

Report on the Review of Hospital Pharmacy

with
2012 Bilateral Group Job Descriptions

Health Service Management represented by
the Department of Health and Health Service Executive
and

Hospital Pharmacists represented by
IMPACT and Hospital Pharmacists Association Ireland

NOVEMBER 2011

CHAired BY: **Dr. Ambrose McLoughlin**



REPORT ON THE REVIEW OF **HOSPITAL PHARMACY**

Chair: Dr. Ambrose McLoughlin

November 2011

Background

Prior to 1978 there was no definition of the role of a hospital pharmacist and no legislative requirement for hospital pharmacy services. The 1978 Working Party Report on Hospital Pharmacy placed the profession on an agreed footing with regard to roles and responsibilities as well as establishing the architecture for staff grading, a mapping exercise and a future vision regarding anticipated developments. The Report proposed a three grade career structure based on chief pharmacist, senior pharmacist and pharmacist grades. The pharmacist grade was the recruiting grade, and for the senior pharmacist and chief pharmacist grades, periods of post registration hospital experience of three years and five years respectively were required. The implementation of this Report established a career structure for hospital pharmacists as a separate entity from community pharmacy. While it was considered ahead of its time in 1978, the duties and responsibilities of hospital pharmacists have expanded greatly.

Specialisation in hospital pharmacy was broadly agreed at the General Assembly in Basel of the European Association of Hospital Pharmacy (EAHP) in April 1986. Ireland had been a full member since 1973. At a Conciliation and Arbitration meeting in Dublin in October 1986 the Hospital Pharmacists Association of Ireland (HPAI) stated to the management side the need for a new career structure to identify the emergence of clinical pharmacy and specialisation within the profession at European Hospital Pharmacy level.

In 1990 the PSI launched their independent 'Commission of Inquiry into Pharmacy', which recommended a career structure overhaul to reflect the declared intention of hospital pharmacists to advance the profession towards a greater patient focus.

Despite the failure to restructure the grades in hospital pharmacy at this time, the 1990's saw hospital pharmacists introduce specialisations that had a profoundly positive effect on patient safety and cost effectiveness. These specialisations included clinical pharmacy and aseptic compounding. In the next decade specialisations were extended to include medication safety pharmacists and antimicrobial pharmacists. In the last decade IT developments, cluster pharmacy services and automation projects, although isolated, emerged within hospital pharmacy and pointed to the next generation of creative developments.

A second review of structures within hospital pharmacy was approved by the Department of Health and Children in 2001. In 2005, the Department of Finance agreed to the finalisation of outstanding reviews, such as that of hospital pharmacists, where service improvements were involved. Further delays were however incurred due to the establishment of the Health Service Executive (HSE) on January 1st 2005 and the commencement of the Pharmacy Act on the 22nd May 2007. In late 2009, Dr. Ambrose McLoughlin was appointed as Chair of the Review of Hospital Pharmacy.

Hospital Pharmacy and Change

The profession of pharmacy has gone through major changes over recent years. Pharmacists have adapted and changed their work practices to build capacity within the health service and to reflect the needs of a changing patient population, and the rapidly increasing complexity of therapeutics and the cost of healthcare. Currently hospital pharmacists manage combined drug budgets in excess of €300 million per annum. Hospital pharmacists also have significant impact on the actual pharmacy spend across the whole health system which is estimated at circa €2.5 billion. Hospital pharmacy services may include the following:

1. Procurement, safe storage and distribution of medicines, which includes contracting, negotiating, ordering processes, purchasing for safety initiatives, invoice matching, consideration of ethical and legal issues and the challenges of meeting demand. This portfolio of services would typically be overseen by a pharmacist, although procurement strategy and for example contracting remains the responsibility of the Chief Pharmacist.
2. Medicines advice and information, which includes the development of formularies and clinical guidelines, anticipation and research into major drug innovations, information storage, receipt, answering and recording of questions, pro-active education, Drugs and Therapeutics Committee support and research, drug usage review and cost analysis.
3. Medication safety and risk management, which includes incident reporting, recommendations for and audit of system changes, root cause analysis, dissemination of safety information and the management of high risk medicines.
4. Outpatient dispensing e.g. HIV, clozapine, TB medicines, at the point of discharge and liaison with primary care.
5. Aseptic preparation and dispensing of intravenous medicines including cancer treatments, antibiotics and other complex medicines such as mono-clonal antibodies, including home care with cancer and antibiotic therapies. These manufacturing activities must be carried out under controlled aseptic conditions and strictly applied prescribing and manufacturing standard operating procedures (SOPs) according to international guidelines.
6. Clinical pharmacists are independent practitioners who may also operate as part of a clinical team providing 'near patient' pharmaceutical care. This includes medicines reconciliation, prescribed medication and clinical review, adverse drug interaction (ADR) identification and reporting, patient specific medicines information and discharge counselling.
7. Managing phase I, II and III and post-marketing clinical trials involving medicines. Good Clinical practice (GCP) as defined by the European Medicines Evaluation Agency (EMA), essentially mandates pharmacist involvement in trials managed in the hospital setting.
8. Education, training and research relating to pharmacy, medicines and therapeutics. Hospital pharmacists are involved in teaching at nursing and medical undergraduate levels and supporting education in the primary care setting. Hospital pharmacists also present at Grand Rounds to junior and senior doctors and other senior health care workers.

It is clear that the range of services and resources now managed by Chief Pharmacists is unique in the Irish Health Service. (Appendix 1 provides extensive descriptions of the pillars of Hospital Pharmacy Specialisation and was agreed in 2004 by both the management and staff side. The document is currently being updated to replace pre-HSE terminology and the updated document will be inserted into Appendix 1).

Hospital pharmacy practice has developed in recent years in order to meet the need for a clinical pharmacy service to patients and clinical teams. The increasing complexity of new medicines and therapy regimes over the last 20 years in particular has meant that it has been necessary for hospital pharmacists to develop specialist clinical roles. Consequently, many pharmacists developed a keen interest in specific specialist areas and have evolved into specialists over the years. These patient centred services are required to be delivered in a safe and consistent manner.

Challenges and the Evolving Role of Hospital Pharmacists

Hospital pharmacists now play a fundamental role in hospitals achieving excellence in clinical governance, including managing both clinical and financial risks. As the only healthcare professionals trained specifically as experts on all aspects of medicines and their use, pharmacists make an exceptional contribution to ensuring rational choice and the safe, effective and economic use of medicines.

Today in Ireland, the hospital pharmacist operates as an autonomous professional who provides expertise and leadership in medicines management. In 2001, the UK Audit Commission 2001 report 'A spoonful of Sugar' defined medicines management as "encompassing the entire way that medicines are selected, procured, delivered, prescribed, administered and reviewed to optimise the contribution that medicines make to producing informed and desired outcomes of care". The report concluded that improved medicines management underpins many specific (UK) healthcare strategies. When applied to pharmacist-patient interactions in primary care, it is often referred to as 'pharmaceutical care' and in the hospital setting as 'clinical pharmacy'. In either scenario it is evidence based and well defined in the literature and in clinical practice in other jurisdictions.

In the provision of healthcare services, the need for high quality and strategic medicines management will become increasingly essential in order to meet the challenges of providing safe and effective care to patients, while ensuring rational and cost-effective use of medicines. New medicines are increasingly complex with the emergence of novel technologies (e.g. biologicals, biosimilars, personalised medicines, advanced therapies etc.). Providing safe and effective medicines therapy to patients will continue to be a challenge for health systems as patients now live longer, with a more complex mix of co-morbid conditions and require medication regimes that are increasingly complicated and individualised, with the effect that patients are treated with a greater number of more complex medicines over longer periods of time. In addition, the increasing cost of new technology medicines means that the rational and cost-effective use of medicines becomes ever more essential in order to contain costs so that health systems can continue to afford to make new and innovative treatments available to patients.

Furthermore the expanded roles and responsibilities of pharmacists include financial management, meeting regulatory requirements, safety, quality and ethical responsibilities as outlined below:

- Performance Audit
- Cost Control
- Accreditation systems
- Increasing executive responsibilities
- Quality management
- Compliance with pharmacy, medicinal products, drugs and Health and Safety regulations, hygiene audits etc.
- Supporting the implementation of national strategies e.g. unlicensed medicinal products, cancer strategy, cardiovascular strategy, acute medicines programme etc.

Hospital pharmacy also has the added potential to play a key role in designing, developing and implementing medicines management solutions within the new integrated systems of care proposed by the HSE Quality and Clinical Care Directorate (now split into a Clinical Strategy and Programmes Directorate and a Quality Risk and Clinical Care Directorate). This has also been captured in paragraph 2.9.7 of the Public Service Agreement 2010-2014 (Croke Park Agreement)¹ and pharmacists will play a lead role in ensuring these parameters are met. Pharmacists working at management and specialist clinical levels will be of the highest competence and training, bringing unique sets of skills to patient care. Posts may be identified at a Clinical Specialist Pharmacist/Pharmacy Service Manager grade that

¹ Extract from the Croke Park Agreement para. 2.9.7. "better management of risk, safety and quality within the health sector, through adherence to systems, care pathways, disease programmes, protocols, audit, information management systems, etc. Such systems must be developed under the authority of the Director of Quality and Clinical Care and operationalised under the direction and oversight of the relevant clinical leaders at local level e.g. medical, nursing or allied health professional grades, consistent with the recommendations of the Commission on Patient Safety and Quality Assurance"

will reflect pharmaceutical need in quality integrated pathways and other identified key health areas such as antimicrobial resistance, infectious diseases, mental health, critical care and both in-patient and ambulatory cancer care.

The continuing professional development (CPD) structure and the new Institute of Pharmacy will provide clearly defined pathways of learning to support the Clinical Strategy and Programmes Directorate for the roll out of a specialist pharmacy services in line with the Pharmacy Act 2007².

Changes within the Health Service Executive

The HSE launched a transformation programme 2007-2010 to improve services to enable people to live healthier and more fulfilled lives with six transformation priorities:

1. Develop integrated services across all stages of the care journey
2. Configure primary, community and continuing care services so that they deliver optimal and cost effective results
3. Configure hospital services to deliver optimal and cost effective results
4. Implement a model for the prevention and management of chronic illness
5. Implement standards based performance measurement and management throughout the HSE
6. Ensure all staff engage in transforming health and social care in Ireland

Following on from this an Integrated Services Directorate was established in October 2009 as part of the HSE's management restructuring to enable a greater integration of services. This Directorate has responsibility for the delivery of all health and personal social services across the country including hospital, primary, community and continuing care services and management of an overall budget of €14 billion with a statutory and voluntary sector workforce of approximately 108,000 equivalents at December 2010.

The aim of the Integrated Services Programme is to develop a 'best fit' structure at local level to:

1. Deliver excellent health outcomes for the population through integration of services
2. Ensure more efficient use of resources
3. Have a clear spinal cord of accountability from top to bottom
4. Support the strategy of shifting balance of activity towards prevention and community based care and away from hospital based care
5. Ensure services are organised around the population based service delivery model
6. Streamline and reduce the management layers and numbers bringing decision making as close as possible to service delivery

These objectives must guide the organisation design for each service. In this regard the organisation design and the requisite support structures to deliver services under the area management/Integrated Service Area (ISA) model must be 'road tested' against these principles.

The HSE has also established a Quality and Clinical Care Directorate (now split into a Clinical Strategy and Programmes Directorate and a Quality Risk and Clinical Care Directorate) to improve and

²The Pharmacy Act 2007 introduced mandatory continuing professional development (CPD) for pharmacists in Ireland. The Pharmaceutical Society of Ireland (PSI) commissioned a review of educational research, to critically assess CPD models and the associated assessment and audit systems in order to guide the Council of the PSI in developing an appropriate and effective system of mandatory CPD for pharmacists in Ireland. The CPD report recommended the establishment of an Institute of Pharmacy to oversee the management and delivery of CPD for pharmacists and to progress the development of pharmacy practice in Ireland in line with international best practice and evolving healthcare needs with the PSI controlling the regulatory processes and defining the competency standards against which the CPD system would be framed.

standardise patient care throughout the organisation by bringing together clinical disciplines and enabling them to share innovative solutions to deliver greater benefits to every user of HSE services.

The core objectives of this Directorate are:

- To improve the quality of care delivered to all users of HSE services
- To improve access to all services
- To improve cost effectiveness

The Review of Hospital Pharmacy falls directly within the transformation programme currently being implemented by the HSE and in particular the implementation of the area management/ISA structures.

The present health service structures are subject to change given the commitments on health reform made in the Programme for Government. The specific recommendations in this report in relation to the structure of hospital pharmacy and the roles and responsibilities of certain posts are therefore subject to change in that context. The implementation of this report must of necessity take account of and adapt to new health service structures as these are determined and brought into being. In particular, consideration will have to be given to how any future restructuring of paediatric services can be catered for from a pharmacy perspective.

Transformation of Hospital Pharmacy Services

- The HSE require a National Steering Group of Regional Pharmacy Leads to be actively involved in developing a national strategy for pharmacy services and to specify national standards for pharmacy practice, care and treatment and also to lead and to be accountable for these approved strategies.
- The National Steering Group will be expected to meet on a periodic basis to work on common agendas in relation to the health system and to facilitate the implementation of the outputs of such meetings within specified timeframes.
- In accordance with its statutory remit, the PSI, in consultation with the HSE, will commence a Baseline Study of hospital pharmacy. Hospital pharmacists will be required to co-operate fully with the Baseline Study.
- The HSE requires the direct active participation of pharmacists in regional and area management/ISA structures including areas such as mental health, care of older persons, disability and primary care with a specific focus on improving the outcomes for patients with chronic illness and enhancing the cost effectiveness of the whole care system, within the human and economic resources available.
- The HSE has an imperative to put in place more cost effective pharmacy services including e-prescribing, robotic dispensing, national formularies and national pricing to maximise value for the tax payer and patients.

The Revised Structure of Hospital Pharmacy

The revised structure of hospital pharmacy must facilitate a consistent delivery of pharmacy services in line with best practice and recognised international standards. The new structure of hospital pharmacy must be capable of contributing directly to the formulation of future national policy and be capable of delivering on the implementation of such policies, in particular, in relation to medicines and medicine management and must also deliver clinical effectiveness and other efficiencies. The proposed hospital pharmacy structure will lead to significant savings through the co-ordinated and managed efforts of Directors of Hospital Pharmacy and Directors of Medicines Management working collaboratively on procurement with the aim of achieving at least €10 million in savings in 2011 with more savings to follow in the years ahead. Regional Pharmacy Leads and Directors of Hospital Pharmacy and Directors

of Medicines Management must also have due regard for the cost implications in the primary care sector from prescribing patterns established in the hospital setting. The structure will also allow for the expansion of acute hospital pharmacy services to other patients in HSE care e.g. those attending care of the elderly facilities, mental health facilities etc. The new structure will facilitate hospital pharmacists to take a lead and active direct role on the introduction and implementation of e-prescribing, computerised stock inventory management, improved services in mental health and care of the elderly, robotic dispensing, underpinned by formulary and prescribing protocols for both the acute and primary care sectors.

The current structure and service has very significant regional and sector variation in the scope of services and resources available to hospital pharmacy. It is therefore essential to standardise the clinical management arrangements so that there are standardised approaches to pharmacy service provision across the whole system. The current grading structure of pharmacists outlined in the Department of Health and Children's salary scales, the number of pharmacists employed within these grades and the technicians which report to them from the HSE's personnel census are outlined below:

Grade	WTE as at January 2011 reported to the HSE
Chief I Pharmacist	23.5
Chief II Pharmacist	68.8
Senior Pharmacist	236.1
Pharmacist	113.7
Sub-total of Pharmacists	442.1
Pharmaceutical Technician	170.8
Pharmaceutical Technician, Senior	108.4
Total	721.3

The proposed structure of hospital pharmacy outlined in this report will deliver a defined career structure with a clear accountability and authority framework for hospital pharmacists. This will result in the health service being in a position to deliver on high level cost savings, enhance corporate objectives relating to delivering on cost savings and provide a more efficient pharmacy service through the integrated structures proposed. The proposed structure will also deliver a high quality service, concentrating on ensuring the safe, effective and economic use of medicines for patients in, or transitioning through, the acute care sector.

The HSE have made substantial progress in their transformation programme which is being implemented. Clinical Directors have been appointed to manage clinical services across the system as part of clinical care programmes e.g. regional roles are currently in place or being developed around mental health, older persons, disabilities, children and family services, dental (oral health), audiology, regional clinical programme leads and emergency management.

The Review Group recognises the importance of the new structure for hospital pharmacy service provision being aligned with the proposed structure of the HSE. The new structure must actively contribute and support the roll out of the work of the HSE Clinical Strategy and Programmes Directorate and the HSE Quality, Risk and Clinical Care Directorate in respect of the Report of the Commission on Patient Safety and Quality Assurance and also support the work of the National Cancer Control Programme where required.

The new structure should also support and work closely with national programmes and structures including the National Medication Safety Programme, the Medicines Management Programme/HSE Corporate Pharmaceutical Unit and the HSE Primary Care Reimbursement Service. There is also a requirement to ensure that the structure collaborates with the liaison Chief Pharmacy positions in addiction services. As well as retaining their current reporting relationships, the Directors of Hospital Pharmacy and Directors of Medicines Management will also have a “dotted line” reporting relationship to the Regional Director of Operations (RDO)/the nominated ISA Manager, as appropriate.

The new structure should also work closely with and support the development of policy initiatives by the Department of Health, and in particular, policies to promote the safe, effective and rational use of medicines within our healthcare system.

The Review of Hospital Pharmacy has also had regard to the significant and important work of the Chief Medical Officer of the Department of Health and the Chief Pharmacist in respect of the implementation of the Report on the Commission on Patient Safety and Quality Assurance. This Report has also had regard to the Patient Safety First Initiative which is the premier vehicle for rolling out the whole system response to the challenges of the Health System to provide a higher quality service for patient and members of the public. Hospital pharmacists will continue to support the work already undertaken by the HPAI and the Irish Medication Safety Network in the appropriate implementation of initiatives identified as a result of the Patient Safety Commission.

HSE Integrated Models of Care-Integrated Service Area (ISA) Structures

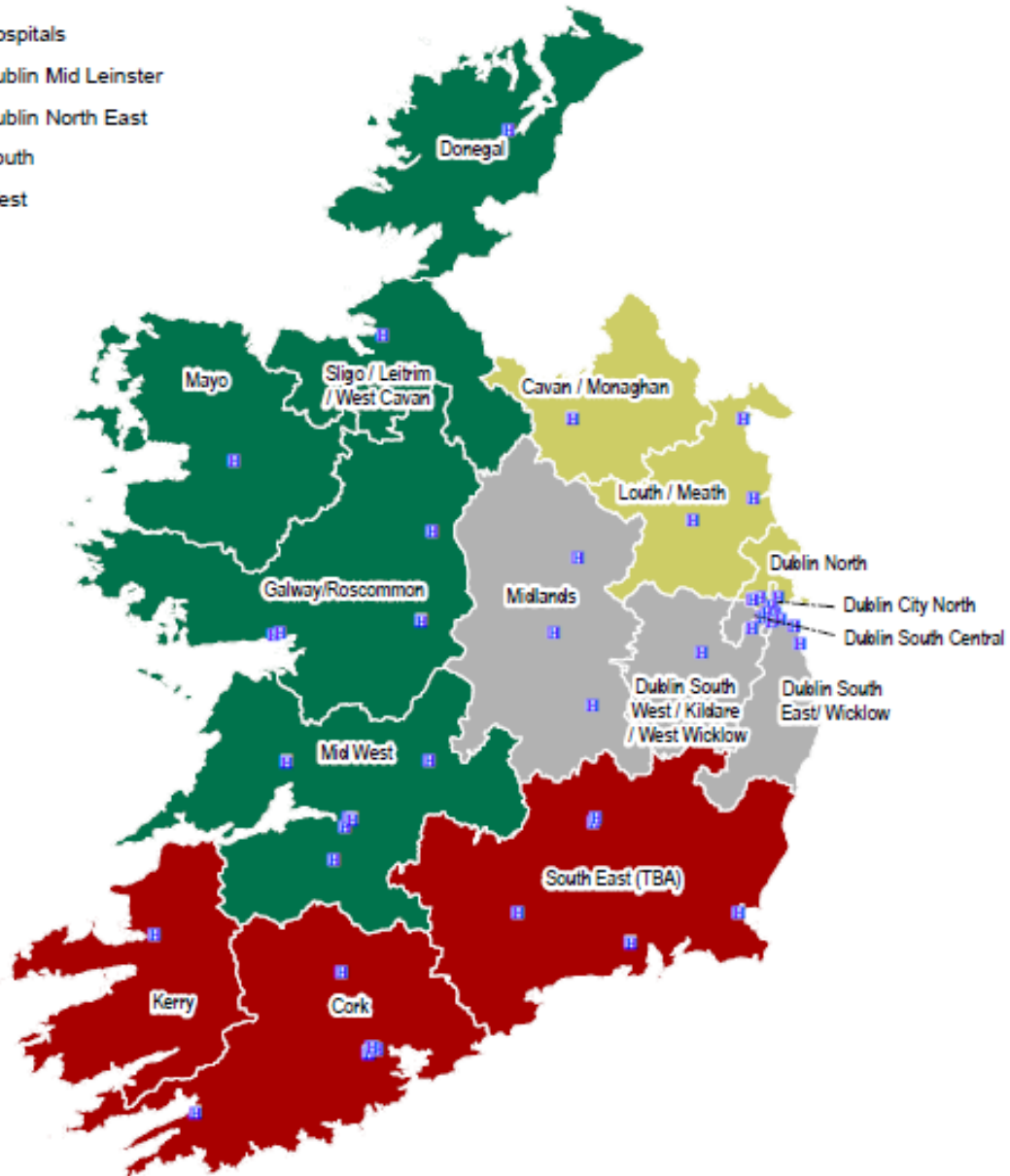
The details of the proposed ISA structures which have been approved by the HSE are outlined in Figure 1.

Professional Pharmacy input is critical to the success of HSE integrated models of care. This Report recognises that the HSE is required to comply with the Employment Control Framework (encompassing the moratorium on recruitment) set by Government. Subject to the Employment Control Framework being complied with, this report recommends that the HSE should have regard to the critical role played by pharmacy services in ensuring appropriate and cost-effective patient care and so accord an appropriate priority to the filling of key positions within this service.

Location of HSE's Four Regions, Integrated Service Areas (ISAs) and Hospitals

Legend

- H Hospitals
- Dublin Mid Leinster
- Dublin North East
- South
- West



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Figure 1. Integrated Service Areas proposed by the Health Service Executive

Recommendations from the Review of Hospital Pharmacy

Recommendation 1-Director of Hospital Pharmacy and Director of Medicines Management (17)

The Review of Hospital Pharmacy has had regard to the policy of the HSE and the requisite support structures to deliver services under the area management/ISA model. It is therefore recommended that each ISA hospital group should have a Director of Hospital Pharmacy and Director of Medicines Management who will report directly to the Hospital CEO and have a “dotted line” reporting relationship to the RDO/ the Senior Manager of that particular ISA, as appropriate.

Subsequent to expressions of interest being sought these individuals will be appointed through an interview and selection process as may be agreed by the HSE and IMPACT/HPAI. Pharmacists, who are currently employed by the HSE and other acute hospitals at Chief Pharmacist 1 level (Head of Department), should be eligible to compete where they can meet the competencies specified in the job descriptions. In the event that the seventeen posts are not filled following an internal confined competition, the competition may be opened to those currently employed at Chief Pharmacist II and Senior Pharmacist grade. It is recommended that these appointments be made immediately upon the agreement of this Report.

Many of these appointees will require appropriate support and training to deliver the maximum benefit to patients and value to the HSE. At the time of the writing of this report the full implementation plan of the ISA's is incomplete. This Report recognises this fact and recommends flexibility in the shaping and the design of pharmacy services in order to be in line with the ISA's.

Recommendation 2-Regional Pharmacy Leads (4)

One Regional Pharmacy Lead to be appointed to each of the four HSE regions to be responsible for pharmacy services, which includes publicly funded facilities, directly run and managed by the HSE, and privately owned and operated HSE services. These posts would be part-time and on a 2-3 year rotational basis. The appointed individuals would be selected from amongst the 17 Directors of Hospital Pharmacy and Directors of Medicine Management. Subsequent to expressions of interest being sought these individuals will be appointed through an interview and selection process as may be agreed by the HSE and IMPACT/HPAI. The HSE and IMPACT/HPAI will also have to agree the needs of the level of clinical and administrative support following discussion and agreement at regional level. It is recommended that these appointments be in place by the _____ 2011.

Recommendation 3-Deputy Directors of Hospital Pharmacy and Deputy Directors of Medicines Management (Number of Deputy Directors to be confirmed as part of the implementation process)

On the appointment of Regional Pharmacy Leads and Directors of Hospital Pharmacy and Directors of Medicines Management, discussions should take place on the number of Deputy Directors of Hospital Pharmacy and Deputy Directors of Medicines Management required within each ISA. Directors of Hospital Pharmacy and Directors of Medicines Management in conjunction with the Regional Pharmacy Leads are required to make formal submissions with regard to their area of responsibility and engage in a process of consultation with health service management to determine the number of Deputy Directors required for each ISA.

Recommendation 4-Clinical Specialist Pharmacists

A Clinical Specialist grade is to be created that reflects the contribution of pharmacy to quality integrated pathways. The Clinical Specialist Pharmacist appointments will depend on specialisation within individual ISA's but could include key health areas such as antimicrobial resistance, infectious diseases, intensive care, transplantation, mental health, cardiac care, care of the elderly in both secondary and primary care environments, critical care and in-patient and ambulatory cancer care

(including hospitals other than the designated cancer centres). The Clinical Specialist Pharmacist grade may include medication safety, aseptic compounding, clinical services, dispensary services and medicines information, with the potential for ISA wide procurement and supply policies incorporating primary care initiatives. The number of these posts is to be agreed by the Regional Pharmacy Leads and Directors of Hospital Pharmacy and Director of Medicines Management in conjunction with health service management and will be determined based on ISA needs and configurations. Evidence based best practice suggests that a grade of Clinical Specialist Pharmacist may initially be the appropriate mechanism for introducing prescriptive authority for pharmacists in the Irish healthcare system.

The primary aims of these posts will be to:

- Deliver the highest level of clinical pharmacy services through expert practice and professional advice and to ensure the optimisation of patient safety initiatives
- Optimise the potential of pharmacy resources, skills and knowledge through research, evaluation and service development
- Strengthen professional leadership through effective communication with other clinical leaders, motivation of staff and stakeholders and challenging barriers to change
- Offer clear career pathways to promote the retention of highly skilled pharmacists within the service
- Ensure proper and efficient management of staff in the complex and key specialisations of aseptic compounding, clinical services, dispensary services, medication safety and drug information

These duties will be carried out under the Director or Deputy Director of Hospital Pharmacy and Director or Deputy Director of Medicines Management and will directly facilitate the new integrated service areas.

Recommendation 5- Clinical Specialist Pharmacists and Senior Pharmacists

The Clinical Specialist Pharmacists and Senior Pharmacists grades will be agreed in conjunction with the Regional Pharmacy Leads and Directors of Hospital Pharmacy and Directors of Medicines Management. This will ensure that the fundamental principle that will apply is the delivery of the most cost effective pharmacy service in line with the requirements of flexible, protocol driven, evidence based best practice tailored to patient's needs. It is proposed that the transition to these new grades will be progressed by the _____ 2011 through a process of consultation between the Regional Pharmacy Leads, Directors of Hospital Pharmacy and Directors of Medicines Management and health service management. The preferred route for appointment of these particular grades would be by assignment following consultation with existing post-holders ie Chief II Pharmacists and the existing grade of Senior Pharmacists.

Recommendation 6- Pharmacist

The pharmacist grade is a substantially different post to the one currently in place. It is proposed that the assignment of existing post holders would be by agreement with specific performance criteria determined with each post-holder to ensure performance of pharmacy services to the highest level. It is recommended that these appointments be made no later than _____ 2011.

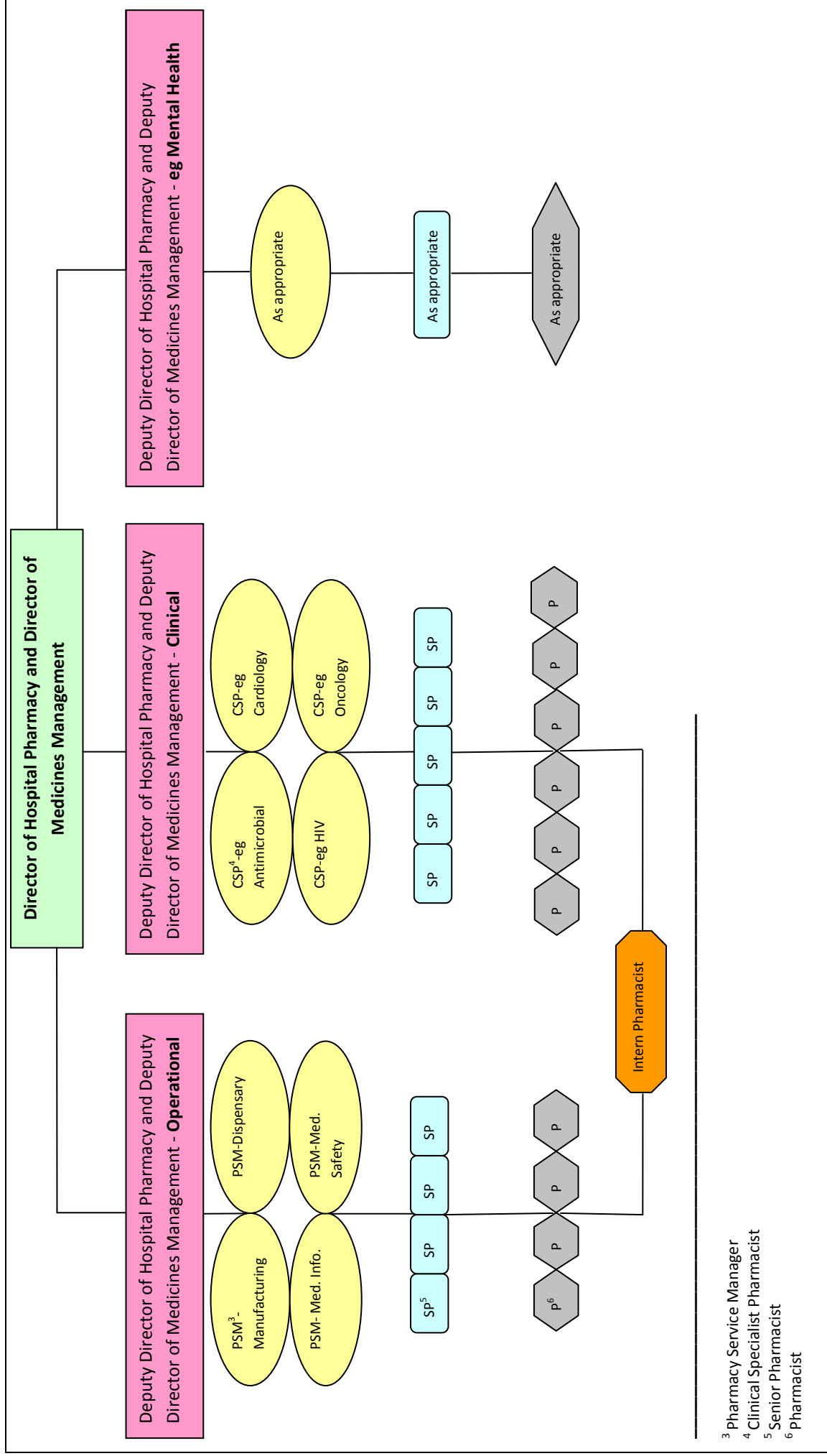
Recommendation 7- Graduate Entry Grade

The introduction of a graduate entry grade is to be examined as the implementation of the revised structure proceeds.

Recommendation 8- Transitioning

An indicative illustration of the proposed hospital pharmacy career structure is illustrated in figure 2. The numbers of personnel to be transitioned will be based on the number of posts currently reported in the HSE and associated hospitals. Transitioning will be carried out in the context of the Public Service Agreement 2010-2014 (Croke Park Agreement) and the Public Service Moratorium. Further details of the requirements of the proposed grades including reporting structures and key responsibilities are outlined in Appendix 2.

Figure 2: Indicative Illustration of the Proposed Hospital Pharmacy Career Structure



Conclusion

It is recommended that the structural changes proposed in this report would be implemented on a phased basis over a 1 year period commencing with the appointment of Directors of Hospital Pharmacy and Directors of Medicines Management and Regional Pharmacy Leads. The appointment of the Directors of Hospital Pharmacy and Director of Medicines Management should be made immediately and the Regional Pharmacy Leads should be in place by the _____ 2011. The transition agreement for the appointment of Deputy Directors of Hospital Pharmacy and Director of Medicines Management, Clinical Specialist Pharmacists/Pharmacy Service Managers and Senior Pharmacists should be agreed by the _____ 2011 and the appointment of the Pharmacist grade should be agreed not later than _____ 2011. The Chair of the Review Group Dr. Ambrose McLoughlin will assist in the implementation process as required by HPAI/IMPACT and the health service management to ensure the structure is working effectively. Appendix 3 to this document provides a guide to the development of job descriptions and also provides some sample job descriptions. Final job descriptions will be agreed as part of the implementation process.

The Chair of the Review Group is satisfied that the HPAI/IMPACT are entirely supportive of and wish to be actively involved in supporting health service management in the implementation of the transformation programme. It is clear there is a high level of agreement and consensus between both the management and the staff side on the new ISA's structures which are now being implemented. These structures will be implemented on an incremental basis and will be subject to modification by agreement with the stakeholders. We understand that the HPAI/IMPACT will implement the recommendations contained in this report in the context of the Public Service Agreement 2010-2014 (Croke Park Agreement) as outlined earlier in the report.

Implementation of the new hospital pharmacy career structure will be expected with the appropriate delegation of responsibility and authority to hospital pharmacists, to deliver savings and improved drug utilisation in order to optimise patient outcome and reduce morbidity and costs associated with avoidable medication safety events. Procurement efficiencies and shared services (on a national, regional or ISA basis) should also have the effect of offsetting any initial costs over time. The revised structure will also allow for a comprehensive programme of quality improvement and medication risk management to be applied nationally facilitated by the Directors of Hospital Pharmacy and Director of Medicines Management. The Directors of Hospital Pharmacy and Director of Medicines Management and Regional Pharmacy Lead roles will actively support the development of national standards and will lead to the implementation of standards across all aspects of healthcare services within the ISA's.

The structure allows for the appointment of four Regional Pharmacy Leads who will have oversight of and will focus on hospital and primary care pharmacy services, national standards and implement national and regional Initiatives (formulary management, review of aseptic services in line with cancer strategy, e-prescribing). The Regional Pharmacy Leads will play a key role in advising on the future of hospital pharmacy and the role of pharmacists in the context of the wider healthcare team. The revised structure will also allow for the expansion of cover across all services within an ISA. It also provides opportunities for re-deployment of services where most needed to assist in improving cost efficiency.

The new structure provides clear lines of authority, responsibility and accountability within hospitals and ISA's and has due regard to the Pharmacy Act 2007. The structure also provides for the appointment of Clinical Specialist Pharmacists, these individuals would be able to work across a group of hospitals within an ISA (or in some circumstances regionally) in specialist areas such as HIV/AIDS, antimicrobial resistance, cancer care etc. The Director of Hospital Pharmacy and Director of Medicines

Management of each ISA will be fully involved in the implementation of the new Clinical Specialist Pharmacist/Pharmacy Service Managers and Senior Pharmacist grade structure and also the Pharmacist grade structures. They will also have key inputs to make in respect of policy decisions and the proposed new graduate entry grade.

The new structure will facilitate and support the development of structured integrated care programmes for older people, people with disabilities, people with special needs and in particular those suffering chronic illness, many of whom are supported in ambulatory care and continuing care settings as well as primary care. In the new structure pharmacists will have an important contribution to make in ensuring that integrated care is cost effective from a whole care system perspective.

Appendix 1

CHAPTERS Document

Extensive descriptions of the pillars of Hospital Pharmacy Specialisation (see below) was agreed in 2004 by both the management and the staff side. The document is currently being updated by the HPAI to replace pre-HSE terminology. The updated document will be inserted into this appendix when completed.

The Chapters describe:

1. Management of Pharmacy Departments
2. Clinical Pharmacy
3. Pharmaceuticals Procurement
4. Aseptic Compounding/Oncology Manufacture
5. Dispensary
6. Risk Management & Quality Assurance
7. Medicines Information
8. Role of the Hospital Pharmacist in Education and Training
9. Skill Mix-incorporating technical and support services into a professional domain

Appendix 2

PROPOSED HOSPITAL PHARMACY CAREER STRUCTURE

1. **Regional Pharmacy Lead**
 - Four posts (one per HSE Region)
 - Part-time rotational post (2-3 yrs in office)
 - Major oversight role on all HSE delivered pharmacy services¹, in particular hospital pharmacy
 - Focus on developing and implementing national standards and programmes, thereby giving clarity of vision and clear lines of authority to pharmacists to carry out duties
 - Reporting through the Regional Director of Operations (RDO) (or their delegate) of the ISA (in addition to maintaining current reporting relationships)
 - Attend regional team meetings as required and will be a member of the National Steering Group of Regional Pharmacy Leads in conjunction with representative from the HSE
 - Responsible for liaison with the Corporate Pharmaceutical Unit regarding cost implications for the primary care sector from hospital prescribing and dispensing patterns
 - Undertake continuing professional development in line with the Pharmacy Act 2007

2. **Director of Hospital Pharmacy and Director of Medicines Management**
 - It is anticipated that there will be 17 Integrated Service Areas (ISA) with one Director of Hospital Pharmacy and Director of Medicines Management for each ISA
 - Minimum of 7 years hospital pharmacy experience
 - Reporting through the Area Manager (or their delegate) with authority to lead and take primacy in all matters of medicines management within the ISA (in addition to maintaining current reporting relationships)
 - Responsible for all HSE delivered pharmacy services within an ISA
 - Undertake continuing professional development in line with the Pharmacy Act 2007
 - Will be the appropriate grade for Superintendent Pharmacist if the hospital is registered under the Pharmacy Act 2007

3. **Deputy Director of Hospital Pharmacy and Deputy Director of Medicines Management**
 - Minimum of 5 years hospital pharmacy experience
 - Reporting will be through the Director of Hospital Pharmacy and Director of Medicines Management
 - Undertake continuing professional development in line with the Pharmacy Act 2007

¹ Publicly funded facilities, directly run and managed by the HSE, including privately owned and operated HSE services.

- 4. Clinical Specialist Pharmacist/Pharmacy Service Manager**
- Minimum of 5 years hospital pharmacy experience
 - Reporting through the Deputy Director/Director of Hospital Pharmacy and Deputy Director/Director of Medicines Management
 - Undertake continuing professional development in line with the Pharmacy Act 2007
 - May be the appropriate grade, as determined by the Director of Hospital Pharmacy and Director of Medicines Management, for Supervising Pharmacist if the hospital is registered under the Pharmacy Act 2007
- 5. Senior Pharmacist**
- Minimum of 3 years hospital pharmacy experience
 - Reporting through the Deputy Director/Director of Hospital Pharmacy and Deputy Director/Director of Medicines Management
 - Undertake continuing professional development in line with the Pharmacy Act 2007
 - May be the appropriate grade, as determined by the Director of Hospital Pharmacy and Director of Medicines Management, for Supervising Pharmacist if the hospital is registered under the Pharmacy Act 2007
- 6. Pharmacist**
- Staff Grade (minimum of 1 year hospital pharmacy experience)
 - Reporting through the Senior Pharmacist, Deputy Director/Director of Hospital Pharmacy and Deputy Director/Director of Medicines Management

Appendix 3

GUIDE TO THE DEVELOPMENT OF AND SAMPLE JOB DESCRIPTIONS- (to be agreed as part of the implementation process)

REGIONAL PHARMACY LEAD

There should be four Regional Pharmacy Leads, one from each of the four HSE administrative areas, HSE West, HSE South, HSE Dublin North East, HSE Dublin Mid Leinster. In order to ensure equity and balance between regions the post holder position should be rotated within a given region every 2-3 years.

Accountable to: Nominated Regional Director of Operations (RDO) of the ISA (*in addition to current reporting relationship*)

Responsibilities of the Regional Pharmacy Lead:

- To provide a leadership role.
- To have a role in resource allocation, priority setting, service planning and evaluation.
- To provide strong and effective leadership in the implementation of medicines policy across the region.
- To oversee the development and implementation of medicine management systems including pharmacoconomics, rational use, e-prescribing, robotics, etc.

DIRECTOR OF HOSPITAL PHARMACY AND DIRECTOR OF MEDICINES MANAGEMENT/SUPERINTENDENT PHARMACIST

There will be one Director of Hospital Pharmacy and Director of Medicines Management for each of the 17 ISA's. The Director of Hospital Pharmacy and Director of Medicines Management will lead the team of pharmacists in the ISA. These positions are seen as key leadership and clinical management positions in bringing hospital pharmacy in each ISA hospital group to the highest possible standard. It would be important in the early years that the persons appointed to these roles have the capacity and competencies to lead and implement significant changes. The Director of Hospital Pharmacy and Director of Medicines Management will be responsible for agreeing a medicines management policy for the ISA and ensuring consistency of this policy with national policy. They will contribute and work with colleagues and other employees involved in therapeutic and medication committees to ensure control on the introduction and use of medicines, consistent guidelines for use, policies on safe handling of medicines and control of medicine expenditure within agreed standardised nationally assigned drug budgets. Audit methodologies for monitoring drug utilisation review and prescribing decisions based on licensing changes and the introduction of new drug entities will be established to facilitate the multidisciplinary decision making processes regarding drug usage at ISA level. The Director will have key responsibilities in delivering the medicines management component of clinical governance within the ISA, working with other colleagues and other disciplines as required. They will also have a critical role in communicating effectively medicines management policy throughout the ISA. The Director will be professionally and managerially accountable for the strategic and operational delivery of:

- Clinical pharmacy service
- Pharmaceutical support services including manufacturing, aseptic/cytotoxic services
- Directing and advising on purchasing and distribution, quality assurance and computer systems

Accountable to: Hospital CEO and have a “dotted line” reporting relationship to the RDO/the Senior Manager of that particular ISA, as appropriate.

Responsibilities of the Director of Hospital Pharmacy and Director of Medicines Management:

- To report to the RDO/the Senior Manager of the ISA for medicines management and the management of risks associated with medicines across the ISA including compliance with approved national standards for drug selection, use and audit.
- To be responsible for all capital and revenue budgets that relate to pharmacy and medicines management within agreed standardised nationally assigned drug budgets.
- To participate in the strategic development of the hospital.
- To manage the delivery of pharmaceutical services through pharmacy service managers including clinical services, dispensary services, medicines information, medication safety and aseptic compounding
- To facilitate the development of medicines information and clinical decision support systems throughout the ISA using software and IT where possible.
- To manage best practices in dispensary and pharmacy supply including automation.
- To prepare reports and analyses of information on medicines usage and cost within the hospital as part of a national reporting system and participate in the effective development and implementation of such a reporting system.
- To be responsible for managing the delivery of pharmacy services to the ISA’s including acute and non-acute Hospitals, PCCC Hospitals and other relevant medication management services.
- To have corporate responsibility for the provision of strategic, clinical and professional leadership on the safe and cost effective use of medicines and pharmacy services.
- To ensure that effective governance arrangements are in place for the delivery of a safe and effective hospital pharmacy service.
- To manage and co-ordinate an effective and efficient pharmacy service in accordance with hospital/ISA policy, legal requirements and the Code of Conduct of the Pharmaceutical Society of Ireland.
- To act as an advisor on all pharmacy service matters and medicines management of the ISA including matters relating to the implementation of protocols for the care and treatment of patients in ambulatory care, continuing care and the primary care environment (while appropriately recognising existing contract management processes and responsibilities).
- To ensure hospitals within the ISA would be able to avail of economies of scale (whether in the context of purchasing/procurement arrangements or the development of shared services at ISA, regional or national level).
- To implement in full national standards and programmes in accordance with HSE Directives ensuring the primacy of patient welfare and safety.
- To lead the development of medicines management across the hospital to ensure safe and cost effective use of medicines and to ensure that the ISA benefits from economies of scale where possible.
- To facilitate, support and work with Regional Pharmacy Leads as and when may be required.
- To provide advice on pharmaceutical matters and medicines management to senior managers and prescribers in particular concerning budgetary control, pharmacy practice, quality assurance, risk management and clinical governance.
- To act as adjunct Senior Lecturer/Professor in a School of Pharmacy or Health Sciences faculty, as and when required.
- To provide effective clinical leadership to the ISA’s pharmacy staff.
- To ensure that there are effective retention and recruitment strategies in place and that manpower planning is an integral part of service planning.

- To ensure that each hospital and satellite location delivers high quality, clinical services that meet quality standards.
- To ensure training and development of pharmacy staff and encourage research in accordance with service needs.
- To identify own training needs and keep a portfolio of practice. To maintain and update specialist and general pharmacy knowledge in core areas and be able to manage difficult and challenging problems.
- To undertake continuous professional development and develop professional knowledge and competencies by attendance at in-house/external study days, self-education and practice research.

Requirements of the post holder:

- **Qualifications:** Must be registered with the Pharmaceutical Society of Ireland and hold at least a Masters postgraduate qualification in pharmacy or management.
- **Experience:** A pharmacist with a minimum of seven years hospital pharmacy experience, at least five of these to be at a senior management level within hospital pharmacy or equivalent.
- **Essential:** Competency in planning and the development of hospital services, the maintenance of safe systems of work particularly in special environments are essential.
- **Skills and Knowledge:** Strategic management and business planning, financial management of pharmacy and medicines budgets and managing a team of senior professionals.

DEPUTY DIRECTOR OF HOSPITAL PHARMACY AND DIRECTOR OF MEDICINES MANAGEMENT/SUPERINTENDENT PHARMACIST

Each Director of Hospital Pharmacy and Director of Medicines Management will have a Deputy Director who will be responsible for the day to day operational management of pharmacy services in accordance with the directions of the Director of Hospital Pharmacy and Director of Medicines Management in the ISA. The number of Deputy Directors will be determined following a process of consultation with Regional Pharmacy Leads, Directors of Pharmacy and Medicines Management and health service management.

Accountable to: Director of Hospital Pharmacy and Director of Medicines Management

Responsibilities of the Deputy Director of Hospital Pharmacy and Director of Medicines Management:

- To deputise for the Director in their absence.
- To be operations manager for all designated pharmacy services.
- To support the implementation of new integrated care systems for those in the acute hospital system, ambulatory care, continuing care and the primary care environment which includes implementing the necessary protocols as agreed with the HSE.
- To act as liaison officer for pharmacy services in the community, as required.
- To have teaching responsibility in health science faculties as agreed by appointment to relevant faculties.
- To have authority, management and accountability within the ISA i.e. stated/agreed number of staff reporting.
- To provide clinical pharmacy training and act as a point of providing clinical support and knowledge to junior and intern pharmacists.
- To participate in the pharmacy appraisal system.
- To implement HSE policies, procedures and guidelines.

- To participate in weekend, evening, on-call and bank holiday rotas as required by the Director of Hospital Pharmacy and Director of Medicines Management.
- To have operational management responsibility for the delivery of pharmaceutical services through pharmacy service managers including clinical services, dispensary services, medicines information, medication safety and aseptic compounding.
- To manage best practices in dispensary and pharmacy supply including automation.
- To investigate critical incidents within the designated areas of responsibility and implement preventative and corrective solutions in order to improve patient care.
- To identify own training needs and keep a portfolio of practice. To maintain and update specialist and general pharmacy knowledge in core areas and be able to manage difficult and challenging problems.
- To undertake continuous professional development and develop professional knowledge and competencies by attendance at in-house/external study days, self-education and practice research.

Requirements of the post holder:

- **Qualifications:** Must be registered with the Pharmaceutical Society of Ireland and hold at least a Masters postgraduate qualification in pharmacy or management.
- **Experience:** At least five years hospital pharmacy experience or equivalent.
- **Essential:** Competency in planning and the development of hospital services, the maintenance of safe systems of work particularly in special environments are essential.
- **Skills and Knowledge:** Strategic management and business planning, financial management of pharmacy and medicines budgets and managing a team of senior professionals.

CLINICAL SPECIALIST PHARMACIST

The Clinical Specialist Pharmacist will provide professional pharmacy input into the new integrated models of care such as antimicrobial resistance, infectious diseases, cardiology, intensive care, transplantation, respiratory disease, care of the elderly in both secondary and primary care, critical care, inpatient and ambulatory care including cancer care, specialist advice on medication management and other areas as may be determined from time to time. The Clinical Specialist Pharmacist grade will deliver the highest level of pharmaceutical care and treatment using evidence based, protocol driven best practice in line with the standards specified for the integrated care pathways defined by the HSE. The number of these posts is to be agreed by the Regional Pharmacy Leads and Directors of Pharmacy and Medicines Management in consultation with HSE management and will be determined based on ISA needs and configurations.

The Clinical Specialist Pharmacist posts may provide direct management responsibility for the service they have been appointed to manage- Dispensary, Clinical, Medicines Information, Medication Safety, Aseptic Compounding. The number of Clinical Specialist Pharmacists will be determined in conjunction with the Regional Pharmacy Leads in consultation with HSE Management and will be determined based on ISA needs and configurations.

Accountable to: Director/Deputy Director of Hospital Pharmacy and Director/Deputy Director of Medicines Management

Responsibilities of the Clinical Specialist Pharmacist:

- Clinical Specialist Pharmacists to be responsible for the delivery and development of clinical pharmacy services aligned to quality integrated pathways within their area of practice. Pharmacy Service Managers to be responsible for the management and delivery of the

managed service- Dispensary, Clinical, Medicines Information, Medication Safety, Aseptic Compounding and Formulary Development.

- To have teaching responsibility in health science faculties, as and when required.
- To manage and ensure best standards in the aseptic manufacturing of cytotoxic and other drugs in the treatment of cancer.
- To manage and ensure best standards in the aseptic manufacturing of drugs used in both acute and non-acute hospital settings.
- To manage and ensure best standards in the drug storage, retrieval, procurement and distribution of all drugs in the hospital.
- To manage and ensure best standards in medication safety practices within the hospital.
- To manage and ensure best standards in the handling of medicines information queries and any and all ancillary activities regarding formulary development and drug usage within the hospital.
- To provide effective clinical leadership, working effectively with other clinical leaders.
- To provide specialist pharmacy support and advice to patients and staff.
- To provide advice on any specialist and general pharmaceutical issues and assist medicine information answer queries from patients and health care professionals.
- Clinical Specialist Pharmacists would have responsibility for defined clinical areas including cancer care, antimicrobial resistance, HIV/AIDS etc.
- To assist other pharmacists with the production/updating of local clinical guidelines relevant to the treatment and management of patients.
- To support and assist in the training of pharmacists in line with HSE requirements. To participate in teaching sessions for nurses and other health professions.
- To identify own training needs and keep a portfolio of practice. To maintain and update specialist and general pharmacy knowledge in core areas and be able manage difficult and ambiguous problems.
- To undertake continuous professional development and develop professional knowledge and competencies by attendance at in-house/external study days, self-education and practice research.

Requirements of the post holder:

- **Qualification:** Degree in Pharmacy and registered with the Pharmaceutical Society of Ireland. A postgraduate pharmacy qualification in pharmacy practice would be desirable.
- **Experience:** At least five years' experience working in a hospital pharmacy.
- **Essential:** Evidence of competencies through a portfolio of relevant experience, research and evaluation.

SENIOR PHARMACIST

Accountable to: Director/Deputy Director of Hospital Pharmacy and Director/Deputy Director of Medicines Management

Responsibilities of the Senior Pharmacist:

- To provide specialist pharmacy support and advice to patients and staff within the hospital.
- To ensure safe and cost-effective use of medicines.
- To be accountable and responsible for the operation of the pharmacy, including ensuring effective liaison with community pharmacy services.
- To be responsible for the production, distribution and supply of medicinal preparations and products.

- Under the direction of their line manager to support the implementation of new integrated care systems for those in the acute hospital system, ambulatory care, continuing care and the primary care environment which includes implementing the necessary protocols as agreed with the HSE.
- To facilitate the departmental discharge process by liaison with the pharmacy discharge coordinator and team members as appropriate and subject to the appointment of discharge teams.
- To help patients understand treatment aims and deal with any factors that may prevent these.
- To monitor patients for adverse events and ensure effective outcomes.
- To provide advice on any general pharmaceutical issues and assist medicine information answer queries from patients and health care professionals.
- To participate in the pharmacy appraisal system.
- To participate in weekend, evening, on-call and bank holiday rotas as required by the Director of Hospital Pharmacy and Director of Medicines Management.
- Under the direction of their line manager to develop clinical pharmacy service in line with local and national objectives and current knowledge of best practice.
- Under the direction of their line manager to investigate critical incidents within the designated areas of responsibility and implement preventative and corrective solutions in order to improve patient care.
- Under the direction of their line manager to audit and measure adherence to local, regional and national guidelines and provide feedback to medical staff when necessary.
- To identify own training needs and keep a portfolio of practice. To maintain and update specialist and general pharmacy knowledge in core areas and be able to manage difficult and challenging problems.
- To undertake continuous professional development and develop professional knowledge and competencies by attendance at in-house/external study days, self-education and practice research.

Requirements of the post holder:

- **Qualification:** Degree in Pharmacy and registered with the Pharmaceutical Society of Ireland. A postgraduate pharmacy qualification would be desirable.
- **Experience:** At least three years' experience working in a hospital pharmacy.

PHARMACIST

Accountable to: Senior Pharmacist, Deputy Director/Director of Hospital Pharmacy and Deputy Director/Director of Medicines Management.

Responsibilities of the Pharmacist:

- To practice at all times in accordance with the Code of Conduct of the Pharmaceutical Society of Ireland.
- These posts would be rotational within regional or ISA structures so that staff would be in a position to gain experience in all areas of pharmacy practice while also supporting service needs across regional or ISA structures.
- To support the implementation of new integrated care systems for those in the acute hospital system, ambulatory care, continuing care and the primary care environment which includes implementing the necessary protocols as agreed with the HSE.
- To participate in consultant clinical ward rounds and multidisciplinary meetings. To make appropriate referrals when necessary to other health care professionals involved in patient care and ensure appropriate co-ordination of the pharmaceutical services.

- To assist other pharmacists with the production/updating of local clinical guidelines relevant to the treatment and management of patients.
- To audit, and measure adherence to local, regional and national guidelines and provide feedback to medical staff when necessary.
- To participate in the pharmacy appraisal system.
- To identify own training needs and keep a portfolio of practice. To maintain and update specialist and general pharmacy knowledge in core areas and be able to manage difficult and challenging problems.
- To undertake continuous professional development and develop professional knowledge and competencies by attendance at in-house/external study days, self-education and practice research and undertake CPD.

Requirements of the post holder:

- **Qualification:** Degree in Pharmacy and registered with the Pharmaceutical Society of Ireland. A postgraduate pharmacy qualification would be desirable.
- **Experience:** At least one year experience working in a hospital pharmacy

GRADUATE ENTRY GRADE

Responsibilities of the graduate entry grade:

- To assist other pharmacists with the production/updating of local clinical guidelines relevant to the treatment and management of patients.
- To practice at all times in accordance with the Code of Conduct of the Pharmaceutical Society of Ireland.
- To participate in the pharmacy appraisal system.
- To identify own training needs and keep a portfolio of practice. To maintain and update specialist and general pharmacy knowledge in core areas and be able manage difficult and ambiguous problems
- To undertake continuous professional development and develop professional knowledge and competencies by attendance at in-house/external study days, self-education and practice research and undertake CPD.

Requirements of the post holder:

- Graduate pharmacist position.
- Fixed one year contract.

INTERN PHARMACIST GRADE

A pharmacy intern as part of their MPharm qualification can do a 6 or 12 month placement in a hospital pharmacy. During this time the pharmacy intern will remain under the direct supervision of a tutor pharmacist and will in addition be required throughout the placement to complete an academic programme which will be delivered principally on-line. The taught programme is designed to assist the intern improve their performance in the training establishment.

The Report on the Review of Hospital Pharmacy was agreed in November 2011. It was acknowledged by both management and staff sides that the appendices on career structure and job descriptions/specifications needed refinement. A bilateral group was established, advised by an occupational psychologist, to complete this exercise which was commenced in April 2012 and finalised in November 2012.

Regional Pharmacy Lead

Job Title, Grade, Grade Code	Regional Pharmacy Lead (Grade Code ????)
Competition Reference	<i>To be completed by NRS</i>
Closing Date	<i>To be completed by NRS</i>
Proposed Interview date(s)	<i>NRS will Insert proposed date of interviews</i>
Taking up Appointment	The start date will be indicted at job offer stage.....
Location of Post	The Regional Lead will fulfil the role from the site at which they fulfil their role as Director of Hospital Pharmacy & Director of Medicines Management.
Organisational Area	<i>Which Health Service Executive Area? e.g. HSE South</i>
Details of Service	<p>One Regional Pharmacy Lead to be selected from the Region's Directors of Hospital Pharmacy to each of the four HSE regions, by majority agreement of the Region's Directors of Hospital Pharmacy and with the nominee's agreement.</p> <p>In order to ensure equity and balance within regions the post holder position should be rotated within a given region every 2-3 years¹.</p> <p>The post holder will fulfil the duties and responsibilities associated with the role in addition to their role as Director of Hospital Pharmacy and Director of Medicine Management.</p>
Reporting Arrangements	Regional Director of Operations (RDO) (or their delegate) (in addition to maintaining current reporting relationships as Director of Pharmacy).
Key Working Relationships	Director of Pharmacy in each ISA, Regional Director of Operations, Corporate Pharmaceutical Unit, Department of Health.
Purpose of the Post	<ul style="list-style-type: none"> • Provide strategic leadership in promoting quality, accessible and economic medicines management systems in line with national developments and promote a consistency of strategy and standards across the State in HSE managed pharmacy services • Chair and co-ordinate a Regional Pharmacy working group of Directors of Hospital Pharmacy • Attend management regional team meetings as required and be a member of the National Steering Group of Regional Pharmacy Leads in conjunction with representative from the HSE • Responsible for liaison with the Corporate Pharmaceutical Unit / Department of Health regarding cost implications for the primary care sector from hospital prescribing and dispensing patterns

¹ The appointed individuals would be selected from amongst the 17 Directors of Hospital Pharmacy and Directors of Medicine Management. Subsequent to expressions of interest being sought these individuals will be appointed through an interview and selection process as may be agreed by the HSE and IMPACT/HPAI. The HSE and IMPACT/HPAI will also have to agree the needs of the level of clinical and administrative support following discussion and agreement at regional level.

<p>Principal Duties and Responsibilities</p>	<p>Professional / Clinical Responsibilities</p> <ul style="list-style-type: none"> • To promote the development of medicine management systems including pharmacoconomics, rational use, e-prescribing, robotics, etc. • To provide strong and effective leadership in the implementation of medicines policy across the region. • To act as spokesperson for the Organisation as required • Demonstrate pro-active commitment to all communications with internal and external stakeholders <p>Managerial Responsibilities</p> <ul style="list-style-type: none"> • To advise where appropriate on resource allocation, priority setting, service planning and evaluation in respect of national strategic developments. • To advise and support the other Directors of Hospital Pharmacy & Medication Management in the Region on the development of business cases for national strategic developments. • Monitor and review trends in medication management within the Region. • Chair the Regional Pharmacy working group of Directors of Hospital Pharmacy on procurement initiatives. • To facilitate consistency in processes and procedures within the Region, through the Regional Pharmacy working group of Directors of Hospital Pharmacy <p>Education and Training</p> <ul style="list-style-type: none"> • To advise on training requirements within the Region. • To co-ordinate and facilitate the delivery of identified training needs in conjunction with the Directors of Hospital Pharmacy in the Region. • To advise on the efficient use of training resources within the Region <p>Clinical Governance, Quality Assurance, Risk, Health & Safety</p> <ul style="list-style-type: none"> • To facilitate information sharing and co-operation on matters of clinical governance, Health & Safety and risk management with Directors of Hospital Pharmacy across the Region and with other Regional Leads. • To facilitate national consistency in relation to standard, procedures and guidelines in relation to clinical governance, quality assurance, risk and Health & Safety. <p><i>The above Job Description is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the post which may be assigned to him/her from time to time and to contribute to the development of the post while in office.</i></p>
<p>Eligibility Criteria</p> <p>Qualifications and/ or experience</p>	<p>Qualifications and experience will be the same as those for the Director of Hospital Pharmacy & Director of Medicines Management as the Regional Lead post is a rotation position for 2-3 years. The whole time, permanent and pensionable position of the Regional Lead is that of Director of Hospital Pharmacy & Director of Medicines Management.</p> <p>Health A candidate for and any person holding the office must be fully competent and capable of undertaking the duties attached to the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.</p> <p>Character Each candidate for and any person holding the office must be of good character</p> <p>Age Age restrictions shall only apply to a candidate where he/she is not classified as a new entrant (within the meaning of the Public Service Superannuation Act, 2004). A candidate who is not classified as a new entrant must be under 65 years of age.</p>

Post Specific Requirements, additional qualifications and/or experience required	<p>Qualifications will be the same as those for the Director of Hospital Pharmacy & Director of Medicines Management. See comment above under qualification requirements.</p>
Skills, competencies and/or knowledge	<ul style="list-style-type: none"> Undertake continuing professional development in line with the Pharmacy Act 2007
Other requirements specific to the post	<p><i>Please outline the specific criteria that are specific to the post, e.g. access to transport as post will involve frequent travel</i></p>
Competition Specific Selection Process Shortlisting / Interview	<p><i>Insert here essential competition specific requirements e.g. competency based application form, keyboard test, psychometric testing, completion of a presentation at the interview, job simulation exercise etc. These can be discussed and agreed with NRS</i></p> <p>e.g.</p> <p>Short listing may be carried out on the basis of information supplied in your application form. The criteria for short listing are based on the requirements of the post as outlined in the eligibility criteria and skills, competencies and/or knowledge section of this job specification. Therefore it is very important that you think about your experience in light of those requirements.</p> <p><u>Failure to include information regarding these requirements may result in you not being called forward to the next stage of the selection process.</u></p> <p>Those successful at the shortlisting stage of this process (where applied) will be called forward to interview.</p>
Code of Practice	<p>The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA). The Code of Practice sets out how the core principles of probity, merit, equity and fairness might be applied on a principle basis. The Codes also specifies the responsibilities placed on candidates, feedback facilities for candidates on matters relating to their application, when requested, and outlines procedures in relation to requests for a review of the recruitment and selection process, and review in relation to allegations of a breach of the Code of Practice. Additional information on the HSE's review process is available in the document posted with each vacancy entitled "Code Of Practice, Information For Candidates".</p> <p>Codes of Practice are published by the CPSA and are available on www.hse.ie in the document posted with each vacancy entitled "Code of Practice, Information For Candidates" or on www.cpsa-online.ie.</p>
<p>The reform programme outlined for the Health Services may impact on this role and as structures change the job description may be reviewed.</p> <p>This job description is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned.</p>	



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

**HEALTH SERVICES EXECUTIVE
Terms and Conditions of Employment
Title of Post INSERT**

<p>Tenure</p>	<p>The post holder will be selected from the Region's Directors of Hospital Pharmacy to each of the four HSE regions, by majority agreement of the Region's Directors of Hospital Pharmacy and with the nominee's agreement.</p> <p>The post holder's position will be for 2-3 years.</p> <p>The post holder's primary position will be as Director of Hospital Pharmacy & Director of Medicines Management and it is this primary position that is whole-time, permanent and pensionable.</p> <p>Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointment) Act 2004.</p>
<p>Remuneration</p>	<p>The Salary scale for the post is:</p>
<p>Working Week</p>	<p>The standard working week applying to the post is:</p> <p>HSE Circular 003-2009 "Matching Working Patterns to Service Needs (Extended Working Day / Week Arrangements); Framework for Implementation of Clause 30.4 of Towards 2016" applies. Under the terms of this circular, all new entrants and staff appointed to promotional posts from Dec 16th 2008 will be required to work agreed roster / on call arrangements as advised by their line manager. Contracted hours of work are liable to change between the hours of 8am-8pm over seven days to meet the requirements for extended day services in accordance with the terms of the Framework Agreement (Implementation of Clause 30.4 of Towards 2016).</p>
<p>Annual Leave</p>	<p>The annual leave associated with the post is:</p>
<p>Superannuation</p>	<p>All pensionable staff become members of the pension scheme.</p> <p>Applicants for posts in the Mental Health service are advised that Section 65 of the Mental Treatment Act, 1945, <u>does not</u> apply to new entrants to the Mental Health Services as defined by the Public Service Superannuation(Miscellaneous Provisions) Act, 2004 (Section 12 of that Act) New entrants</p>
<p>Probation</p>	<p>Every appointment of a person who is not already a permanent officer of the Health Service Executive or of a Local Authority shall be subject to a probationary period of 12 months.</p>
<p>Protection of Persons Reporting Child Abuse Act 1998</p>	<p>This post is one of those designated in accordance with Section 2 of the Protection of Persons Reporting Child Abuse Act, 1998. You will remain a designated officer for the duration of your appointment in this post or for the duration of your appointment to such other post as</p>

	<p>is included in the categories specified in the Ministerial Direction. Such officers will, on receiving a report of child abuse, formally notify the Senior Social Worker in the community care area in which the child is living.</p>
<p>Ethics in Public Office 1995 and 2001</p> <p>Positions remunerated at or above the minimum point of the Grade VIII salary scale (€ 64,812 as at 01.01.10)</p>	<p>Positions remunerated at or above the minimum point of the Grade VIII salary scale (€ 64,812 as at 01.01.10) are designated positions under Section 18 of the Ethics in Public Office Act 1995. Any person appointed to a designated position must comply with the requirements of the Ethics in Public Office Acts 1995 and 2001 as outlined below;</p> <p>A) In accordance with Section 18 of the Ethics in Public Office Act 1995, a person holding such a post is required to prepare and furnish an annual statement of any interests which could materially influence the performance of the official functions of the post. This annual statement of interest should be submitted to the Chief Executive Officer not later than 31st January in the following year.</p> <p>B) In addition to the annual statement, a person holding such a post is required, whenever they are performing a function as an employee of the HSE and have actual knowledge, or a connected person, has a material interest in a matter to which the function relates, provide at the time a statement of the facts of that interest. A person holding such a post should provide such statement to the Chief Executive Officer. The function in question cannot be performed unless there are compelling reasons to do so and, if this is the case, those compelling reasons must be stated in writing and must be provided to the Chief Executive Officer.</p> <p>C) A person holding such a post is required under the Ethics in Public Office Acts 1995 and 2001 to act in accordance with any guidelines or advice published or given by the Standards in Public Office Commission. Guidelines for public servants on compliance with the provisions of the Ethics in Public Office Acts 1995 and 2001 are available on the Standards Commission's website http://www.sipo.gov.ie/</p>

Director of Hospital Pharmacy and Medicines Management

Details of Service	<p>There will be one Director of Hospital Pharmacy and Medicines Management for each of the 17 ISA's.</p> <p>The Director will have key responsibilities in delivering the medicines management component of clinical governance within the ISA, working with senior colleagues in other disciplines.</p> <p>The Director will be located in the ISA's main hospital and will retain overall responsibility for the management of pharmacy services to that hospital.</p>
Reporting Arrangements	Reporting to the ISA Manager
Key Working Relationships	ISA based, Senior Hospital Management, senior colleagues including the Regional Pharmacy Lead, Clinical Directors and senior Allied Health Professionals and Nursing.
Purpose of the Post	<ul style="list-style-type: none"> • The Director of Hospital Pharmacy and Medicines Management will lead and have overall governance responsibility for the pharmacy services in the ISA, relating goals and actions to the strategic aims of the ISA • The Director of Hospital Pharmacy and Medicines Management will actively participate in the Regional Pharmacy Forum and will be available for nomination as Chair of the Forum, as Regional Pharmacy Lead on a rotational basis • The Director of Hospital Pharmacy and Medicines Management, using the HSE governance framework, will construct and be responsible for agreeing a medicines management policy for the ISA with its key managers. The Director will ensure consistency of this policy with national policy. • The Director will help shape and contribute to the Clinical Governance agenda at the ISA level • The Director of Hospital Pharmacy and Medicines Management, in liaison with Clinical Directors, senior pharmacy, nursing, medical and financial colleagues, will contribute to the work of ISA Drugs and Therapeutics committees, ensuring governance of the introduction and safe and economic use of new medicines, within local and nationally assigned medicines budgets. <p>This will include audit and monitoring of new medicines and related technologies and monitoring of prescribing against evidence based and licensed indications.</p> <ul style="list-style-type: none"> • The Director will be recognised as a key leader within ISA clinical management positions in bringing hospital pharmacy services in each ISA hospital to a high standard as evaluated against best international practice,

	<p>ensuring innovation produces demonstrable improvements in service delivery</p> <ul style="list-style-type: none"> • The Director will be required to strengthen professional leadership through effective communication, motivation and by challenging barriers to change, convincing others in sharing vision at the highest level
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Professional / Clinical Responsibilities

Director of Hospital Pharmacy and Medicines Management will:

- have primacy in the governance of medicines management in each ISA
- lead the development of medicines management across the ISA to ensure safe and cost effective use of medicines and to seek benefits of economies of scale
- lead on the provision and development of clinical (near patient), technical, medicines information and clinical decision support systems and supply services to the ISA's hospitals, acute and PCCC.
- promote across the ISA a Clinical Pharmacy value stream from admission to discharge, including the extension of hospital pharmacist expertise in the provision of home care and non acute hospital care, to minimise the burden on acute hospital beds.
- lead on the implementation of ISA and national medicines management policies
- provide expert advice on all pharmacy service matters and medicines management of the ISA, including implementation Clinical Care Programmes, and protocols for the care and treatment of patients in ambulatory care, continuing care and the primary care environment
- participate on the ISA's Drugs and Therapeutics Committees and related committees
- develop and lead on an ISA strategy for the use of technology in medicines management and clinical decision support, to include electronic prescribing, applications ('aps') for patient care portable devices, pharmacy inventory and financial management software and the use of robotics.

Managerial Responsibilities

Director of Hospital Pharmacy and Medicines Management will:

- continually seek opportunities to strengthen leadership at the highest level
- actively participate in creating and influencing the strategic development of the ISA
- manage an effective, efficient and economic ISA pharmacy service in accordance with local ISA needs, pharmacy and medicines legislation Medicinal Products, Prescription and Control of Supply and Misuse of Drugs Regulations and other legal requirements and the Code of Conduct of the Pharmaceutical Society of Ireland
- lead on pharmacy service planning and monitoring

- drive change where required as identified
- ensure that all capital and revenue budgets that relate to pharmacy and medicines management are managed within agreed assigned medicines budgets
- provide analysis of medicines usage data and cost within the ISA as part of a national reporting system
- participate in the effective development and implementation of medicines usage national reporting system
- facilitate, support and work with Regional Pharmacy Leads as and when required
- ensure that there are effective retention and recruitment strategies in place and that manpower planning is an integral part of service planning
- carry out and participate in the pharmacy appraisal system and individual performance review
- act as spokesperson on pharmacy and medicines management for the organisation as required

Education and Training

Director of Hospital Pharmacy and Medicines Management will:

- establish the training and development needs of ISA pharmacy staff
- ascertain and organise resources for identified training
- encourage research in accordance with service needs
- encourage the publication of research in appropriate formats/media
- ensure the participation of staff in mandatory training programmes
- act as adjunct Senior Lecturer / Professor in a School of Pharmacy or Health Sciences faculty, as agreed by appointment to relevant faculties
- identify own training needs and keep a portfolio of practice - maintain and update specialist and general pharmacy knowledge in core areas

Clinical Governance, Quality Assurance, Risk, Health & Safety

Director of Hospital Pharmacy and Medicines Management will:

- contribute to the strategic clinical governance agenda, with special emphasis on medicines management, ensuring that there is an assured system for the synthesis of relevant medicines policies within the ISA, their implementation, monitoring and on-going audit and governance arrangements for the delivery of a safe and effective hospital pharmacy service
- report to the ISA Manager on medicines management issues and the management of risks associated with medicines across the ISA, including compliance with approved national standards for medicines selection, use and audit
- be cognisant of HIQA Standards as they apply to the role, for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards

- promote a safe working environment in accordance with Health and Safety legislation
- be aware of and implement agreed policies, procedures and safe professional practice by adhering to relevant legislation, regulations and standards
- ensure the safe use of medicines by evaluating and managing risks associated with the use of medicines and by participating in the hospital's Medicines Safety reporting process
- actively participate in other risk management issues, identify risks, taking or advising on appropriate corrective action

SKILLS & ABILITIES QUESTIONNAIRE

ROLE / GRADE LEVEL: Director of Hospital Pharmacy & Medicines Management

IMPORTANT: Please specify above which role / grade level the information you provide refers (i.e. Director, Deputy Director, Regional Lead, Clinical Specialist Pharmacist, Pharmacy Services Manager, Senior Pharmacist, Pharmacist, Graduate Entry Grade, Intern Pharmacist). Please complete a separate questionnaire for each role / grade level.

NAME(S) AND GRADE TITLE(S): _____

Please complete your name and grade title / the names and grade titles of those contributing to the completion of this questionnaire.

Objectives & Key Activities

Please take a few minutes to think about the role as defined in the Review Report / draft job spec. List below ~~any additional objectives~~ most important overall objectives of the role as you see them. Also list the most important tasks or activities of the role, now and over the next 3-5 years.

Please complete the box below.

List the five most important overall objectives of the role (i.e. what the role is aiming to achieve)	List the five most important tasks or activities of the job (i.e. what a person in the role actually does / will need to do)
1. The Director of Pharmacy is a key leadership and clinical manager position in each ISA and is responsible for delivering high quality hospital pharmacy services.	1. To manage the ISA pharmacy service within a legal, professional and financial framework.
2. To influence, lead and implement change at a strategic ISA level.	2. To communicate and negotiate with other key leaders of the ISA to attain strategic goals.
3. To direct and lead on all capital and operational budgetary controls that relate to pharmacy and medicines management in the ISA.	3. To critically analyse data on medicine usage and costs within the ISA, to ensure cost saving opportunities are realised in procurement and drug utilisation strategies.
4. To lead on the governance of medicines management across the ISA to ensure safe and cost effective use of medicines.	4. Drive the development and implementation of medicine management policies in the ISA.
5. To ensure training and development of pharmacy staff while encouraging and supporting education and research in accordance with service needs.	5. To contribute to the development and implementation of national pharmacy & medication management agendas via the Regional Pharmacy Forum.

KEY SKILLS

The main objective of this questionnaire is to explore the skills/qualities that you consider make a difference between effective and less effective performance in the role. In the box below, jot down some of the skills, qualities or characteristics that you consider important for effective performance in the role. In thinking about the key skills involved you may find it useful to refer to the objectives and activities listed earlier.

Please list at least six and no more than eight of the most important skills, qualities or characteristics required for the role.

1. Leadership

5. Research and evaluation supporting professional development

2. Management

6. Team building & Working Relationships

3. Communication & Negotiation

7. Change Management

4. Expert in the practice of hospital pharmacy

8. Analysis of External Factors

Deputy Director of Hospital Pharmacy and Medicines Management

<p>Details of Service</p>	<p>There will be at least one Deputy Director of Hospital Pharmacy and Medicines Management for each of the ISA's</p> <p>The Deputy Director(s) will have key responsibilities in supporting the Director in delivering the medicines management component of clinical governance within the ISA.</p> <p>The Deputy Director(s) will be required to be the portfolio manager(s) for a clearly defined portfolio of the ISA pharmacy service such as Operations or Clinical as determined by the Director. <i>Operations are Pharmacy based services such as Main Pharmacy (Dispensary) and Aseptic Compounding Unit. Clinical in this context includes 'near patient' ward based Clinical Pharmacy and its specialisations.</i></p> <p>The Deputy Director(s) may be located at the ISA's main hospital (as portfolio manager for part or whole of the pharmacy service to that hospital) and or other hospital's within the ISA (e.g. as portfolio manager for the whole of the pharmacy service to that hospital), according to need as determined by the Director.</p>
<p>Reporting Arrangements</p>	<p>Director of Hospital Pharmacy and Medicines Management</p>
<p>Key Working Relationships</p>	<p>ISA based, Senior Hospital Management, senior colleagues including the Regional Pharmacy Lead, Clinical Directors and senior Allied Health Professionals and Nursing.</p>
<p>Purpose of the Post</p>	<ul style="list-style-type: none"> • To support the Director of Hospital Pharmacy and Medicines Management in the governance of medicines management within an ISA • To contribute to the Clinical Governance agenda within their base or designated hospitals • To be the operations manager for designated ISA pharmacy services, near patient' ward based clinical pharmacy and its specialisations or operational, or both, as determined by the Director • The Deputy Director will be required to strengthen professional leadership through effective communication, motivation and by challenging barriers to change, convincing others in sharing vision • To deputise for the Director in their short term absence

Professional / Clinical Responsibilities

The Deputy Director of Hospital Pharmacy & Medicines Management will:

- under the direction of the Director of Hospital Pharmacy and Medicines Management, work in collaboration with appropriate stakeholders including Clinical Specialist Pharmacists and Pharmacy Service Managers, towards the development, implementation and monitoring of medicines management policies

- work with clinical, scientific and nursing staff on the maintenance and development of new methods of evidence based pharmacotherapy treatment
- support the Clinical Care Programmes as appropriate
- manage the audit, monitoring, analysis and reporting on all aspects of medicine usage within the service, including the provision of feedback to prescribers and managers and involvement in the coordination of changes in practice required as a result of the risk management process
- provide advice and direction, as required, on the proper and economic use of medicines including participation in schemes for the dissemination of information in relation to medicines and their usage
- participate on the hospital's Drugs and Therapeutics Committee, Infection Control Committee and other relevant committees as required by the Director of Hospital Pharmacy and Medicines Management
- ensure the safe use of medicines by evaluating and managing risks associated with the use of medicines and by participating in the hospital's Medicines Safety reporting process

Managerial Responsibilities

The Deputy Director of Hospital Pharmacy & Medicines Management will:

- deputise for the Director in their temporary absence
- actively support the professional leadership role of the Director of Hospital Pharmacy and Medicines Management at the highest level
- manage wholly or partly a designated pharmacy service(s) including clinical services, main pharmacy or aseptic services dependant upon local needs as determined by the Director of Hospital Pharmacy and Medicines Management and through designated service managers
- manage resources effectively and efficiently with due cognisance of local budgetary requirements
- ensure that the purchase, storage and supply of all items is operated on the most economical lines, oversee that the maintenance of records for purchasing, quality control, compounding and dispensing are to the standards required
- support the implementation of new integrated care systems for those in the acute hospital system, ambulatory care, continuing care and the primary care environment within their designated areas of responsibility
- act as a spokesperson for the organisation as required
- act as liaison officer for pharmacy services in the community, as required
- participate in the pharmacy appraisal system and in individual performance review

Education and Training

The Deputy Director of Hospital Pharmacy Medicines Management will:

- have teaching responsibility in health science faculties as agreed by appointment to relevant faculties
- provide training and act as a point of providing support and knowledge to pharmacy staff, based on their designated managed services, including clinical, main pharmacy and aseptic services
- participate in teaching and training, including in-service training of other staff as agreed e.g. medical, nursing
- identify own training needs and keep a portfolio of practice - maintain and update specialist and general pharmacy knowledge in core areas
- undertake personal continuous professional development and develop professional knowledge and competencies by attendance at in-house / external study days, self-education and practice research

- participate in mandatory training programmes

Clinical Governance, Quality Assurance, Risk, Health & Safety

The Deputy Director of Hospital Pharmacy & Deputy Director of Medicines Management will:

- contribute to the local clinical governance agenda, with special emphasis on medicines management , contributing to an assured system for the synthesis of relevant medicines policies, their implementation, monitoring and on-going audit and governance arrangements for the delivery of a safe and effective hospital pharmacy service
- investigate critical incidents within the designated areas of responsibility and implement preventative and corrective solutions in order to improve patient care
- ensure that correct procedures are adhered to in relation to accidents and investigations and that proper reporting arrangements are in place
- promote a safe working environment in accordance with Health and Safety legislation
- be aware of and implement agreed policies, procedures and safe professional practice by adhering to relevant legislation, regulations and standards
- be cognisant of HIQA Standards as they apply to the role, for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards.
- actively participate in risk management issues, identify risks and take or advise on for appropriate corrective action
- report any adverse incidents in accordance with organisational guidelines

SKILLS & ABILITIES QUESTIONNAIRE

ROLE / GRADE LEVEL: Deputy Director of Hospital Pharmacy and Medicines Management

IMPORTANT: Please specify above which role / grade level the information you provide refers (i.e. Director, Deputy Director, Regional Lead, Clinical Specialist Pharmacist, Pharmacy Services Manager, Senior Pharmacist, Pharmacist, Graduate Entry Grade, Intern Pharmacist). Please complete a separate questionnaire for each role / grade level.

NAME(S) AND GRADE TITLE(S): _____

Please complete your name and grade title / the names and grade titles of those contributing to the completion of this questionnaire.

Objectives & Key Activities

Please take a few minutes to think about the role as defined in the Review Report / draft job spec. List below ~~any additional~~ most important objectives of the role as you see them. Also list the most important tasks or activities of the role, now and over the next 3-5 years.

Please complete the box below.

List the five most important overall objectives of the role (i.e. what the role is aiming to achieve)	List the five most important tasks or activities of the job (i.e. what a person in the role actually does / will need to do)
1. The Deputy Director will deputise for the Director of Pharmacy in their short term absence.	1. To manage the assigned ISA pharmacy service within a legal, professional and financial framework.

2. To have operational management responsibility for the delivery of pharmaceutical services through pharmacy service managers designated to them by the ISA Director of Pharmacy	2. To communicate and negotiate with other key leaders of the assigned ISA services to attain strategic goals determined by the Director of Pharmacy.
3. To take responsibility for co-ordinating medicines management in designated service portfolios of the ISA e.g. pharmacy services to mental health or off site care of the elderly facilities or pharmacy aseptic compounding and clinical services to oncology etc.	3. To critically analyse data on medicine usage and costs within their assigned ISA service area, to ensure cost saving opportunities are realised.
4. To oversee the economic use of resources in their assigned pharmacy service portfolios.	4. Drive the development and implementation of medicine management policies in their assigned ISA.
5. To support the Director in the quality assurance, risk management and health & safety of pharmacy services in the ISA.	5. To co-ordinate the maintenance, development and implementation of pharmacy IT systems
6. To take responsibility in designated projects as assigned by the Director e.g. capital investment in automation, electronic prescribing.	6. Act as a point of providing clinical support and knowledge to Pharmacy staff.

KEY SKILLS

The main objective of this questionnaire is to explore the skills/qualities that you consider make a difference between effective and less effective performance in the role. In the box below, jot down some of the skills, qualities or characteristics that you consider important for effective performance in the role. In thinking about the key skills involved you may find it useful to refer to the objectives and activities listed earlier. **Please list at least six and no more than eight of the most important skills, qualities or characteristics required for the role.**

5. Leadership

5. Research and evaluation

6. Management

6. Team building & working relationships

7. Communication & Negotiation

7. Change management

4. Expert in the practice of hospital pharmacy

8. Supporting professional development

Pharmacy Services Manager

Details of Service	<p>The Pharmacy Services Manager(s) will have key responsibilities in supporting the Deputy Director(s) by managing the day to day operational elements of a clearly defined portfolio of hospital based pharmacy services, such as the main pharmacy (dispensary), 'near patient' ward based clinical pharmacy and its specialisations, medication safety and aseptic compounding.</p> <p>The Pharmacy Services Manager(s) will be located at the ISA's hospitals according to need as determined by the Director.</p>
Reporting Arrangements	Deputy Director of Hospital Pharmacy and Medicines Management.
Key Working Relationships	Other ISA pharmacy staff and hospital based management, medical, nursing , Allied Health Care and support services staff
Purpose of the Post	<ul style="list-style-type: none"> • To support the Deputy Director(s) of Hospital Pharmacy and Medicines Management in the governance of medicines management within an ISA • To be the manager for a designated hospital based pharmacy service, clinical or operational, delivering a high quality and safe service within a framework of QA, audit and risk management • To optimise the potential of pharmacy resources skills and knowledge through research, evaluation and service development (in their designated service area) • To demonstrate professional leadership within their designated service area through effective communication with service stakeholders, motivation of staff and challenging barriers to change, convincing others in sharing vision

Professional / Clinical Responsibilities

The Pharmacy Services Manager will:

- supervise other staff, including pharmacists and technical staff, ensuring regulations (Medicinal Products, Prescription and Control of Supply) and (Misuse of Drugs Regulations), are met when supplying or dispensing medicines as applicable within their scope of portfolio responsibility
- contribute to the development of evidence based clinical guidelines relevant to the treatment and management of patients with pharmacotherapy within their scope of portfolio responsibility

- act as a professional resource within their area of specialisation for advising other ISA pharmacists and clinicians
- undertake audit and practice research within their scope of portfolio responsibility
- support the Clinical Care Programmes as appropriate
- ensure the safe use of medicines by evaluating and managing risks associated with the use of medicines and by participating in the hospital's Medicines Safety reporting process

Managerial Responsibilities

The Pharmacy Services Manager will:

- provide effective leadership to staff assigned to their portfolio of practice, and to the organisation by working with other healthcare managers
- manage other staff assigned to that service area, as applicable, including clinical specialist pharmacists, senior pharmacists and pharmacists, and senior pharmacy technicians.
- manage non-staff resources, within their scope of portfolio responsibility ensuring efficiency and value for money
- optimise the potential of pharmacy resources, skills and knowledge through research, evaluation and service development within their scope of portfolio responsibility such as aseptic services, main pharmacy (dispensary) or near patient (clinical pharmacy)
- manage and ensure best practice standards within their scope of portfolio responsibility
- manage the development, implementation and monitoring of SOPs, guidelines and protocols for the operational aspects within their scope of portfolio responsibility
- provide financial and medicines usage data to as required by the Director of Hospital Pharmacy and Management
- contribute to the service planning process
- implement and manage identified changes
- maintain records meeting local and statutory requirements
- participate in the pharmacy appraisal system and individual performance review

Education and Training

The Pharmacy Services Manager will:

- participate in mandatory training programmes
- undertake continuous professional development and develop professional knowledge and competencies by attendance at in-house/external study days, self-education and practice research

- support and assist in the training of pharmacists
- participate in teaching sessions for other health professions as required by the Director of Hospital Pharmacy and Management
- identify own training needs and keep a portfolio of practice - maintain and update specialist and general pharmacy knowledge in core areas
- have teaching responsibility in health science faculties, as required by the Director of Hospital Pharmacy and Medicines Management,

Clinical Governance, Quality Assurance, Risk, Health & Safety

The Pharmacy Services Manager will:

- contribute to the local clinical governance agenda, with special emphasis on medicines management , contributing to an assured system for the synthesis of relevant medicines policies, their implementation, monitoring and on-going audit and governance arrangements for the delivery of a safe and effective hospital pharmacy service
- investigate critical incidents within the designated areas of responsibility and implement preventative and corrective solutions in order to improve patient care
- ensure that correct procedures are adhered to in relation to accidents and investigations and that proper reporting arrangements are in place
- promote a safe working environment in accordance with Health and Safety legislation
- be aware of and implement agreed policies, procedures and safe professional practice by adhering to relevant legislation, regulations and standards
- be cognisant of HIQA Standards as they apply to the role, for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards.
- actively participate in risk management issues, identify risks and take or advise on for appropriate corrective action
- report any adverse incidents in accordance with organisational guidelines

SKILLS & ABILITIES QUESTIONNAIRE

ROLE / GRADE LEVEL: Service Manager (Clinical Pharmacy)_____

IMPORTANT: Please specify above which role / grade level the information you provide refers (i.e. Director, Deputy Director, Regional Lead, Clinical Specialist Pharmacist, Pharmacy Services Manager, Senior Pharmacist, Pharmacist, Graduate Entry Grade, Intern Pharmacist). Please complete a separate questionnaire for each role / grade level.

NAME(S) AND GRADE TITLE(S): _____

Please complete your name and grade title / the names and grade titles of those contributing to the completion of this questionnaire.

Objectives & Key Activities

Please take a few minutes to think about the role as defined in the Review Report / draft job spec. List below ~~any additional~~ most important objectives of the role as you see them. Also list the most important tasks or activities of the role, now and over the next 3-5 years.

Please complete the box below.

List the five most important overall objectives of the role (i.e. what the role is aiming to achieve)	List the five most important tasks or activities of the job (i.e. what a person in the role actually does / will need to do)
1. Economic use of resources - staff and time	1. Workforce planning of clinical pharmacists
2. Management of the service as expert for the ISA	2. Ensuring mandatory training and perform skill gap analysis.
3. Service development – implements new projects and service developments in the ISA in conjunction with the Deputy Director / Director.	3. Ensuring clinical pharmacy services are delivered in line with policies procedures and guidelines governed by the Director.
4. Responsible for the training, validation, competency assessment and development of staff within their specialist area in the ISA.	4. Ensuring medicine management policies of the ISA are followed.
5. Promote quality assurance, audit and risk management of their service area.	5. Advancing new technologies for safe prescribing
6. Brings identifiable/ measurable patient benefit	6. Synthesis and maintenance of policies, procedures and guidelines of relevance to the service.

KEY SKILLS

The main objective of this questionnaire is to explore the skills/qualities that you consider make a difference between effective and less effective performance in the role. In the box below, jot down some of the skills, qualities or characteristics that you consider important for effective performance in the role. In thinking about the key skills involved you may find it useful to refer to the objectives and activities listed earlier.

Please list at least six and no more than eight of the most important skills, qualities or characteristics required for the role.

8. Leadership

5. Research and Evaluation

9. Management (budget & staff)

6. Team building

10. Communication / Working Relationships

7. Change management

11. Expert professional practice

8. Supporting personal development

SKILLS & ABILITIES QUESTIONNAIRE

ROLE / GRADE LEVEL: Service Manager (Aseptic Compounding)

IMPORTANT: Please specify above which role / grade level the information you provide refers (i.e. Director, Deputy Director, Regional Lead, Clinical Specialist Pharmacist, Pharmacy Services Manager, Senior Pharmacist, Pharmacist, Graduate Entry Grade, Intern Pharmacist). Please complete a separate questionnaire for each role / grade level.

NAME(S) AND GRADE TITLE(S): _____

Please complete your name and grade title / the names and grade titles of those contributing to the completion of this questionnaire.

Objectives & Key Activities

Please take a few minutes to think about the role as defined in the Review Report / draft job spec. List below ~~any additional~~ most important objectives of the role as you see them. Also list the most important tasks or activities of the role, now and over the next 3-5 years.

Please complete the box below.

List the five most important overall objectives of the role (i.e. what the role is aiming to achieve)	List the five most important tasks or activities of the job (i.e. what a person in the role actually does / will need to do)
1. Economic use of resources - staff, time and inventory	1. Workforce planning (capacity planning) of pharmacists and pharmaceutical technicians.
2. Management of the service as expert for the ISA	2. Ensuring mandatory training and perform skill gap analysis.
3. Service development – implements new projects and service developments in the ISA in conjunction with the Deputy Director / Director.	3. Ensuring monitoring and maintenance of equipment and environment to specified standards.
4. Responsible for the training, validation, competency assessment and development of staff within their specialist area in the ISA.	4. Ensuring aseptic processing is compliant with appropriate standards for good manufacturing practice e.g. PIC/S, GMP
5. Promote quality assurance, audit and risk management of their service area.	5. Maintenance of drug and oncology/haematology treatment protocols on relevant IT systems.
6. Brings identifiable/ measurable patient benefit	6. Synthesis and maintenance of policies, procedures and guidelines of relevance to the service.

KEY SKILLS

The main objective of this questionnaire is to explore the skills/qualities that you consider make a difference between effective and less effective performance in the role. In the box below, jot down some of the skills, qualities or characteristics that you consider important for effective performance in the role. In thinking about the key skills involved you may find it useful to refer to the objectives and activities listed earlier.

Please list at least six and no more than eight of the most important skills, qualities or characteristics required for the role.

- | | |
|---|------------------------------------|
| 12. Leadership | 5. Research and Evaluation |
| 13. Management (budget & staff) | 6. Team building |
| 14. Communication / Working Relationships | 7. Change management |
| 15. Expert professional practice | 8. Supporting personal development |

SKILLS & ABILITIES QUESTIONNAIRE

ROLE / GRADE LEVEL: Service Manager (Dispensary)

IMPORTANT: Please specify above which role / grade level the information you provide refers (i.e. Director, Deputy Director, Regional Lead, Clinical Specialist Pharmacist, Pharmacy Services Manager, Senior Pharmacist, Pharmacist, Graduate Entry Grade, Intern Pharmacist). Please complete a separate questionnaire for each role / grade level.

NAME(S) AND GRADE TITLE(S): _____

Please complete your name and grade title / the names and grade titles of those contributing to the completion of this questionnaire.

Objectives & Key Activities

Please take a few minutes to think about the role as defined in the Review Report / draft job spec. List below ~~any additional~~ most important objectives of the role as you see them. Also list the most important tasks or activities of the role, now and over the next 3-5 years.

Please complete the box below.

List the five most important overall objectives of the role (i.e. what the role is aiming to achieve)	List the five most important tasks or activities of the job (i.e. what a person in the role actually does / will need to do)
1. Economic use of resources - staff , time and inventory	1. Workforce planning of pharmacists and pharmaceutical technicians.
2. Management of the service as expert for the ISA	2. Ensuring mandatory training and perform skill gap analysis.
3. Service development – implements new projects and service developments in the ISA in conjunction with the Deputy Director / Director.	3. Ensuring ordering processes are in line with procurement policies, procedures and guidelines governed by the Director.
4. Responsible for the training, validation, competency assessment and development of staff within their specialist area in the ISA.	4. Ensuring medicine supply processes are compliant with appropriate standards and legislation.
5. Promote quality assurance, audit and risk	5. Maintenance and updating of drug database

management of their service area.	on relevant IT systems.
6. Brings identifiable/ measurable patient benefit	6. Synthesis and maintenance of policies, procedures and guidelines of relevance to the service.

KEY SKILLS

The main objective of this questionnaire is to explore the skills/qualities that you consider make a difference between effective and less effective performance in the role. In the box below, jot down some of the skills, qualities or characteristics that you consider important for effective performance in the role. In thinking about the key skills involved you may find it useful to refer to the objectives and activities listed earlier.

Please list at least six and no more than eight of the most important skills, qualities or characteristics required for the role.

16. Leadership

5. Research and Evaluation

17. Management (budget & staff)

6. Team building

18. Communication / Working Relationships

7. Change management

19. Expert professional practice

8. Supporting personal development

SKILLS & ABILITIES QUESTIONNAIRE

ROLE / GRADE LEVEL: Service Manager (Medication Safety – Reporting directly to the Director)

IMPORTANT: Please specify above which role / grade level the information you provide refers (i.e. Director, Deputy Director, Regional Lead, Clinical Specialist Pharmacist, Pharmacy Services Manager, Senior Pharmacist, Pharmacist, Graduate Entry Grade, Intern Pharmacist). Please complete a separate questionnaire for each role / grade level.

NAME(S) AND GRADE TITLE(S): _____

Please complete your name and grade title / the names and grade titles of those contributing to the completion of this questionnaire.

Objectives & Key Activities

Please take a few minutes to think about the role as defined in the Review Report / draft job spec. List below ~~any additional~~ most important objectives of the role as you see them. Also list the most important tasks or activities of the role, now and over the next 3-5 years.

Please complete the box below.

List the five most important overall objectives of the role (i.e. what the role is aiming to achieve)	List the five most important tasks or activities of the job (i.e. what a person in the role actually does / will need to do)
1. Reduce medication errors within the ISA	1. To receive reports and investigation/follow up of medication incidents

2. Management of the service as expert for the ISA	2. Recommendation for change to minimise re-occurrence and reduce risk.
3. Service development – implements new projects and service developments on medication safety in the ISA in conjunction with the Deputy Director / Director.	3. Incorporation of medication safety recommendations from national and international safety agencies into the ISA.
4. Implement, monitor and improve training strategies in medication safety for the ISA.	4. Monitoring / auditing medicine safety policies within the ISA and addressing identified gaps in practice.
5. Promote quality assurance, audit and risk management of their service area.	5. Advancing new technologies for improving medication safety and safe prescribing
6. Brings identifiable/ measurable patient benefit	6. Synthesis and maintenance of policies, procedures and guidelines of relevance to medication safety.

KEY SKILLS

The main objective of this questionnaire is to explore the skills/qualities that you consider make a difference between effective and less effective performance in the role. In the box below, jot down some of the skills, qualities or characteristics that you consider important for effective performance in the role. In thinking about the key skills involved you may find it useful to refer to the objectives and activities listed earlier.

Please list at least six and no more than eight of the most important skills, qualities or characteristics required for the role.

1. Leadership

5. Research and Evaluation

20. Management

6. Team building

21. Communication / Working Relationships

7. Change management

22. Expert professional practice

8. Supporting personal development

Clinical Specialist Pharmacists

<p>Details of Service</p>	<p>Clinical Specialist Pharmacists will be based in each of the ISA's acute hospitals.</p> <p>There work will reflect the contribution of pharmacy to quality integrated pathways (Ref Report on the Review of Hospital Pharmacy, Nov 2011).</p> <p>The Clinical Specialist Pharmacist appointments will depend on specialisation within individual ISA's and medicines information and education needs within the ISA</p> <p>The Clinical Specialist Pharmacist grade will deliver the highest level of pharmaceutical care and practice, using evidence based protocols in line with best international standards and those specified for the integrated care pathways programme.</p>
<p>Reporting Arrangements</p>	<p>Pharmacy Service Manager for clinical services</p>
<p>Key Working Relationships</p>	<p>Pharmacy staff, Medical and Nursing staff, Allied Health Care professionals, hospital management, support services staff.</p>
<p>Purpose of the Post</p>	<p>Responsibility for 'near patient' ward based clinical pharmacy and its specialisations to defined clinical areas, e.g. cancer care, antibiotic stewardship, HIV/AIDS, children, mental health, medicine and surgery and for designated medicines information and education and training posts, providing a high level of expertise, competence and performance.</p> <p>Provision of pharmacy expertise into the new integrated models of care such as antibiotic stewardship, infectious diseases, cardiology, intensive care, transplantation, respiratory disease, care of the elderly in both secondary and primary care, critical care, inpatient and ambulatory care including cancer care and specialist advice on medication management</p> <p>To act as a professional resource in advising other pharmacists and health care professionals in their area of expertise</p> <p>To demonstrate professional leadership within their designated clinical area through effective communication with other clinical practitioners, motivation of staff and challenging barriers to change</p>

Professional / Clinical Responsibilities

The Clinical Specialist Pharmacist will:

- be cognisant of and advise appropriately of regulations (Medicinal Products, Prescription and Control of Supply) and (Misuse of Drugs Regulations), as applicable to their area of specialisation
- deliver the highest level of 'near patient' ward based clinical pharmacy services through expert practice and professional advice and to ensure the optimisation of patient safety initiatives
- act as a professional resource within their area of specialisation for advising other ISA pharmacists and clinicians
- promote and lead in the development and delivery of best practice standards
- conduct practice research and audit
- contribute to formulary development and medicines guidelines
- contribute to and actively promote the development of evidence based clinical guidelines relevant to the treatment and management of patients involving pharmacotherapeutics
- provide specialist medicines information and advice to patients and staff
- facilitate the patient discharge process as appropriate
- support the Clinical Care Programmes as appropriate
- ensure the safe use of medicines by evaluating and managing risks associated with the use of medicines and by participating in the hospital's Medicines Safety reporting process

Managerial Responsibilities

The Clinical Specialist Pharmacist will:

- provide effective clinical leadership to pharmacists assigned to their specialisation and by working with other clinical leaders
- optimise the potential of clinical pharmacy resources, skills and knowledge through monitoring and evaluation, underpinned by literature review and professional development within their area of specialisation
- be responsible for the delivery and development of 'near patient' ward based clinical pharmacy services aligned to quality integrated pathways within their area of specialisation
- contribute to the service planning process

- continually monitor the service to ensure it reflects current needs
- implement and manage identified changes
- manage and professionally supervise other pharmacy staff assigned to that specialisation
- contribute to the development and implementation of SOPs, guidelines, protocols etc relevant to their area of expertise including the development of protocols and guidelines to support integrated care pathways
- maintain records according to local and statutory requirements
- participate in individual performance review

Education and Training

The Clinical Specialist Pharmacist will:

- participate in mandatory training programmes
- undertake continuous professional development and develop professional knowledge and competencies
- support and assist in the training of pharmacists in clinical pharmacy practice
- participate in teaching sessions for nurses and other health professions
- identify own training needs and keep a portfolio of practice - maintain and update specialist and general pharmacy knowledge
- have teaching responsibility in health science faculties, as required by the Director of Hospital Pharmacy and Medicines Management.

Clinical Governance, Quality Assurance, Risk, Health & Safety

The Clinical Specialist Pharmacist will:

- under the direction of their line manager, investigate critical incidents within the designated areas of responsibility and implement preventative and corrective solutions in order to improve patient care
- be aware of and implement agreed policies, procedures and safe professional practice by adhering to relevant legislation, regulations and standards
- actively participate in risk management issues, identify risks and take responsibility for appropriate action
- report any adverse incidents in accordance with organisational guidelines
- have cognisance of HIQA Standards as they apply to the role, for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards.
- promote a safe working environment in accordance with Health and Safety legislation

Skills and Ability QUESTIONNAIRE

ROLE / GRADE LEVEL: Clinical Specialist Pharmacist

IMPORTANT: Please specify above which role / grade level the information you provide refers (i.e. Director, Deputy Director, Regional Lead, Clinical Specialist Pharmacist, Pharmacy Services Manager, Senior Pharmacist, Pharmacist, Graduate Entry Grade, Intern Pharmacist). Please complete a separate questionnaire for each role / grade level.

NAME(S) AND GRADE TITLE(S): _____

Please complete your name and grade title / the names and grade titles of those contributing to the completion of this questionnaire.

Objectives & Key Activities

Please take a few minutes to think about the role as defined in the Review Report / draft job spec. List below the most important objectives of the role as you see them. Also list the most important tasks or activities of the role, now and over the next 3-5 years.

Please complete the box below.

List the five most important overall objectives of the role (i.e. what the role is aiming to achieve)	List the five most important tasks or activities of the job (i.e. what a person in the role actually does / will need to do)
1. Leading clinical pharmacy expert for the ISA in their respective specialisation(s), reflecting local needs and/or national strategies/pathways	1. By applying their specialist knowledge they act as patient advocates in matters regarding medicine management within the multi-disciplinary team
2. Service development – implements new projects and service developments in their specialist area in the ISA in conjunction with the Clinical Pharmacy Service Manager/Deputy Director / Director	2. Synthesis and maintenance of medicine management policies, procedures and guidelines for their specialist area.
3. Responsible for the training, tutoring competency assessment and development of staff within their specialist area in the ISA.	3. Acts as an educational lead for safe, economic and appropriate prescribing within their specialist area in the ISA
4. Quality assurance, clinical audit, and risk management.	4. Delivers the highest level of clinical pharmacy service in their day to day practice.
5. Brings identifiable/ measurable patient benefit through their specialist knowledge input and through being at the forefront of research in their specialist area.	5. Lead and undertake practice research and clinical audit in their specialist area in the ISA
6. Prescribing Pharmacist of the future.	6.

Senior Pharmacists

Details of Service	<p>Senior Pharmacists will be based in each of the ISA's acute hospitals.</p> <p>The Senior Pharmacist appointments will depend on the operational and clinical needs of individual hospitals within as ISA</p>
Reporting Arrangements	<p>Pharmacy Services Manager / Clinical Specialist Pharmacist as appropriate.</p>
Key Working Relationships	<p>Pharmacy management and staff, Medical and Nursing staff, Allied Health Care professionals, support services staff.</p>
Purpose of the Post	<p>The Senior Pharmacist will support the Pharmacy Services Manager(s) in delivering the day to day operational elements of a clearly defined portfolio of hospital based pharmacy services, such as the main pharmacy (dispensary), 'near patient' ward based clinical pharmacy and its specialisations, medication safety and aseptic compounding.</p> <p>To deputise for their line manager for short term absence</p> <p>To support the professional leadership of pharmacy managers within their designated service area, through effective communication, self motivation and by active participation in challenging barriers to and bringing about meaningful change</p>

Professional / Clinical Responsibilities

The Senior Pharmacist will:

- supervise other staff, including pharmacists and technical staff, ensuring regulations (Medicinal Products, Prescription and Control of Supply) and (Misuse of Drugs Regulations), are met when supplying or dispensing medicines as applicable to their assigned duties
- support the provision of 'near patient' ward based clinical pharmacy services, including monitoring patients for adverse events, prescription monitoring, medicines reconciliation, patient counselling and discharge facilitation, as assigned to clinical services
- support the procurement, purchasing, distribution, dispensing (including extemporaneous) of medicines and other pharmaceutical items as assigned to main pharmacy (dispensary) services
- support the aseptic preparation of intravenous medicines as assigned to aseptic services
- support the provision of medicines information within their assigned area of duty

- support the provision of effective liaison with community pharmacy services
- support the implementation of new integrated care systems for those in the acute hospital system, ambulatory care, continuing care and the primary care environment
- contribute to the ISA medicines management strategy by assisting in medicines management projects as assigned
- contribute to the development of clinical guidelines relevant to the treatment and management of patients involving pharmacotherapy as assigned
- audit and measure adherence to local, regional and national guidelines and provide feedback to their line managers as assigned
- conduct research and audit relating to the use of medicines and medicines management as assigned
- ensure the safe use of medicines by evaluating and managing risks associated with the use of medicines and by participating in the hospital's Medicines Safety reporting process

Managerial Responsibilities

The Senior Pharmacist will:

- demonstrate leadership at a local level to more junior staff
- ensure that the purchase, storage and supply of all items is operated on the most economical lines, consistent with and cognisant of legal, safety, security and cold chain (as applicable), requirements
- supervise and manage pharmacy staff assigned to their area of practice
- maintain records, supply information and reports as required
- deputise for his / her line manager as appropriate

Education and Training

The Senior Pharmacist will:

- participate in mandatory training programmes
- undertake continuous professional development and develop professional knowledge and competencies
- support and assist in the training of pharmacists in clinical pharmacy practice
- support teaching sessions for nurses and other health professions as assigned
- identify own training needs and keep a portfolio of practice - maintain and update specialist and general pharmacy knowledge

Clinical Governance, Quality Assurance, Risk, Health & Safety

The Senior Pharmacist will:

- under the direction of their line manager, investigate critical incidents within the designated areas of responsibility and implement preventative and corrective solutions in order to improve patient care
- be aware of and implement agreed policies, procedures and safe professional practice by adhering to relevant legislation, regulations and standards
- actively participate in risk management issues, identify risks and take responsibility for appropriate action
- report any adverse incidents in accordance with organisational guidelines
- have cognisance of HIQA Standards as they apply to the role, for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards.
- promote a safe working environment in accordance with Health and Safety legislation

SKILLS & ABILITIES QUESTIONNAIRE

ROLE / GRADE LEVEL: Senior Pharmacist

IMPORTANT: Please specify above which role / grade level the information you provide refers (i.e. Director, Deputy Director, Regional Lead, Clinical Specialist Pharmacist, Pharmacy Services Manager, Senior Pharmacist, Pharmacist, Graduate Entry Grade, Intern Pharmacist). Please complete a separate questionnaire for each role / grade level.

NAME(S) AND GRADE TITLE(S): _____

Please complete your name and grade title / the names and grade titles of those contributing to the completion of this questionnaire.

Objectives & Key Activities

Please take a few minutes to think about the role as defined in the Review Report / draft job spec. List below ~~any additional~~ most important objectives of the role as you see them. Also list the most important tasks or activities of the role, now and over the next 3-5 years.

Please complete the box below.

List the five most important overall objectives of the role (i.e. what the role is aiming to achieve)	List the five most important tasks or activities of the job (i.e. what a person in the role actually does / will need to do)
1. To provide experienced pharmacist support in the service areas.	1. Act as patient advocate in matters regarding medicine management within the multi-disciplinary team
2. To support the implementation and delivery of integrated care systems	2. Support service manager in the maintenance and updating of medicine management policies, procedures and guidelines for the service they are assigned to.
3. To deputise for the service manager in their	3. Support the service manager in promoting the

short term absence e.g. annual leave	safe, economic and appropriate delivery of the service.
4. Participates in training, tutoring competency assessment and development of pharmacy staff.	4. Delivers a high level of pharmacy practice in their service area.
5. Brings identifiable/ measurable patient benefit	5. Support and undertake practice research and clinical audit in their service area in the ISA
6. Participate in quality assurance, clinical audit, and risk management issues.	6. Professional supervision of assigned staff.

KEY SKILLS

The main objective of this questionnaire is to explore the skills/qualities that you consider make a difference between effective and less effective performance in the role. In the box below, jot down some of the skills, qualities or characteristics that you consider important for effective performance in the role. In thinking about the key skills involved you may find it useful to refer to the objectives and activities listed earlier.

Please list at least six and no more than eight of the most important skills, qualities or characteristics required for the role.

7. Research and Evaluation

2. Team work
3. Communication / Working Relationships
4. Professional practice
5. Supporting personal development of others
6. Mentoring, training and education

Pharmacists

Details of Service	<p>Pharmacists will be based in each of the ISA's acute hospitals.</p> <p>These posts will be rotational within ISA structures as appropriate as designated by the Director of Hospital Pharmacy and Medicines Management</p> <p>The Pharmacist appointments will depend on the operational and clinical needs of individual hospitals within as ISA as designated by the Director of Hospital Pharmacy and Medicines Management</p>
Reporting Arrangements	<p>Reports to the Pharmacy Services Manager, Clinical Pharmacist Specialist or Senior Pharmacist as appropriate and designated according to rotation.</p>
Key Working Relationships	<p>Pharmacy staff, Medical and Nursing staff, Allied Health Care professionals, support services staff.</p>
Purpose of the Post	<p>The Pharmacist will support the Pharmacy Services Manager(s), Clinical Pharmacist Specialists and Senior Pharmacists in delivering the day to day operational elements of a clearly defined portfolio of hospital based pharmacy services, such as the main pharmacy (dispensary), 'near patient' ward based clinical pharmacy and its specialisations, medication safety and aseptic compounding.</p> <p>To participate in ISA wide rotational duties according to service need and to ensure that post holders at this grade will benefit from experience in a range of pharmacy practice areas specific to a hospital site</p> <p>To support the professional leadership of pharmacy managers within their designated service area, through effective communication, self motivation and by active participation in challenging barriers to and bringing about meaningful change</p>

Professional / Clinical Responsibilities

The Pharmacist will:

- supervise technical staff ensuring regulations (Medicinal Products, Prescription and Control of Supply) and (Misuse of Drugs Regulations), are met when supplying or dispensing medicines as applicable to their assigned duties

- assist and contribute to the provision of pharmacy services as assigned, including the professional supervision of dispensed medicines, provision of 'near patient' ward based clinical pharmacy services and the aseptic preparation of intravenous medicines
- support the implementation of new integrated care systems for those in the acute hospital system, ambulatory care, continuing care and the primary care environment which includes implementing the necessary protocols as agreed with the HSE
- contribute to the development of clinical guidelines relevant to the treatment and management of patients involving pharmacotherapy as assigned
- maintain records as required
- contribute to protocol and guideline development, quality initiatives, audit and service development as assigned
- contribute to the safe use of medicines by evaluating and managing risks associated with the use of medicines and by participating in the hospital's Medicines Safety reporting process

Managerial Responsibilities

The Pharmacist will:

- ensure that the purchase and supply of medicines is consistent with local policies and procedures including safety, security and cold chain (as applicable), requirements

Education and Training

The Pharmacist will:

- participate in mandatory training programmes
- undertake continuous professional development and develop professional knowledge and competencies
- support and assist in the training of pharmacists in clinical pharmacy practice
- support teaching sessions for nurses and other health professions as assigned
- identify own training needs and keep a portfolio of practice - maintain and update specialist and general pharmacy knowledge
- participate in individual performance review and appraisal

Clinical Governance, Quality Assurance, Risk, Health & Safety

The Pharmacist will:

- under the direction of their line manager, investigate critical incidents within the designated areas of responsibility and implement preventative and corrective solutions in order to improve patient care
- be aware of and implement agreed policies, procedures and safe professional practice by adhering to relevant legislation, regulations and standards

- actively participate in risk management issues, identify risks and take responsibility for appropriate action
- report any adverse incidents in accordance with organisational guidelines
- have cognisance of HIQA Standards as they apply to the role, for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards.
- promote a safe working environment in accordance with Health and Safety legislation

SKILLS & ABILITIES QUESTIONNAIRE

ROLE / GRADE LEVEL: Pharmacist

IMPORTANT: Please specify above which role / grade level the information you provide refers (i.e. Director, Deputy Director, Regional Lead, Clinical Specialist Pharmacist, Pharmacy Services Manager, Senior Pharmacist, Pharmacist, Graduate Entry Grade, Intern Pharmacist). Please complete a separate questionnaire for each role / grade level.

NAME(S) AND GRADE TITLE(S): _____

Please complete your name and grade title / the names and grade titles of those contributing to the completion of this questionnaire.

Objectives & Key Activities

Please take a few minutes to think about the role as defined in the Review Report / draft job spec. List below ~~any additional~~ most important objectives of the role as you see them. Also list the most important tasks or activities of the role, now and over the next 3-5 years.

Please complete the box below.

List the five most important overall objectives of the role (i.e. what the role is aiming to achieve)	List the five most important tasks or activities of the job (i.e. what a person in the role actually does / will need to do)
1. To provide pharmacist support in the service areas.	1. Supporting patient advocacy in matters regarding medicine management.
2. To rotate through the ISA service areas to gain appropriate experience.	2. Providing the pharmacy service under the supervision of the pharmacy service manager in the area to which they are assigned.
3. To support the implementation and delivery of integrated care systems	3. Support the service manager in promoting the safe, economic and appropriate delivery of the service.
4. Participates in training, tutoring competency assessment thereby developing their portfolio for CPD and CE	4. Delivers pharmacy practice in compliance with policies procedures and guidelines.
5. Brings identifiable/ measurable patient benefit	5. Under supervision, support and undertake practice research and clinical audit in their service area in the ISA
6. Participate in quality assurance, clinical audit, and risk management issues.	6. Professional support and legal supervision of dispensing activities, including the dispensing of controlled drugs and aseptic compounding.

KEY SKILLS

The main objective of this questionnaire is to explore the skills/qualities that you consider make a difference between effective and less effective performance in the role. In the box below, jot down some of the skills, qualities or characteristics that you consider important for effective performance in the role. In thinking about the key skills involved you may find it useful to refer to the objectives and activities listed earlier.

Please list at least six and no more than eight of the most important skills, qualities or characteristics required for the role.

- 1. Pharmaceutical and clinical reasoning skills**
- 2. Team work**
- 3. Communication**
- 4. Working Relationships**
- 5. Professional practice**
- 6. Self motivated learner**
- 7.**

