## English Pharmacy Aseptic Services Transformation Board - Call for Evidence 2019

# Submission From: Association of Pharmacy Technicians United Kingdom (APTUK) Technical Services Branch

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Submission to support core capabilities on:

**Standardisation:** Standardise practices, technology and products (where possible) made by aseptic services

Business Approach for Transformation: Introduce enabling capabilities for

aseptics to become well governed, data and insight driven services.

The focus of this submission is to:

- Highlight the development of the APTUK Virtual Technical Services Branch, explain why this media platform was chosen, and how this can be utilised to best support the standardisation of practices, develop networking opportunities and deliver training through alternative mediums.
- 2) To demonstrate the need for Pharmacy Technicians within Technical Services, as part of an appropriately trained and skilled workforce.

## Background

There have been many changes to Technical Services as a sector of pharmacy over the last five or so years, particularly around future workforce planning and the training of current and future staff.

The General Pharmaceutical Council published the revised Initial Education and Training Standards (IETs) for Pharmacy Technicians in October 2017. Only two of the fifty three standards related specifically to preparation of medicines. The development of a new Pharmacy Technician qualification that meets the IETs saw the consequent removal of any skills or knowledge-based units relating to aseptic services and the manufacture of medicines. The public consultation to the qualification saw a strong response from the Technical Services workforce who raised concerns that the two IETs relating to preparation of pharmaceutical products and medicines had not been covered. There was also an overwhelming response supporting the view that a basic understanding of how medicines are made being key to the initial education for pharmacy technicians and that the removal of this element would reduce the exposure of trainees to this area of practice, something that is key to the recruitment and retention of the workforce post registration. As a result, the gualification was reviewed and an additional unit added. As the IETs were 'knows how' and not 'does', the new unit is knowledge based. Other skills-based units throughout the qualification can be adapted for use in aseptic units if appropriate.

The initial omission of this area of practice from the qualification and some of the messages delivered following the publication of the Operational Productivity and Performance in English NHS Acute Hospitals: Unwarranted Variations (February 2016) has created uncertainty in the future direction of Technical Services within this sector of Pharmacy.

Technical Services units across the UK have also been working (in some geographical locations) in isolation with limited means to network and share best practice.

All of the above were the initial drivers for creating a virtual branch within APTUK for those members of the Association specialising in Technical Services who wish to network, share best practice and to increase the profile of this important sector of pharmacy. See appendix 1, page 10 for the initial proposal created during the development of the branch.

Local Branches within the APTUK have been a valuable and well attended method for the sharing of information to Pharmacy Technicians within small geographical areas.

Due to the specialist nature of Technical Services, and often the large geographical distances between Trusts/Units, a physical branch would not have allowed for the networking which was seen as an important part of the Branch support system. For this reason, it was decided to utilise the benefits of technology and deliver the branch via a digital platform (initially Skype, and now Microsoft Teams), with the aid of Twitter/Facebook for promotion.

Pharmacy Technicians have been a key part of Technical Services departments for many years. Expanded roles for Pharmacy Technicians have created senior posts, and the resilience of the service relies on the senior as well as junior presence. A shortage of pharmacists in Technical Services brought about ever-increasing expansion of roles for Pharmacy Technicians. This was seen to be at a 'juxtaposition' with the current climate that is moving towards a reduced exposure to Technical Services during the pre-registration training and foundation practice of Pharmacy Technicians.

Recent investment in Pharmaceutical Scientist Practitioners (for example through the NHS Scientist Training Programme (STP)), and the proposed introduction of a Science Manufacturing Technician (SMT) apprenticeship has been viewed as a part of the solution to the lack of a suitably trained workforce. It is the considered opinion of the APTUK that Pharmacy Technicians are and will continue to be a key part of the Technical Services team, although senior posts may potentially be filled by Pharmaceutical Scientists (PS), there is still insufficient workforce to meet all the posts currently needed and the posts it is anticipated will be needed as services expand.

APTUK firmly believe that the development and recruitment of Pharmacy Technicians into Technical Services needs to be continued for the foreseeable future, as there is no substantial workforce strategy in place to replace their roles within Technical Services (recruitment of Pharmaceutical Scientists and Science Manufacturing Technicians, whilst must be acknowledged can complement the wider workforce, are only a part of the solution).

## **Evidence of Current Best Practice**

#### **Digital Branch Platform**

By hosting the branch via digital means (initially Skype and now Microsoft Teams), members from all parts of the United Kingdom have been able to access educational events. Whilst the branch is still in it's infancy, membership includes Pharmacy Technicians from Derby, Lancashire, Plymouth, London, Leeds and Wales. The digital platform has allowed us to deliver training presentations in real time, with the opportunity to discuss the content, share best practice etc. without the need for significant travel and at no cost to the individuals.

#### **Networking Opportunities**

Creating a network of colleagues across the country with a wide range of operational experience from a variety of different units has enabled professional relationships to be developed, thus resulting in best practice being shared and support being given across much wider geographical areas. This is important to prevent silo working, and to increase efficiencies and standardisation of practice. For example, visiting units to learn from them (where previously professional links would not have been present, and requests to visit unlikely), and sharing of documentation where appropriate to prevent duplication of efforts (for example training records).

#### Promotion of Technical Services

It is critical that potential entrants to the Technical Services workforce are aware of the roles and opportunities available to them- with the reduction in exposure during pre-registration training, promotion of this area of pharmacy is even more important than it perhaps once was.

By providing a Branch open to all members of APTUK, this gives any Pharmacy Technician the opportunity to join in meetings and to learn about this sector of the pharmacy profession. By maintaining an active presence on Social Media, and taking the opportunity to publish articles within the Pharmacy Technician Journal, and to speak at various events, this further promotes the sector which has not been as visible compared to more clinical roles. This continued promotion is essential to tackle some of the issues with regards to the recruitment and retention of staff.

## Proposals for the Future to Develop Resilience in the Workforce Appropriate Skills Mix

Whilst there is no doubt that the workforce for Technical Services needs to evolve and adapt for future requirements of the NHS, there is still a strong desire to maintain Pharmacy Technicians as part of this workforce, supplementing the skills mix with other appropriately qualified personnel as necessary.

During the recent APTUK Conference, the breakout session for Technical Services was very well attended (approximately 50 delegates), who briefly discussed why Pharmacy Technicians were still needed in Technical Services units. (See appendix 2 page 11 for the notes created by 6 groups during the workshop).

Beside the wide-ranging knowledge and skills that are developed during the initial training and through rotations in the early stages of a Pharmacy Technician's career, the overwhelming message was that people within the session felt professional registration with the GPhC was an important factor in why Pharmacy Technicians should still be employed within the units.

This professional registration comes with professional standards all Pharmacy Professionals must adhere to, and accountability to the Regulator when their behaviour falls short. This is deemed to be important, particularly when undertaking extended roles such as Product Approval. The 'Guidance on the Definition of Supervision as Applied to Section 10 Aseptic Preparation Activities'<sup>1</sup>, outlines the process by which approval and release of products prepared under section 10 exemption can be delegated to an accredited pharmacy technician product approver. Currently the Quality Assurance of Aseptic Preparation Services: Standards, fifth edition (QAAPS) states that 'All those involved in the process of product approval should maintain the appropriate levels of competence and act in accordance with the GPhC standards of conduct, ethics and performance (GPhC 2015)'<sup>2</sup>. It is acknowledged that there is currently a lack of Pharmacy Technicians both in post and entering the profession as Pre-Registration Trainees to fulfil all of the roles available in all sectors, however this is not a reason to remove them from Technical Services. Their skills and knowledge are well placed to compliment the emerging roles (SMT and PS) that combined will provide the most robust, resilient and patient centred to workforce needed to deliver the safe and effective pharmaceutical products needed by the patients we serve.

An additional concern discussed was the need to develop flexible staffing models, particularly for smaller Unlicensed Aseptic Units where staff are expected to undertake aseptic preparation as well as dispensary and ward duties. For these units, maintaining an ability to attract qualified Pharmacy Technician's with knowledge and skills of aseptic preparation is vital to providing the services required. Whilst considering the direction that the workforce needs to take, this is a good opportunity to consider the possibility of Technical Service teams to establish their own workforce governance departments who would work alongside wider pharmacy workforce governance teams. This could help Technical Services to be more involved in decisions around training, and to keep the training relevant to our sector. It could also give us more control on how to best staff the units. Recruitment and retention of staff is difficult as people feel Technical Services lack progression in comparison to clinical areas. This is far from the case- the work carried out within aseptic units (and other areas of pharmacy manufacturing) is very different to that of a clinical areas, and often those with overall responsibility of the pharmacy workforce do not have the relevant expertise in Technical Services.

#### Appropriate Working Patterns to Provide Consistently Safe Service Delivery

Many of the NHS aseptic units often rely on the goodwill of staff to stay beyond their contracted working hours to ensure service requirements are met. This is becoming increasingly common, and often the only way to ensure the services are provided. With the 5% annual increase in aseptic workloads, this goodwill and extended working days cannot continue indefinitely. Having staff work far beyond their contracted hours increases the risk of error within the manufacturing process,

ultimately impacting on the quality of those products. It often feels as though a 24/7 service is trying to be fitted into a 7.5 hour working day, and this is not sustainable. For unlicensed units this could increase the capacity for treating chemotherapy patients (for example) and for licensed units, this could enable to departments to maximise the use of the facilities already present increasing output of licensed specials providing benefits to the individual trusts and wider NHS by increasing the availability of products within NHS Pro-file catalogue.

With this in mind, it would seem appropriate to review the current 9am to 5pm working (in most places, some units do work slightly earlier/later) and look at models that would best suit the delivery of the service. This could include shift working, or follow a nursing staff model for example 1 WTE over 3 days.

To facilitate this change in working hours, it would need to be acknowledge that the services needs of Technical Services units may be different from those of clinical areas, and that the working patterns may need to differ accordingly.

Currently the limitations on the speed that changes to the working hours can occur (particularly when extending the day/increasing number of working days) is the ability to recruit sufficient numbers of appropriately skilled staffed across all levels to deliver this. This reinforces the evidence for more technical staff, especially for Pharmacy Technicians, to supervise the activities in cleanrooms and provide appropriate senior decision making capacity to contribute to the management of the service.

#### Equitable Access to Training Nationally

Effective, accessible and up to date training courses are essential for equipping the workforce with the knowledge they need to provide safe pharmaceutical products for our patients.

Currently there is a vast difference in the funding provided to trusts throughout the country, and as such many trusts cannot access the training opportunities which are currently available.

Some training could, and indeed should, be delivered by online learning platforms (for example the TSET online learning modules) or via virtual meetings (such as the APTUK Technical Services Branch), however this cannot completely remove the need for standardised, face to face training which allows staff to learn from

colleagues in other units, as well as having the most up to date information delivered to them by experts in the field.

At present the vast majority of study days and courses are located in the midlands, making it difficult for staff from London and the South coast to attend (anecdotal evidence from the London and South East Aseptic Services Managers Workforce Sub Group) both for financial reasons and also the additional time needed to travel to the venues.

#### Stability, Support and Acknowledgment of Value for the Workforce

The challenges faced by many units to recruit and retain sufficient staff to provide the desired services was well documented in Aseptic Review One.

It was also documented in the review that the demands placed upon aseptic units are increasing at approximately 5% per annum, therefore we need to develop a workforce that can meet this demand. This will only be possible if hospital Technical Services Units are viewed as an essential part of the patient's treatment pathway, and not as a superfluous, drain on resources which can be met elsewhere. The precarious state of the commercial suppliers is testament to the need to maintain and indeed increase NHS Technical Services Units.

Units need to be appropriately funded, and the long terms costs understood from the outset to allow them to be maintained well into the future. Without the full financial support needed to build, maintain and run units, as well as acknowledgment of the specialist skills required within this sector, it will not be possible overcome the current setbacks or to develop and grow the workforce as required to meet the NHS Long Term Plan.

#### Submission Contacts

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#### References

- Santillo M., Hardy L., Hillery S., McGrath O., Spark P., Talbot C., and Williams E. (2018). *Guidance on the Definition of Supervision as Applied to Section 10 Aseptic Preparation Activities 2<sup>nd</sup> edn.* NHS Pharmaceutical Quality Assurance Committee.
- 2 Beaney, A. M. (2016). *Quality Assurance of Aseptic Preparation Services: Standards Handbook* 5<sup>th</sup> edn. London: Royal Pharmaceutical Society.

## **APTUK Technical Services Branch**

#### Purpose:

#### The benefits of joining an APTUK branch are:

- Share Best Practice
- Gain revalidation support
- Gain Educational training and revalidation evidence
- The chance to network with other Pharmacy Technicians across all sectors

It is hoped that by introducing a branch specialising in Technical Services, this will provide more specific educational opportunities for Pharmacy Technicians who are members of APTUK and are working in all areas linked to Technical Services (aseptics, non-sterile, industry, private sector, Radiopharmacy etc.) where their needs may not be currently met by the more clinical or dispensary focused sessions that many branches offer.

Hopefully this branch will also be able to offer some potential opportunities for networking, especially for Pharmacy Technicians who may be working in smaller units, more geographically remote etc. and therefore may not have such strong links to others in similar roles. The benefit of this could link back to revalidation and enable the forming of relationships with colleagues in similar roles to support peer reviews.

The intention of this branch is to be open to anyone with an interest (providing they are members of APTUK), even those not working in Technical Services roles, to ensure it is inclusive to all- Hopefully thereby educating others as to the importance of Technical Services and the impact these services have on the ability of clinical teams to deliver safe and effective patient care.

# The branch is not being developed to lead work streams or projects- any work APTUK are formally involved with will continue to be agreed and delegated through the Directors.

From a more APTUK wide perspective, it would be fantastic if creating the branch could lead to an increased membership generally. Anecdotally, many Technical Services colleagues have not joined APTUK as they have felt there isn't enough incentive to do so-hopefully this can start to change that feeling if APTUK can offer more for specific specialisms.

#### **Practicalities:**

The Technical Services branch will be conducted via a digital platform (Skype) to ensure that members from all parts of the United Kingdom can participate, rather than it being linked to any one geographical area.

Some promotion has occurred via Twitter, local meetings, APTUK events and word of mouth to judge the potential interest in such a branch.

Once the official branch email has been established, a bigger push on promotion will occur and the membership base will be developed.

The branch will be launched officially at the APTUK Conference in September, and topics to discuss/present will be developed over the coming months.

To ensure engagement and the development of appropriate content, feedback will be sought from the membership as to what they would like to learn about.

Initial discussion has taken place and it is thought that topics such as developing an ATMP service, introduction to Radiopharmacy, Aseptic Reviews etc. could be covered. This will need to be led by the membership though and it will require the committee to understand the experience and interest of the members first.

**Appendix Two** A verbatim copy of the flipchart notes made during the APTUK Conference in September 2019 by the 6 groups who attended the breakout session on 'Technical Services in the NHS'

Why are Pharmacy Technicians Needed?	Pharmacy Technician- why
<ul> <li>Patient focus- pathways/implications of providing a service</li> <li>More understanding of medicines</li> <li>Attention to details and other soft skills picked up through training</li> <li>Generally ACE</li> <li>Interaction with multidisciplinary teams, especially clinical teams</li> <li>NOT JUST SCIENCE</li> <li>Having general pharmacy background from training gives better understanding</li> <li>Ability to think outside the box</li> <li>Registration- standards</li> </ul>	<ul> <li>Patient focused</li> <li>Understand implications of providing services and patient needs</li> <li>NB SMT → opportunities for ATO + SATO with an interest in Technical Services         <ul> <li>Leadership</li> </ul> </li> </ul>
0. Potential- to expand into other areas 1. PAAP – PIPC- Pharmacy Technician Quals 2. Self Motivated 3. Accountability	<ul> <li>Managing day to day activities/co- ordinate</li> <li>Guidance</li> <li>GPhC points</li> </ul>
<ul> <li>Accuracy</li> <li>Knowledge of medicines</li> <li>Medicines use- how used practically</li> <li>Patient focused</li> <li>Professional standards support patient centred behaviours and accord</li> <li>Commitment- morals supported through registration</li> <li>Support, manage and direct assistants</li> <li>Professional networks- personal development, standardisation of practices what we are! TECHNICIAN!</li> <li>Innate ability to understand both patient and service needs from tech perspective</li> <li>Embedded- meds optimisation in pharmacy Right Drug, right place, right time</li> <li>Insight- Pharmacy services as a whole</li> <li>Multi-skilled → transferrable skills- lots of areas- homecare, aseptics, processional services and services as a service of the service of the services and services a</li></ul>	<ul> <li>patient centered care</li> <li>Wider impact the service priorities for patient centered care</li> <li>Potential to cover, support in other areas aseptic specialties / pharmacy depts.</li> <li>Future expanded roles         <ul> <li>i.e. technicians releasing final products</li> <li>Resilience and support (i.e. emotional and</li> </ul> </li> </ul>

- Professional Governance → non registrants do not have the same professional standards that p'cy techs have to abide by
- Patient centered care  $\rightarrow$  whatever we do patient is the core
- Accountability
- Transferable skills → experience of having worked in different areas which can be brought into Technical Services
- Flexible workforce / skills mix
- The need of p'cy professionals to be able to work in different areas
- Soft skills at point of training → communications etc. (Ready as day 1 p'cy technician)

