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**LEEDS COMMUNITY HEALTHCARE NHS TRUST**

**JOB DESCRIPTION**

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| Job Details  **Job Title:** **Pharmacy Technician (based in a Primary Care Network (PCN)**  **Banding: Clinical Band 5 (Registered)**  **Specialty/Department:** **Central North Leeds PCN** |

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| **Job Purpose**  Woodsley and Holt Park Primary Care Network covers a large geographical area in Leeds with a diverse population. There are 10 practices within the network with a population of over 100,000 patients.  Primary Care Networks are groups of general practices working together with a range of local providers, across primary care, community services, social care and the voluntary sector, to offer more personalised, coordinated health and social care to their local populations.  Pharmacy technicians’ core role responsibilities cover clinical, technical and administrative categories. The purpose of the role is to lead improvements to maximise safe, cost-effective best practice in prescribing to improve the quality of patient care.  Core Responsibilities - Clinical   * To undertake medicines reconciliation by processing discharge summaries and clinic letters in accordance with practice protocols and update patients’ medical records accordingly. * To support the clinical pharmacist to provide medication reviews, including reconciliation and synchronisation of medicines. * To respond to medication queries from patients and staff in a professional manner referring to the clinical pharmacist when appropriate. * To undertake clinical audits and act upon the results to ensure patient safety is maintained and medicines are optimised. * To support General Practice and PCN staff with Long Term Condition medication reviews. * To monitor national medication and patient safety alerts to alert and support surgeries, as needed, to ensure actions are completed in a timely manner. * To work in line with shared care protocols, liaising with clinical pharmacists before starting to work, to establish clear boundaries for tasks. * To support initiatives for antimicrobial stewardship to reduce inappropriate antibiotic prescribing locally.   Core Responsibilities – Technical and Administrative   * To support the PCN multi-disciplinary team to ensure efficient medicines optimisation processes are being followed. * To implement efficient ordering and return processes and reducing medication wastage. * To promote Electronic Repeat Dispensing (eRD) and online ordering. * To develop relationships with other pharmacy professionals and members of the multidisciplinary team to support integration across health and social care including primary care, community pharmacy, secondary care and mental health. * To support practice reception teams in stream-lining general prescription requests, to allow GPs and clinical pharmacists to review the more clinically complex requests. * To support the implementation of national prescribing policies and guidance within GP practices, care homes and other primary care settings. * Work in line with shared care protocols, liaising with clinical pharmacists before starting to work, to establish clear boundaries for tasks. * To support the PCN to deliver on the QIPP (Quality, Innovation, Productivity and Prevention) agenda, QOF (Quality and Outcomes framework), IIF (Investment and Impact Fund) and locally commissioned enhanced services. * To support the PCN in reviewing and developing practice policies for CQC and PCN requirements. * To implement new services within the PCN or in conjunction with other stakeholders, such as community pharmacy   The post holder will be supported by the existing pharmacy team employed within the PCN and the Integrated Care Board (ICB) Clinical Pharmacy Team. The post holder will be required to enrol on the Primary Care Pharmacy Education Pathway from CPPE (unless an equivalent qualification is already held and exemption is agreed by CPPE). |

**Job Purpose**

The post holder will be responsible for their designated workload within their speciality area with access to the support, advice and management from a senior clinician whilst not directly supervised. In doing so, they will assess, plan, deliver and evaluate patient centred programmes of care ensuring that they practice within their sphere of competence and knowledge. The post holder will work to professional protocols and regulatory body codes, standards and guidance at all times ensuring that their practice is grounded in the best available evidence based theoretical and practical knowledge.

**Key Responsibilities:**

1. **Clinical**
2. Demonstrates a broad theoretical and practical knowledge of common aetiologies, pathologies, conditions and presentations.
3. Demonstrates the ability to apply theory to practice at a proficient level when assessing, planning, treating and reviewing using a holistic philosophy.
4. Highly developed physical skills in order to demonstrate accuracy and dexterity when delivering care and treatments essential to clinical role e.g. preparation of medications, manipulation of equipment to record patient observations.
5. Makes judgements requiring analysis, interpretation and comparison of options and ensures clinical reasoning is reflected accurately in case records.
6. Engages and actively involves the patient and, if appropriate, their family/carer, in the assessment, planning, implementation and evaluation of programmes of treatment and/or care by using person-centred techniques to promote a culture of involvement and empowerment.
7. Works to standards of proficiency identified by their professional and regulatory bodies performing clinical treatments/procedures to a competent standard.
8. Prioritises their own workload within agreed objectives deciding when to refer to others as appropriate.
9. Approaches each individual with care, compassion and sensitivity ensuring that these values are reflected in the management of any complaints and compliments.
10. Provides and receives complex, sensitive or contentious information where motivational, persuasive, empathetic, negotiating and reassurance skills are required whilst demonstrating an understanding of barriers to communication.
11. To comply with the organisations’ Infection Prevention and Control requirements, including “bare below the elbows” dress code for staff with a direct care delivery role.

**2. Leadership**

1. Ensures that a professional service and image is maintained at all time, thereby acting as a role model to all staff.
2. Provides a leadership style which is underpinned by strongly held values around equality, diversity and openness; effectively builds and maintains relationships with direct reportee(s) and other key individuals across the organisation.
3. Ensures the effective and efficient use of resources within their own sphere of responsibility.
4. Demonstrates clinical leadership in everyday practice through identifying creative and innovative solutions, engaging in leadership development appropriate to level and encouraging development as part of the team.
5. In the absence of senior clinicians, the post holder will be able to delegate, organise and prioritise to ensure the safe delivery of the service including the management of referrals and discharges utilising locally agreed support mechanisms e.g. on call manager.
6. Demonstrates resilience when responding to challenge, change and complex or difficult situations.
7. Inspires others to be positive in their support of continuous improvement.
8. Ensures that individual objectives are clearly defined within the wider Directorate framework and in line with Trust’s objectives, using the appraisal process as a vehicle for this.
9. Takes responsibility for their own and others’ health and safety in the working environment.

**3. Learning and Development**

1. Undertakes any training required to develop or maintain their proficiency within the clinical area and demonstrates competence within professional body requirements.
2. Reflects on and evaluates own practice and identifies areas of development by setting appropriate objectives via appraisal and clinical supervision.
3. Contributes to and undertakes clinical audit.
4. Assists with research project appropriate to clinical area.
5. Is committed to delivering and sharing learning opportunities with students, team members and other agencies in order to develop self and others.

**4. Partnership and Team Working**

# Actively works towards developing and maintaining effective clinical and corporate working relationships both within and outside the Trust including other agencies, individuals and Higher Education Institutes.

1. Explores the potential for collaborative working and takes opportunities to initiate and sustain such relationships.
2. Actively contributes to the multi-disciplinary team supporting the patient including communication with external care providers, voluntary support services and other agencies; acting as a credible source of information for other agencies/professionals involved in the care as required.

**5. Innovation and Quality**

1. Works with managers and colleagues to continually improve the quality of service delivery within the overall organisational governance frameworks and corporate objectives reflecting the changing needs of the population, local and national initiatives.
2. Works with managers and colleagues to identify, manage and minimise risks within the overall organisational risk management frameworks. This includes understanding and applying knowledge of clinical role in safeguarding and incident management.
3. Acts as an advocate for patients and their families/carers recognising the boundaries of their clinical knowledge; liaising and referring on to other services / agencies as required.
4. Ensures that patient experience is core to all clinical and service development gaining support from the appropriate corporate teams as required.
5. Actively contributes to the Quality and Outcomes Framework (QOF) and Impact and Investment Fund (IIF) measures and best practice standards in order to deliver an effective, high quality service

**In addition to these functions the post holder is expected to:**

* In agreement with their line manager carries out such other duties as may be reasonably expected in accordance with the grade of the post.

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| **Effort Factor Information** | |
| **PHYSICAL EFFORT**  What physical skills needed in the role require, speed, accuracy, dexterity and or manipulation of objects (includes both clinical and non-clinical posts)? Please provide specific examples.  Is the post holder required to lift equipment? If yes, please specify type of equipment, weight (approx kilos) and frequency of the requirement. Please provide specific examples. | Prolonged episodes of computer use e.g. 8 hours/day accessing GP clinical systems;  May be interrupted by urgent requests for advice;  Lifting of equipment may occasionally be required (expected 6-15kgs) e.g. office equipment, boxes of medicines. |
| **MENTAL EFFORT**  Describe the amount of concentration required within the day-to-day job. What is it the employee will have to concentrate on? Please give examples of how often and for how long this concentration occurs. Please provide specific examples of when mental effort is required.  The post holder is required to drive a vehicle; the amount of travel will be dependent on need. | Frequent, prolonged episodes of concentration required e.g. reading clinic letters containing specific instructions regarding medicines, eDANs containing specific medicines information or information regarding ongoing patient care and drug monitoring;  Mental effort required frequently for prolonged episodes e.g. checking dosages of medicines and calculating doses of medicines, synchronising of prescription medicines; |
| **EMOTIONAL EFFORT**  Does any part of the job require any emotional effort? What elements of the role expose the employee to emotional effort?  How often does this happen? Please provide specific examples. E.g. exposure to child protection issues | Occasional exposure to distressing or emotional circumstances  Occasional exposure to aggressive behaviour e.g. change to medications can cause distress to some individuals.  Frequent indirect exposure i.e. through information held in patient medical records, to distressing or emotional circumstances described within. |
| **WORKING CONDITIONS**  Is the post holder required to work in extreme heat or cold, with smells, noise or fumes which are unavoidable, even with the strictest health and safety controls? Does the post holder work with clients or patients who express aggressive verbal or non-verbal behaviour or similar. Please describe the requirement and the frequency with which this may occur. | Occasional exposure to unpleasant conditions e.g. heat, cold Dust, smell, dirt, body odour, body fluids, noise;  Post holder is likely to occasionally encounter patients who may express verbal or non-verbal aggressive behaviour. |

**TERMS AND CONDITIONS OF SERVICE**

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| **Band:** | Band 5 |
| **Hours:** | 37.5 hours per week |
| **Contract:** | Permanent |
| **Salary:** | £29,970 to £36,483 per annum |
|  | New staff will normally be appointed to the minimum of the pay band. Staff transferring from one post to another in the same pay band within the NHS will enter the band at the same point that they were previously on. Staff promoted within the NHS will enter the new pay band at the minimum or the first point of the new pay band that gives them an increase in salary. Any previous NHS service will be subject to confirmation by the Payroll Department. |
| **Annual Leave:** | The annual leave year runs from 1 April to 31 March following.  The full entitlement being 27 days for a full year and pro rata  for an incomplete year's service. An additional 2 days will be  awarded after 5 years service plus a further 4 days after 10  years service. This is in addition to 8 public and statutory days  holiday. |
| **NHS Pension:** | The post is pensionable unless you opt out of the scheme or  are ineligible to join and your remuneration will be subject to  deduction of contributions in accordance with the National  Health Service Pension Scheme. In the event of you not  wishing to join the scheme you should complete form SD502  on your commencement date. |
| **Medical:** | The appointment maybe subject to you completing a declaration of health form, which may lead to a full medical examination upon request. |
| **Notice:** | Giving notice – you are required to give the Trust 8  weeks written notice of termination of your employment.  Receiving notice – with the exception of ‘Summary Dismissal’ you will be entitled to receive notice of 8 weeks or your statutory notice entitlement whichever is the greater.    Statutory entitlement is:  For staff with more than 4 weeks continuous service, entitlement to notice is 1 week for each year of completed service up to a maximum of 12 weeks. |
| **PROFESSIONAL REGISTRATION**  Where it is a requirement as part of this job role to be registered with a Professional Body, you are required to maintain and update your registration in line with the Trust’s Professional Registration Policy. You are required to provide proof of your registration status on your appointment, at renewal of registration or at any other time as requested by the Trust. It is also a requirement for you to comply with any Codes of Professional Conduct and to update/satisfy any Continuous Professional Development conditions.  It would also be a requirement for you to comply with any Codes of Professional Conduct and to update/satisfy any Continuous Professional Development conditions.  **REHABILITATION OF OFFENDERS ACT 1974**  Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974. Applicants are, therefore, not entitled to withhold information about convictions which for other purposes are 'spent' under the provisions of the Act, and, in the event of employment any failure to disclose such convictions could result in dismissal or disciplinary action by the Trust. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the Order applies.  **DBS CHECK (Formerly CRB)**  This post is subject to the Rehabilitation of Offenders Act (Exceptions Order) 1975 and as such it will be necessary for a submission for Disclosure to be made to the Disclosure & Barring Service to check for any previous criminal convictions.  The Trust is compliant with the Disclosure & Barring Service ‘Code of Practice’, a copy of which is available on request.  The Trust welcomes applications from a wide range of candidates including those with a criminal record. It undertakes not to discriminate unfairly against any subject of a Disclosure on the basis of a conviction or other information revealed. A full Trust policy on the Recruitment of Ex-offenders is available on request.  **SECTION 11 COMPLIANCE**  **Safeguarding Children and Vulnerable Adults**  All employees are required to act in such a way that at all times safeguards the health and well being of children and vulnerable adults. Familiarisation with and the adherence to the Trust’s Safeguarding policies is an essential requirement of all employees as is participation in related mandatory/statutory training.  **ORGANISATIONAL AND STATUTORY REQUIREMENTS**  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; Infection Prevention and Control.  **MENTAL CAPACITY ACT (MCA 2005 CODE OF PRACTICE)**  This Act applies to all persons over the age of 16 who are judged to lack capacity to consent or withhold consent to acts which are considered by health and social care professionals to be in the best interests of their welfare and health.  The Mental Capacity Act 2005 imposes a legal requirement on health and social care professionals to ‘have regard to’ relevant guidance within the Code of Practice when acting or making decisions on behalf of someone who lacks capacity to make the decision for themselves. Furthermore, they should be able to explain how they had regard to the Code when acting or making decisions.  Detailed guidance is available in the Mental Capacity Act 2005 Code of Practice http://www.dca.gov.uk/legal-policy/mental-capacity/mca-cp.pdf  **NOTE**  This job description does form a part of the contract of employment and indicates how that contract should be performed. The job description will be subject to amendment in the light of experience and in consultation with the postholder.  **JOB SHARE**  This post is suitable for job sharing and when filled on this basis will attract all normal terms and conditions of service outlined above, but on a pro rata basis if appropriate.  **SMOKING**  The Trust operates a no smoking policy and is smoke free. | |

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**PERSON SPECIFICATION – Primary Care Network Pharmacy Technician**

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| **Attributes** | | **Essential** | **Desirable** | **Method of Assessment** | |
| **QUALIFICATIONS**  **& TRAINING** | | BTEC Level 3 Diploma in Pharmaceutical Science or  NVQ Level 3 Diploma in Pharmacy Service Skills or equivalent with underpinning knowledge.  Current registration as a Pharmacy Technician with the General Pharmaceutical Council.  Evidence of commitment to continued professional development in line with regulatory requirements.  Must be prepared to complete the CPPE Primary Care Pharmacy Education Pathway if not already completed.  Must be willing to participate in any relevant training identified to develop skills needed to carry out the role. | BTEC Level 4 Diploma in Pharmaceutical Services  CPPE Primary Care Pharmacy Education pathway successfully completed.  Post-registration training in specific areas of pharmacy e.g. general practice, or clinical areas e.g. inhaler check training.  Membership of APTUK. | Application  Interview  References | |
| **EXPERIENCE** | | Significant post-registration experience (more than 2 years) in any pharmacy sector e.g. hospital, community pharmacy or primary care  Experience in dealing with difficult situations  Experience of working as part of a multi-disciplinary team | Experience of working as a pharmacy technician in primary care (GP practice or a primary care organisation medicines optimisation team.)  Experience of analysing prescribing data.  Experience of using clinical systems including  SystmOne or EMIS | Application  Interview | |
| **KNOWLEDGE & UNDERSTANDING** | | Experience and expertise within the pharmacy specialism and up to date therapeutic and practical knowledge of medicines optimisation principles and evidence-based medicine acquired through NVQ3 or BTEC equivalent level qualification plus specialist training or experience  Awareness of systems to support management of patients in a primary care setting, delivering pharmaceutical input and support in the context of pathways of care and the business of the organisation(s)  Understanding of the NHS and social care agenda and the issues affecting primary care  Knowledge of standards of conduct of pharmacy professionals  Demonstrates an awareness of limits to knowledge base  Understanding of clinical governance and quality measures | An appreciation of the nature of primary care prescribing, concepts of rational prescribing and strategies for the improvement of prescribing | Interview | |
| **PRACTICAL & INTELLECTUAL SKILLS** | | Provide clinical technical services: provide advice in relation to care, provide information on common drug dosage and use; advise patients, carers, GP staff on issues relating to medication regimes and changes to prescribing.  Communicate routine, complex or sensitive information to patients/ carers regarding prescribed medicines including where there may be communication difficulties and/or barriers to understanding.  Excellent communication skills, verbal and written, with the ability to adjust communication style and content to suit the audience.  Communicate medicines optimisation principles or other pharmacy-related technical information to GP practice staff and other clinicians including nurses, pharmacists.  Contribute to and implement medicines-related policies and propose changes to practice and procedures for own area, propose policy or service changes, including those that impact beyond your own area.  Manage own day to day workload with limited supervision: follow clearly defined occupational policies and SOPs and relevant regulations; effective prioritisation of workload.  Able to work quickly, accurately and pay attention to detail. Able to meet strict deadlines and manage own time effectively.  Recognition of the limitation of own expertise and role and work within those limitations; refer to the pharmacist or GPs when required.  Able to think analytically; anticipating obstacles and think ahead; using analytical techniques to draw logical solutions to problems.  Excellent interpersonal skills: be a team player but with the ability to work independently.  High level of computer literacy with ability to use Microsoft office packages.  Awareness of data protection, GDPR and patient confidentiality. | Understanding of practice prescribing budgets and NHS BSA activities and prescription remuneration  Experience of leading change and change management.  Ability to motivate and influence others especially related to implementation of changes where these may not be welcome.  Experience of participating in multi-disciplinary meetings  Evidence of patient facing experience in primary care | Application  Interview | |
| **ATTITUDE & BEHAVIOUR** | | Patient-centred outlook  Enthusiastic and proactive about clinical pharmacy and achieving outcomes that matter to patients  A desire to develop own role within the PCN  Understand the need to work professionally and within own competencies  Works openly, honestly and acts with integrity at all times  Respectful and supportive of others and challenges disrespectful behaviour.  Ability to manage and cope with change/uncertainty and can demonstrate resilience.  Committed to team working and appreciates and values diversity in the workplace. |  | Application Form  Interview  References | |
| Car owner/driver or suitable alternative transport to enable you to undertake the job (it is unlikely that public transport will meet this requirement). Reasonable adjustments can be considered in accordance to the Equality Act. | | | |