the prescribing of these medicines to high-risk patient groups.

### **Repeat prescribing**

- Produce, implement and monitor a practice repeat prescribing policy.
- Manage the repeat prescribing reauthorisation process by reviewing patient requests for repeat prescriptions and reviewing medicines reaching review dates; make necessary changes as an independent prescriber, and ensure patients are booked in for necessary monitoring tests where required.

### **Telephone and patient facing medicines support**

- Provide a telephone help line for patients with questions, queries and concerns about their medicines.
- Hold clinics for patients requiring face-to-face clinical medication reviews (CMRs) — i.e. a review of the ongoing need for each medicine, a review of monitoring needs and an opportunity to support patients with their medicine taking.

### **Medication review**

- Undertake clinical medication reviews with patients with multi-morbidity and polypharmacy and implement own prescribing changes (as an independent prescriber) and order relevant monitoring tests.

### **Care home medication reviews**

- Manage own caseload of care home residents. Undertake clinical medication reviews with patients with multi-morbidity and polypharmacy and implement own prescribing changes (as an independent prescriber) and order relevant monitoring tests. Work with care home staff to improve safety of medicines ordering and administration.

### **Domiciliary clinical medication review**

- Manage own caseload of vulnerable housebound patients at risk of hospital admission and harm from poor use of medicines. Implement own prescribing changes (as an independent prescriber) and ordering of monitoring tests.
- Attend and refer patients to multidisciplinary case conferences.

### **Long-term condition clinics**

- See patients in multi-morbidity clinics and in partnership with primary healthcare colleagues and implement improvements to patient's medicines, including deprescribing.
- Run own long-term condition clinics where responsible for prescribing as an independent prescriber for conditions where medicines have a large component (e.g. medicine optimisation)

for stable angina symptom control, warfarin monitoring and dose adjustment for patients requiring long-term anticoagulants).

### **Service development**

- Develop and manage new services that are built around new medicines or NICE guidance, where a new medicine/recommendations allow the development of a new care pathway (e.g. new oral anticoagulants for stroke prevention in atrial fibrillation).

### **Care Quality Commission**

- Provide leadership to the practice manager and GPs to ensure the practice is compliant with CQC standards where medicines are involved.

### **Public health**

- To devise and manage public health campaigns to run at the practice. To provide specialist knowledge on immunisation.

### **Cost saving programmes**

- Make recommendations for and make changes to medicines (switches) designed to save on medicine costs where a medicine or product with lower acquisition cost is now available.

### **Medicine information to practice staff and patients**

- Answers all medicine-related enquiries from GPs, other practice staff and patients with queries about medicines. Suggesting and recommending solutions. Providing follow up for patients to monitor the effect of any changes.

### **Information management**

- Analyse, interpret and present medicines data to highlight issues and risks to support decision making.

### **Medicines quality improvement**

- Identify and provide leadership on areas of prescribing requiring improvement. Either conduct own audits and improvement projects or work with colleagues such as GP registrars. Present results and provide leadership on suggested change. Contribute to national and local research initiatives.

### **Training**

- Provide education and training to primary healthcare team on therapeutics and medicines optimisation. Provide training to visiting medical students.

### **Implementation of local and national guidelines and formulary recommendations**

- Monitor practice prescribing against the local health economy's RAG list for medicines that should be prescribed by hospital doctors (red drugs) or subject to shared care (amber drugs). Liaise directly with hospital colleagues where prescribing needs to be returned to specialists.

- Assist practices in setting and maintaining a practice formulary that is hosted on the practice's computer system. Suggest and develop computer decision support tools to help remind prescribers about the agreed formulary choice and local recommendations.
- Auditing practice's compliance against NICE technology assessment guidance.
- Provide newsletters on important prescribing messages to improve prescribers' knowledge and work with the team to develop and implement other techniques known to influence implementation of evidence — such as audit and feedback.

### **Medicines safety**

- Horizon scan to identify national and local policy and guidance that affects patient safety through the use of medicines, including MHRA alerts, product withdrawals and emerging evidence from clinical trials.
- Manage the process of implementing changes to medicines and guidance for practitioners.

### **Confidentiality**

Working within the CCG staff may gain knowledge of confidential matters which may include personal and medical information about patients and staff.

All information, either written or electronic, regarding patients, staff and corporate information must be treated as strictly confidential at all times, and you may not divulge to any other person except with the express authority of a Senior Manager of the CCG. Such authority may only be given when it is in the patient's or staff's own interest and is a necessary part of treatment.

Failure to observe this confidentiality could lead to disciplinary action being taken against you.

### **Codes of Conduct and Accountability**

You are expected to comply with relevant CCG codes of conduct and accountability, including national guidance.

### **Health and Safety**

In accordance with the Health and Safety at Work Act 1974 and other supplementary legislation, you are required to take reasonable care to avoid injury during the course of work and co-operate with CCG/NHS Merseyside and others in meeting statutory regulations. You are also required to attend statutory training as required to fulfil your duties.

To comply with safety instructions and CCG policies and procedures.

To use in a proper safe manner the equipment and facilities provided.

To refrain from wilful misuse of, or interference with, anything provided in the interest of health and safety and any action, which might endanger yourself and others.

To report as soon as practical any hazards and defects to your senior manager.

To report as soon as practical accidents and untoward incidents and to ensure that accident forms are completed.

**Infection Control**

It is CCG policy to reduce the risk of Healthcare Associated Infection by having in place Infection Prevention and Control Policies. These policies must be adhered to by all staff to ensure patients are cared for in a clean environment and receive the highest standards of clinical care.

**Equality and Diversity**

It is the responsibility of every person to act in ways that support equality and diversity and work within the spirit and detail of legislation including, but not limited to the Sex Discrimination Act 1975, Race Relations Act 1976 and Disability Discrimination Act 1995 as amended.

The CCG is an Equal Opportunities Employer and aims to challenge discrimination, promote equality and respect human rights.

**Data Protection**

Where it is a requirement of the job for the postholder to use computers or other information technology, he/she will be required to ensure that security procedures are followed as appropriate and that confidential information for example passwords, are not communicated to unauthorised individuals.

**General Clause**

This job description is not intended to be exhaustive but to indicate the main responsibilities of the post and may be amended from time to time after consultation with the post holder.

The NHS is Smoke - Free. Smoking is not permitted on any of our premises or the surrounding land including car parking facilities.

Signed by employee.....Date.....

Signed by manager.....Date.....

## Person Specification

<b>Job Title</b>	Senior Clinical Pharmacist		
<b>AfC Band</b>	8a equivalent	<b>Job Code</b>	

**Method of Assessment: 'A' Application Form**

**'I' Interview & assessment Process**

Person Specification		Essential	Desirable	Assessment
<b>Qualifications &amp; Training</b>				
1.	Mandatory registration with General Pharmaceutical Council	✓		A/I
2.	Membership of the Royal Pharmaceutical Society		✓	A/I
3.	A member of or working towards Faculty membership of the Royal Pharmaceutical Society		✓	A/I
4.	Masters degree in pharmacy (MPharm)		✓	A/I
5.	Clinical diploma		✓	A/I
6.	Independent prescriber		✓	A/I
<b>Knowledge and experience</b>				
1.	Minimum of 5 years post-qualification experience.	✓		A/I
2.	In depth therapeutic and clinical knowledge and understanding of the principles of evidence-based healthcare.	✓		A/I
3.	An appreciation of the nature of GPs and general practices	✓		A/I
4.	An appreciation of the nature of primary care prescribing, concepts of rational prescribing and strategies for improving prescribing	✓		A/I
<b>Skills</b>				
1.	Excellent interpersonal, influencing and negotiating skills	✓		A/I
2.	Excellent written and verbal communication skills	✓		A/I
3.	Demonstrate the ability to communicate complex and sensitive information in an	✓		A/I

	understandable form to a variety of audiences (e.g. patients)			
4.	Is able to plan, manage, monitor, advise and review general medicine optimisation issues in core areas for long term conditions.	✓		A/I
5.	Good IT skills	✓		A/I
6.	Able to obtain and analyse complex technical information	✓		A/I
7.	Recognises priorities when problem solving and identifies deviations from the normal pattern and is able to refer to seniors or GPs when appropriate	✓		A/I
8.	Able to work under pressure and to meet deadlines	✓		A/I
9.	Produce timely and informative reports	✓		A/I
10.	Gain acceptance for recommendations and influence/ motivate/ persuade the audience to comply with the recommendations/ agreed course of action where there may be significant barriers	✓	✓*	A/I
11.	Work effectively independently and as a team member	✓		A/I
12.	Demonstrates accountability for delivering professional expertise and direct service provision	✓		A/I
<b>Attributes and Behaviours</b>				
14.	Self-motivation	✓		A/I
15.	Adaptable	✓		A/I
16.	Full driving licence.	✓		A