

Examples of IP applicant profiles

Community Pharmacist wishing to prescribe for patients with type 2 diabetes

Fatima has been qualified for 5 years. She completed her pre-registration year in hospital and her first year as a pharmacist before moving to community pharmacy. Her hospital role included direct patient contact, medication reviews and participation in ward rounds. Fatima gained experience in her chosen field during her time in hospital and has built on this in her community role through MUR, NMS services and vaccination programmes. Fatima is responsible for providing healthy living advice such as health promotion activity, BP measurement and blood glucose monitoring all of which are highly relevant to her intended role as a prescriber for patients with diabetes. In this role she is required to both advise and to take recommendations from her local GP surgery. She has extensive experience of face to face patient contact.

To support her evidence Fatima provided a short testimonial from her pharmacist line manager which provided support of her pharmacotherapy knowledge and skills.

Fatima has completed the first year of a clinical pharmacy diploma, including modules on patient monitoring and on the treatment of type 2 diabetes.

Community Pharmacist wishing to prescribe in substance misuse

Rhiannon has been qualified for over 20 years and works in community pharmacy. She has provided a number of patient facing services including MUR, influenza vaccination service, emergency hormonal contraception enhanced services, smoking cessation services, common ailments enhanced services and substance misuse services.

She has completed the first year of a clinical pharmacy diploma and is currently studying on the Royal College of General Practitioners online learning 'Drugs: management of Drug Misuse (level 1)' as part of the RCGP Certificate in the management of drug abuse. She has also completed the WCPEE module on substance misuse.

Rhiannon has provided evidence of the development of good working relationships with key workers, pharmacist liaison manager and prescribers at her local Community Drug and Alcohol team. She has had the opportunity through these contacts to attend case meetings and observe induction and assessment of new patients.

Critical Care pharmacist

William has worked as a specialist critical care pharmacist for eight years. In this role William daily reviews critical care patients treatment focusing on the use of antimicrobials. He also attends the consultant led ward rounds and weekly MDT meetings. At these meetings he is required to offer support to the medical team with regards to medication issues. As a specialist pharmacist he independently has responsibility for the observation of patients and formulating treatment plans.

William gained a clinical diploma 10 years ago and more recently completed an MSc in Critical Care. He attends weekly journal clubs and presents teaching sessions in his speciality area.

Recently qualified pharmacist

Ben completed his pre-registration training in hospital pharmacy two years ago and his first role is in a hospital outpatient pharmacy. Ben graduated from a university that offered prescribing training as part of its UG programme ie Ben is 'prescribing ready' ie he has completed the theoretical learning related to prescribing and has been introduced to health assessment and clinical decision making. He wishes to return to the same university where he can map his previous UG prescribing training to the course learning outcomes. Although Ben is 'early career' he is very keen to develop himself. He has been successful in gaining Foundation status with the RPS within two years. He has many hours face to face experience with patients both from his pre registration training and from his first two years in the outpatient pharmacy where he has been able to use his clinical assessment skills. Ben has made good links with local GPs to ensure the smooth transition of patients' from secondary care to primary care and is often called upon to resolve medication issues when patients leave the hospital. Ben also liaises with local community pharmacists to support patients leaving the hospital. The Trust is very supportive of Ben completing his IP training early, providing testimonials of his expertise. Ben will have support from senior pharmacists within the hospital as well as a hospital consultant who will act as his DMP. Ben is looking to work within the hospital Urgent Care Department to prescribe for patients who are assessed by the triage team as not requiring referral to the Emergency Department (A&E). With this in mind ben has undertaken a range of CPPE modules in the treatment of minor ailments, and has also spent time with other members of the Urgent Care team to identify additional skills which he may need to acquire during the course. Ben is keen to use the IP qualification as the first year of a Diploma award.