

Job Description

Job Title:	Chief Pharmacist
Grade:	
Hours of Duty:	37.5 hours per week + on-call (pharmacy) + weekends (rota)
Department:	Pharmacy
Responsible to:	Divisional General Manager
Accountable to:	Chief Operating Officer; Medical Director (professional responsibilities related to medicines); Director of Nursing (Controlled Drugs)

Manages:

Deputy Chief Pharmacist, Clinical Services; Deputy Chief Pharmacist Patient Safety, Governance and Research; Pharmacy Administrator and Income Officer

Key relationships:

Chief Operating Officer; Director of Nursing; Medical Director; DTC Chair; Director of Finance; Director of IM&T Workforce and Corporate Affairs; Senior Pharmacy Managers in London; CCG and NHSE Commissioners; Medical and Surgical Consultants; Matrons

Post summary:

The Chief Pharmacist provides specialist expertise and takes corporate responsibility for all aspects of Medicines Optimisation across the RNOH Trust; this encompasses medicine selection, procurement, supply, prescribing, administration and review and will include corporate responsibility for the Trusts Drug Budget. The post holder is responsible for the management and development of non medical prescribing and utilisation of Patient Group Directions for the Administration and Supply of Medicinal Products without prescription.

The post holder is responsible for the strategic and operational management of the cross-Trust Pharmacy service including budgetary control for staff and for systems of control. The post holder has responsibility for ensuring that high quality Pharmacy services are provided efficiently, safely and within budgeted costs, in accordance with the needs of local users. He or she must also ensure that all Pharmacy services are provided in accordance with national, regional and local policies, and within the constraints of the Medicines Act 1968 and all other subsequent and relevant legislation. In addition to leadership and management roles, the post holder will retain a practising knowledge of all departments within the profession of Pharmacy.

Responsible for the continuing professional development and overall performance of all staff within Pharmacy, the post holder also plays a major role in the continuous development of the Trust as a member of the Operational Management Team and as a member of a range of Trust quality/process improvement project groups.

The post holder will ensure that infection prevention and control is an integral part of service delivery

1. Patient/Customer care (both direct and indirect)

1.1 Ensure that the Pharmacy Directorate provides a comprehensive service in line with best practice to the Trust's patients including:

- a. In and outpatient dispensary services
- b. Preparation of pharmaceutical products
- c. Clinical trials support
- d. Medicines information
- e. Pharmaceutical procurement and product distribution

f. Specialist Clinical Pharmacy services

1.2 As agreed with the Trust and service users:

- a.** Ensure that a competency framework is in place for all pharmacy staff to ensure that pharmacy practice is maintained in order to support the delivery of the Pharmacy service including out of hours as required.
- b.** Ensure that the service is provided within the hours agreed with the Trust and service users and that specialist medicines advice and information is available 24 hours a day, 365 days a year.
- c.** Ensure that all pharmacy practice is within the boundaries described within the latest version of Medicines, Ethics and Practice issued by the Royal Pharmaceutical Society, and any relevant frameworks provided by the General Pharmaceutical Council.
- d.** Ensure that all practice relating to medicines optimisation throughout the Trust complies with the current legislative framework and, where practice is found to be non compliant, this is addressed through the relevant Trust processes. Where professional standards do not exist, practices should be evidence based and orientated towards the protection of patients.
- e.** To be responsible for the supply of Medical Gases within the Trust and to act as the Suitably Qualified Person taking responsibility for the quality of medical gases. The post holder will supervise the testing of medical gas quality on wards and within the plant room areas of the Trust.
- f.** To be the designated Trust lead for all aspects of Cytotoxic Chemotherapy administration including intrathecal chemotherapy
- g.** To be responsible for quality issues within the Pharmacy ensuring that the department meets all external and internal quality standards, including ensuring the quality of any prepared pharmaceutical products by meeting the requirements of Good Manufacturing Practice.
- h.** Actively involve the Pharmacy Department and its entire staff in the delivery of Clinical Governance within the Trust. This will include participation in Clinical Governance activities at department, directorate and Trust level.
- i.** Lead the Trust on medicine-related risk management issues, utilising root cause analysis techniques in order to identify causes of medicines related error, formulate solutions and implement process changes.
- j.** Ensure the proactive management of a departmental risk register and the development of an annual plan to address deficiencies arising from the CNST, Performance Management for Medicines Optimisation strategy and the Standards for Better Health assessments.
- k.** Ensure that pharmaceutical product recalls are managed efficiently and to the timeframes required by the MHRA.
- l.** To be responsible for ensuring that complaints received by the department are investigated, answered and practice reviewed to improve service quality, ensuring compliance with national standards for response times.
- m.** Resolve conflicts relating to service provision when they arise.
- n.** Ensure that audit and benchmarking of Pharmacy services is completed to deliver customer satisfaction and participate in multidisciplinary clinical audit with other clinical directorates.
- o.** To support the Accountable Officer for Controlled Drugs for the Trust, ensuring that all statutory obligations are carried out.

2. Policy development

- 2.1** Lead and be responsible for delivering the safe medicines practice elements of Clinical Governance across the Trust incorporating all aspects of medicines optimisation, advising the Trust board on the implementation of Medicines optimisation within Standards for Better Health, CNST, the Performance Management Framework for Medicines optimisation, Building a Safer NHS and key national publications such as “A Spoonful of Sugar”.
- 2.2** To be responsible for developing a Trust wide medicines optimisation policy and strategy in collaboration with internal and external stakeholders that is approved by the Trust Board to ensure that:
- a.** Policies and procedures governing medicine selection, procurement, storage, handling, supply, prescribing, administration and review of all medicines, including controlled drugs, in all areas of the Trust are in place and effective
 - b.** Prescribing by professionals other than doctors is developed and managed
 - c.** Policies to encourage the self administration of medicines by patients are in place and utilised
 - d.** Policies to encourage the use of patients own medicines are in place and utilised
 - e.** The reporting of adverse drug reactions and errors in the prescribing, dispensing and administration of medicines is actively encouraged and when they occur, are reported to the NPSA, MHRA etc as appropriate.
 - f.** Training for all professions is in place in all aspects of medicines optimisation to ensure best practice
- 2.3** Present an annual report on Medicines optimisation to the Trust Board.
- 2.4** To be responsible for auditing the Trust’s medicines optimisation policies ensuring compliance with national medicines optimisation standards.
- 2.5** Interpret broad clinical and professional policies and NHS guidance to ensure that both the Pharmacy and relevant components of the Trust strategic plans are appropriately updated.
- 2.6** Ensure Trust wide compliance with new NHS Directives and legal statutes as they arise where medicinal products are involved.
- 2.7** To be responsible for producing and maintaining strategies, business plans, policies and procedures for the Pharmacy Department.
- 2.8** Ensure appropriate representation of the Pharmacy Directorate in external planning processes and develop appropriate partnerships and links with other NHS Trusts, Higher Education Establishments and other relevant organisations.

3. Service Development

- 3.1** Contribute to the development and review of the Trust’s strategic plan, leading the medicines optimisation components on behalf of the Trust Board. Ensure that any Pharmacy service or Medicines optimisation implications arising from business plans within other services and Directorates are fully agreed, and where necessary are appropriately resourced.
- 3.2** Develop and maintain a strategic vision for the Pharmacy service that fully reflects the national strategic direction, the service needs of the Trust and maintains the department’s position at the leading edge of Pharmacy services. This must be shared and owned by Pharmacy staff and be consulted on widely, both internally within the Trust and with external stakeholders
- 3.3** Identify world best practice in medicines optimisation and design and implement systems to apply best practice within RNOH NHS Trust. Where medicine treatment to be provided represents an otherwise untested innovation, initiate a robust evaluation to ensure that patient care and resources are optimised.

- 3.4** Stimulate and lead developments in Pharmacy service provision, service development and marketing, clinical audit, research and development, creating and agreeing business plans for the department in accordance with the Trust's guidelines.
- 3.5** Lead the development of Electronic Prescribing and Medicines Administration for the Trust and Robotic automation for the Pharmacy service
- 3.6** Continually review the service provided to ensure that it is responsive to the needs of internal customers and patients
- 3.7** Ensure the development of new roles for Pharmacy staff maximising the contribution of each to include the creation of pharmacist prescribers and Consultant Pharmacists.
- 3.8** Ensure the provision of high quality services to outside Trust's as agreed under Trust-to-Trust agreements.
- 3.9** Identify, evaluate and seek to implement innovative service developments in support of the modernisation agenda.

4. Research and Development

- 4.1** As the research team leader for Pharmacy, stimulate, manage and co-ordinate research within the Pharmacy Directorate to create a strong research portfolio, supporting and developing the set up of international studies and local research interests including the development of evidence based practice. Publish and present this information at national and international conferences.
- 4.2** Ensure that all clinical trials involving medicines within the Trust are fully compliant with currently accepted 'best practice' including the EU 2001/20 Clinical Trial Directive. Ensure full involvement of appropriately trained Pharmacy staff in the Local Research Ethics Committee

5. Workforce Management

- 5.1** Accountable for the direct management of the Senior Pharmacy Management team and, through them, for all staff within Pharmacy (of these close to half are graduates and many should hold further postgraduate specialist qualifications) ensuring that adequate staffing levels are maintained to deliver the Pharmacy service, making optimal use of the resources available.
- 5.2** Responsible for ensuring that good HR practices are applied including application of all agreed Trust policies and procedures. The post holder is expected to actively promote and implement the Trust's Equal Opportunities procedures, initiatives around 'Equality and Diversity, the requirements of 'Improving Working Lives' and 'Investors in People'.
- 5.3** Recruit, develop and motivate staff to ensure they can and do perform well in their job, contribute towards improvements to the Pharmacy service and achievement of the Pharmacy business plan/Trust corporate objectives. This means as a minimum:
 - a.** A robust recruitment process compliant with Trust policy
 - b.** An audited induction program that exceeds the minimum requirement stipulated by the Trust and that also includes induction of agency/locum staff
 - c.** Ensure that staff have adequate clinical supervision/mentorship
 - d.** A minimum of an annual appraisal with quarterly reviews
 - e.** An agreed personal development plan that reflects both the needs of the Trust, to deliver its objectives, and the longer-term goals of the member of staff
 - f.** Proactive checking of registration and compliance of staff with any mandatory CPD requirements imposed by relevant professional bodies, including the maintenance of a personal portfolio where this is specified.
 - g.** Ensure staff have Criminal Record Bureau checks appropriate to their role
- 5.4** Accountable for the development of a Pharmacy workforce plan, as part of the business planning process and as a contribution to planning across the local health economy, through the

Workforce Development Confederation and wider through London Region Specialist Pharmacy Services.

5.5 Continually review skill mix to meet service needs and professional standards in force at the time.

5.6 Foster a culture of life long learning, to include provision for post-registration education, continuing professional education/development and vocational training of staff within Pharmacy.

5.7 Ensure that systems are in place to identify poor performance, conduct issues, sickness absence and that any individuals identified are appropriately supported and managed within Trust policies. Ensure that grievances and whistle blowing are treated appropriately and within Trust policies.

5.8 Ensure the broader 'risk management' agenda is addressed within Pharmacy. These issues include areas such as:

- a. Health and Safety at Work
- b. Manual handling and fire training
- c. COSHH – many of the medicines and raw materials used in everyday practice within Pharmacy are hazardous
- d. Use of equipment – both to protect the member of staff and ultimately the patient, especially where the equipment is used to produce or test a medicinal product
- e. Infection Control
- f. Product Liability

6. Communication

6.1 Provide regular reports to the Trust Board regarding progress against the Medicines optimisation strategy.

6.2 Represent the Trust on Regional and National Groups and Committees consistent with the national profile of the post.

6.3 Teach and lecture at postgraduate level and nationally at meetings and conferences as an expert practitioner

6.4 Ensure opportunities are taken to involve patients and the public in design and delivery of Pharmacy services.

6.5 To be responsible for internal and external communication on behalf of the Pharmacy Department, representing the department within the hospital and feeding back to members of staff.

6.6 Ensure Pharmacy staff are aware of the objectives set for the Pharmacy within the annual business plan and that these are fully reflected within the staff appraisal and development process.

6.7 Manage and reconcile conflicting views on the content and delivery of the annual business plan. These conflicts may be internal to the Pharmacy or between Pharmacy and other Directorates where service provision is the issue. Additionally such conflicts can be with CCG AND NHSEs where it is a medicines optimisation issue, such as funding for the provision of a particular medicine.

6.8 Act as a member of Trust Committees ensuring that whole Trust as well as local department interests are pursued

6.9 Ensure dissemination of research evidence and clinical effectiveness information regarding medication by the publication of research findings and present these at national and international meetings and conferences

- 6.10** Contribute to national debate on the development and delivery of Pharmacy and Medicines optimisation Services including consultation exercises from the Medicines and Healthcare products Regulatory Agency (MHRA), National Institute for Clinical Excellence and others, consistent with the national profile of the post

7. Resource management

- 7.1** To be responsible for all Pharmacy budgets complying with Standing Financial Instructions, monitoring expenditure, providing pharmaceutical advice to enable informed decisions to be taken and taking appropriate action to ensure that financial targets are met.
- 7.2** Take corporate responsibility for drug expenditure across the Trust, leading drug budget planning, promoting the cost-effective use of medicines based on evidence and developing systems to assist in the management of drug expenditure.
- 7.3** Be accountable for all drug procurement ensuring best value while maintaining high quality standards.
- 7.4** Lead the Trust's Medicines optimisation and any associated committees, ensuring that regular meetings are scheduled and that effective administration is in place.
- 7.5** Identify possible cost reduction initiatives in medicines usage for presentation to the Medicines optimisation committees, and lead the Pharmacy team in project managing the necessary changes and in auditing the savings
- 7.6** Run an effective formulary system for the Trust including:
- a. developing an effective system for the funding of new technologies,
 - b. developing the system for the evaluation and adoption of new technologies by the Trust in a way that meets the needs of medical advances whilst preventing unnecessary expenditure,
 - c. providing advice to the Director of Finance, Medical Director, CCG AND NHSEs and SHA s on the impact of new therapies.
 - d. Using specialist knowledge of Medicines advise the Medical Director and Chair of the D&TC of appropriate actions to take for individual drug requests outside of the meetings.
- 7.7** Be accountable for maintaining the MHRA requirements for the Pharmacy Department.
- 7.8** Take overall responsibility for the security of medicines across the Trust, for the physical security of the Pharmacy Departments and for the accurate control and reconciliation of medicines stock holding.
- 7.9** Develop and implement systems to charge the Trust's private patients for their medicines in line with agreed policies
- 7.10** Develop and implement systems to ensure that Trust income under Payment by Results is maximised, in particular where patients require their medicines from the Trust on an ongoing basis (continuing care), these medicines are supplied and the appropriate CCG AND NHSE charged for this service.
- 7.11** Ensure that the resource implications of all research projects in, or involving, the Pharmacy Directorate are fully identified and funding is assured before implementation.
- 7.12** In collaboration with the Charitable Funds, ensure that all donations to and payments from the Pharmacy Trust Funds fall within the scope of these charitable funds.

8. Information management

- 8.1** Ensure the provision of timely, impartial, evaluated information is available to all staff and patients on their medicines.

- 8.2 Ensure the provision of monthly impartial, evaluated information to clinical directorates on their drug use and expenditure to best support cost effective medicine use.
- 8.3 Take overall responsibility for the Pharmacy computer systems including Dispensing and Stock Control system.
- 8.4 To have a specialised knowledge of the Pharmacy Stock Control and Dispensing system utilising the reports available within the system and generating specific reports using Crystal Reports to provide information on drug use and expenditure to the Trust.
- 8.5 Ensure the publication of clinical guidelines to support appropriate medicines use, based on best evidence, including cross Trust guidance on antimicrobial drug use and Intravenous drugs

9. IT Skills

All staff are required to demonstrate a level of IT literacy skills appropriate to their job, as the use of IT is fundamental in delivering good quality efficient health care.

10. Further sections

- 10.1 To ensure all team members have a real voice in the development of the Pharmacy and Clinical Support Services Directorates service to patients/customers
- 10.2 To maximise the potential of all team members
- 10.3 To ensure that all team members have a meaningful appraisal/personal development plan that includes feedback to the individual from a selection of internal customers and team members
- 10.4 To provide a safe and attractive working environment for team members within available resources
- 10.5 To attend and play a major role in corporate groups as a representative of the directorate and team
- 10.6 To represent the Trust at regional and national conferences and on working groups as appropriate
- 10.7 To abide by the NHS code of conduct for managers, the Trust's core behaviours for staff and managers and all other Trust policies including standing financial instructions, research governance, clinical governance, patient and public involvement, codes and practices and health and safety policies

11. Other duties

- 11.1 To undertake any other duties commensurate with the grade as requested.
- 11.2 To participate in projects identified by the Director of Operations to support the Trust overall.

This job description is intended as a basic guide to the scope and responsibilities of the post and is not exhaustive. It will be subject to regular review and amendment as necessary in consultation with the post holder.

This job profile is intended to provide an outline of the duties and responsibilities of this post and may change from time to time by agreement of the Director of Operations, Director of Workforce & Corporate Affairs and the postholder.

Following consultation post holders may be required to do other duties commensurate with their grade and experience for short periods of time.

12. RNOH specific responsibilities

12.1 Professional conduct

The post holder must comply with the Code of Professional Conduct applicable to their profession.

12.2 Clinical Governance

All staff must comply with the Trust Infection Control Policy. All employees must attend infection control training and any other mandatory training as required within their department as directed by their line manager.

12.3 Security

It is the responsibility of all employees to work within the security policies and procedures of the RNOH NHS Trust to protect the patients, staff and visitors and the property of the Trust. This duty applies to the specific work area of the individual and the Hospital in general. All staff are required to wear official identification badges.

12.4 Data Protection

This post has a confidential aspect. If you are required to obtain, process and/or use information held on a computer or word processor you should do 'It in a fair and lawful way'. You should hold data only for the specific registered purpose and not use or disclose it in any way incompatible with such a purpose and ought to disclose data only to authorised persons or organisations as instructed. Breaches of confidence in relation to data will result in disciplinary action which may involve dismissal.

12.5 No smoking

The Hospital has promoted a No Smoking Policy as part of its responsibility for the provision of health. You will be required to work within the framework of this policy. Smoking is not permitted in offices.

12.6 Equal opportunities

The Trust welcomes all persons without regard to age, ethnic or national origin, gender or sexual orientation, religion, lifestyle, presenting illness or disability. We aim to provide a non-judgemental service at all times.

12.7 Confidentiality

Post-holders must maintain the confidentiality of information about patients, staff and other health service business in accordance with the Data Protection of 1998. Post-holders must not, without prior permission, disclose any information regarding patients or staff. If any member of staff has communicated any such information to an unauthorised person those staff will be liable to dismissal. Moreover, the Data Protection Act 1998 also renders an individual liable for prosecution in the event of unauthorised disclosure of information. Following the Freedom of Information Act (FOI) 2005, post-holders must apply the Trust's FOI procedure if they receive a written request for information.

12.8 Method of payment

Payment of salary is made into bank account/building society account by direct bank system. Details of a bank account or building society account will be required on the first day at work. There is no facility for any form of other payment.

12.9 Customer awareness

The RNOH expects its employees to communicate with colleagues, patients and visitors in a polite and courteous manner at all times.

12.10 Effort and environment

The following information has been designed to assist the recording of the effort and environment factors required for Agenda for Change:

a. Physical

Be able to sit, stand and walk, occasional lifting. Travel/working in different locations. Ability to cope when staff shortages occur requiring long hours or sustained periods of concentrated work. Ability to produce documents/information at short notice. Balancing competing workload priorities

b. Mental

Be able to prepare and analyse complex documents and calculations

Frequent interruptions to working pattern, some requiring immediate action. Decision making using available evidence to approve drug dosage; experience and judgement required when data is limited or data on rare drugs is not easily available. Taking responsibility for these decisions. Providing summary information from complex clinical trials or drug data sheets to advise the Trust Board and the D&TC on drug safety, efficacy and expense. Managing staffing budgets and drug expenditure, taking responsibility for funding in these areas.

c. Emotional

Dealing with difficult situations and challenging behaviour, giving unwelcome news to staff or patients. Dealing with Consultants/managers/GPs/patients regarding difficult funding decisions for high cost drugs, PbR drugs or where CCG AND NHSEs refuse to fund drugs. Dealing with high expectations, especially from patients and clinicians wrt medicines availability when resources are not available to meet these. Implementing new working arrangements to provide for a safer medicines optimisation process across the Trust organisation when there is resistance to change. Dealing with external agencies (CCG AND NHSEs, MHRA, CQC) and representing the trust at management level

d. Working conditions

Use of vdu, possible chemical spills, verbal aggression from staff or patients. Ensuring that hazardous drugs are managed using all safety precautions for staff. Overcoming resistance from staff to changes in working practice. Dealing with vexatious complaints and grievances from staff resistant to change or personal development. Taking work home when necessary to ensure that deadlines are met and patient treatment is not delayed. Ability to work under pressure and remain calm and in control.

e. Risk Management

The Royal National Orthopaedic Hospital NHS Trust strives to take a holistic approach to the management of risk; Health and Safety, Caldicott, Corporate and Clinical Governance requirements are all elements of risk management.

Risk management is fundamental in ensuring the safety of all whilst on Trust premises and in ensuring that a high level of quality care is continually provided. To support staff in the management of risk, the Trust provides training programmes and facilitates staff in the use of risk management identification tools. In turn, individuals are responsible for ensuring that they attend training sessions and adhere to the Trust's policies and procedures, which includes the reporting of incidents, both actual and near miss.

f. Health and Safety at Work Act

Assuming normal Health and Safety standards are met

Driving to and from work is not included

Under the provisions of the Health and Safety at Work Act 1974 it is the duty of every employee to:

- Take reasonable care of themselves and of others who may be affected by their acts or omissions.
- Co-operate with their employer in ensuring that all statutory and other requirements are complied with.

14. Terms and Conditions of Service

This appointment is subject to the terms and conditions of employment of the Royal National Orthopaedic Hospital NHS Trust.

February 2016