

Association of Pharmacy Technicians UK (APTUK)

The Professional Leadership Body for Pharmacy Technicians

APTUK Position Statement

Supervision – An enabler to empower safe and effective patient-centred Pharmacy Services

Aim

This paper is intended to provide a clear statement of the APTUK position on supervision. It provides a rationale for principle based approach to allow the safe, effective and timely supply of medicines to patients and the public, through quality systems.

Background

Under the Health Act 2006, the Department of Health (DH) took powers to establish the concept of a Responsible Pharmacist (RP) which were brought into force through the Responsible Pharmacist Regulations 2008. The regulations gave powers to enable certain aspects of 'supervision' of the assembly of medicines and sale of General Sales List to be delegated to other registered and suitably trained health professionals; for example pharmacy technicians. The General Pharmaceutical Council (GPhC) provides clear guidance on the current legal requirements on operational tasks and the level of supervision required:

https://www.pharmacyregulation.org/sites/default/files/GPhC%20Responsible%20pharmacist%20guidance.pdf

Supervision can be described as the 'monitoring and regulating of processes, or delegated activities, responsibilities or tasks'.

Under the programme of 'Rebalancing Medicines Legislation and Pharmacy Regulation' review of 'Supervision' is part of wider discussions designed to enable the greater use of pharmacist clinical skills and improve services for patients and the public. The programme board are reviewing legislation to allow innovation and development of pharmacy practice that is required to deliver current and future patient centred outcomes.

Since pharmacy technicians will be affected by such changes, APTUK, as the recognised professional leadership body for pharmacy technicians needs to have a clear and publicly stated position.

Accountability

The role of the pharmacy technician registrant is pivotal to future of the pharmacy service provision as the demand grows with an increasing population and the pharmacist clinical role continues to evolve. Whilst the RP remains accountable for work carried out by pharmacy technicians and other pharmacy support staff, there is also the responsibility to ensure that staff are trained and competent to carry out delegated tasks. However, pharmacy technicians are now registered healthcare professionals and with that status comes responsibility and accountability for their own actions. So where does that leave the RP? The Crown Prosecution Service (CPS) has published guidance on this matter which can be seen at: http://www.cps.gov.uk/legal/l_to_o/medicines_act_1968/

This guidance makes clear that, providing the RP has exercised all due diligence, then they have a defence in law against errors or omissions made by pharmacy technicians working under their supervision. This position ensures the RP is held responsible for the overall safety of the pharmacy and also holds individual pharmacy technicians to account for the quality of their work.

Registration



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Mandatory registration of pharmacy technicians commenced on 1 July 2011. The title 'Pharmacy Technician' is now protected in law and standards have been set for initial entry to the register as well as for professional conduct helping to ensure that registrants are competent and safe to practice. It also means that, as registered healthcare professionals in their own right, they must accept responsibility and accountability for their work. It also provides a fitness to practice framework for those whose fitness to practice is impaired. Through education and practice standards patients and the public are protected from poor practice. All registrants are required to make an annual declaration that they remain fit to practise and have appropriate indemnity cover in place.

Delegation

Before listing any task that may be delegated only to a registered pharmacy technician, it is important to understand that every decision on delegation should be preceded by a risk assessment. The level of the risk assessment should be determined by the nature of the task; some will need to be formal and written others may need on-the-spot professional judgement. A further principle of delegation is that pharmacy technicians must recognise the limits of their competence and refer to a pharmacist when necessary. This already happens in practice and this should be reinforced by embedding, as a behavioural principle, in all pharmacy technician pre-registration training.

APTUK considers that the following tasks could be delegated to pharmacy technicians and be undertaken in the absence of a pharmacist:

- · Assembly of prescriptions including controlled drugs
- Final accuracy checking of dispensed items on a prescription including controlled drugs
- Sale of GSL medicines
- Sale of Pharmacy (P) medicines (under protocols) A supermarket assistant can process the sale
 of packs of up to 16 paracetamol tablets it seems sensible and logical that a trained pharmacy
 technician could be trusted to sell the same product but in larger packs. On this basis, further sales
 of P medicines should be possible subject to appropriate risk management.
- Processing and handing out of repeat prescriptions where a patient is stable, understands their medicines well, no new medicines have been prescribed and the patient has no questions about their medicine; we believe that, providing a clinical check has taken place, there is no risk in a pharmacy technician undertaking this task.
- Processing and handing out of new prescriptions- where a clinical check has taken place, there is
 no risk in a pharmacy technician undertaking this task and where the pharmacy technician is able to
 provide the patient with the required advice.
- Elements of the pharmacy contract services, such as preparation for MURs, smoking cessation and other services such as roles in 'healthy living pharmacies'.
- Pharmacy Device Counselling
- Daily operational management of the dispensary and pharmacy team

The list above is not exhaustive and other tasks should be considered but subject to that most important principle – understanding and applying the limits of competence. Robust and fully implemented quality systems are also an important part of delegation. 'A good system or a 'quality system' is a combination of sustainable structures, excellent leadership, right culture, good governance and processes, and a capable workforce all working together to enable continuous improvement and learning'. http://www.pharmacyqs.com/



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Risk Management

It is clear that delegating tasks to staff with a different skill set will involve risk. Risk management is a critical process which must be understood by all pharmacy professionals and applied in a rigorous and consistent way. The importance of this process cannot be underestimated. We believe that there are two separate broad areas of risk from delegation that need to be managed:

- 1. **Risk to Patients –** This is a key risk and one which can generate a lot of emotion, however, a well conducted and robust risk assessment will determine the level of risk. Once risks have been identified and understood plans can be developed to manage them. As mentioned earlier in the paper, a personal approach to risk management through recognising one's limits of competence is absolutely crucial and needs to be understood and applied by every pharmacy professional
- 2. **Risk to service standards** It seems obvious that there will be occasions when pharmacy technicians will come across situations that requires them to refer to a pharmacist (or other healthcare professional such as a GP). If this situation happened frequently and a pharmacist was not readily available then patients will perceive this as a reduction in service level. Conversely, at busy times, if pharmacy technicians were able to undertake tasks normally undertaken by pharmacists, this would help to alleviate pressure and improve service levels. It is the view of APTUK that sensible risk management, the development of local protocols and the application of professional judgement can help counter any reduction in service level.

APTUK position

There is already strong evidence that pharmacy technicians can take on a range of roles including final accuracy checking, medicines management and pharmacy management in a controlled way and without increasing risk. APTUK supports changes to supervision and greater delegation of tasks to pharmacy technicians as the other registered professional within the pharmacy team. Personal and organisational risk management must be in place and rigorously applied.

Ensuring that pharmacy technicians do have the required level of competence is a critical part of the risk management strategy. If there is variation in the standards then this becomes a local issue which will influence the level of delegation that can occur and this falls within the role of the Responsible Pharmacist and organisational governance. If, following the introduction of statutory registration, there is evidence that there are large variations in pharmacy technician levels of competence; utilising the APTUK Foundation Pharmacy Framework can support upskilling of knowledge, skills and behaviour. http://www.aptuk.org/about-us/education/. This will need to be addressed at both a local and national level. Whilst national systems and processes can help, local employers will play the biggest part in recruiting and training pharmacy technicians to the right standard.

All pharmacy stakeholders need to work together to develop a strong and safe model of supervision. APTUK, as the professional leadership body for pharmacy technicians, are actively involved in the supervision debate and support any consultations. APTUK are working with key individuals and organisations on the development of supervision. Utilising the skills and knowledge of pharmacy technicians will support innovation through quality systems to enhance the safe and effective supply and use of medicines and deliver patient-centred care.

APTUK: 'Leading pharmacy technicians to deliver professional excellence for patient centred care'.

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