Consultation on draft Standards for Chief Pharmacists

Response from the Guild of Healthcare Pharmacists

Please choose the option below which best describes the area you mainly work in.
Various patient-facing and non-patient facing pharmacy roles.

The standards

1. We have set out four standards for Chief Pharmacists. Do you think the standards will:

a. strengthen and maintain pharmacy governance in the interests of patient safety?
Don't know

b. provide a governance framework which will support staff to:
i) report preparation and dispensing errors?
Don't know

ii) learn from those errors?
Don't know

c. Please explain your answers.
These standards are already what current Chief Pharmacists are working towards or expected to do, so unsure whether publication of this will make any differences.

There are already error reporting mechanisms and systems in health organisations such as DATIX. A lot of near misses are acknowledged but there may not be capacity for Chief Pharmacists to scrutinise them more even after the publication of these proposed standards.

2. The Chief Pharmacist has a key role in making sure that pharmacy staff can benefit from the defences for 'inadvertent' (accidental or unintentional) preparation and dispensing errors. Thinking about this role, are there any other standards for Chief Pharmacists that you think are missing?
No

3. We have developed the standards to apply to Chief Pharmacists, whatever setting they work in. Are there any settings where you think these standards could not be applied or met?
Yes
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If 'yes', please say which setting and why the standards could not be applied or met.
The standards might not apply to organisations such as ambulance service trusts or interface organisations such as 111 and pharmacy service provision by pharmacists. Standards should be refined to include the whole business and not limited to dispensing and within pharmacy dispensaries.

Impact of the proposals

Impact on people sharing protected characteristics. We want to understand whether our proposals may have a positive or negative impact on any individuals or groups sharing any of the protected characteristics in the Equality Act 2010. These are:
Age

Do you think our proposals will have a positive or negative impact on individuals or groups who share any of the protected characteristics?

Don't know

Disability
Do you think our proposals will have a positive or negative impact on individuals or groups who share any of the protected characteristics?

Don't know

Gender reassignment
Do you think our proposals will have a positive or negative impact on individuals or groups who share any of the protected characteristics?

Don't know

Marriage and civil partnership
Do you think our proposals will have a positive or negative impact on individuals or groups who share any of the protected characteristics?

Don't know

Pregnancy and maternity
Do you think our proposals will have a positive or negative impact on individuals or groups who share any of the protected characteristics?

Don't know

Race
Do you think our proposals will have a positive or negative impact on individuals or groups who share any of the protected characteristics?

Don't know

Religion or belief
Do you think our proposals will have a positive or negative impact on individuals or groups who share any of the protected characteristics?

Don't know

Sex
Do you think our proposals will have a positive or negative impact on individuals or groups who share any of the protected characteristics?

Don't know

Sexual orientation

Do you think our proposals will have a positive or negative impact on individuals or groups who share any of the protected characteristics?

Don't know

Please describe the impact you think our proposals will have and the protected characteristic(s) concerned.

It is hard to envisage how the proposed standards would directly impact on groups with protected characteristics.

Impact on other groups

We also want to know if our proposals will have an impact on other individuals or groups (not
related to protected characteristics) specifically, patients and the public, Chief Pharmacists, pharmacy owners or employers, pharmacy staff, other healthcare professionals, and pharmacist and pharmacy technician students and trainees.

5. Do you think our proposals will have a positive or negative impact on any of these groups?

Patients and the public

Don't know

Please describe the impact you think our proposals will have and the individuals or groups concerned.

Positive - Patients and the public will be assured there are expected standards in place at the top of health organisations (should they be interested) in whichever pharmacy setting they go to. This will promote patient safety and improve the quality of services patients receive overall.

Don't know - Current standards already exist for Pharmacy premises, for registered pharmacists and pharmacy technicians and for Responsible Pharmacist within dispensary. Unclear whether Chief Pharmacist standards will make any difference to patients or public.

Chief Pharmacists

Positive and negative impact

Please describe the impact you think our proposals will have and the individuals or groups concerned.

Positive - The standards reinforce expected standards about service provision and quality.

Negative - If a Chief Pharmacist is to be held responsible when something goes wrong because junior (or indeed senior) staff errors are caused by overwork, poor support or a failure to control inappropriate requests and pressures from elsewhere in the organisation, over which they have no control, there is a risk that pharmacists will be reluctant to take on a Chief Pharmacist role.
Standards also mentioned Chief Pharmacist ensures the workforce receives training but this is not always within the gift of Chiefs due to rota pressures or financial support.

Pharmacy owners/employers
Positive and negative impact

Please describe the impact you think our proposals will have and the individuals or groups concerned.
Positive - The standards reinforce expected standards about service provision and behaviours. It outlines the responsibilities for higher levels/exec levels and can be used as an argument for resourcing the pharmacy department.

Negative - Currently, as an example, the report of aseptic services gets sent to Chief Executives and the organisation is responsible for ensuring its operational outcomes. The standards can be used against Chief Pharmacists and apply pressure to implement things when everything else is a priority. The standards document referenced productivity but not patient safety so unsure what the standards aim to achieve.

If an organisation wants to introduce a scheme which increases professional risk for pharmacy staff or patient risk, can the Chief Pharmacist use the standards to stop the scheme or obtain the necessary resources from the organisation to implement it safely? Or will the organisation see the Chief Pharmacist as the issue and try to push them out for defending their staff? If the Chief Pharmacist has been defending their staff, the loss may make it worse for the remaining staff.

Pharmacy staff
Positive impact

Please describe the impact you think our proposals will have and the individuals or groups concerned.
There is little or nothing in the standards about a Chief Pharmacist having a duty of care for, or a responsibility to, protect their staff. Based on ~90% of hospital pharmacists responding to the RPS survey reporting burnout risk, it feels like this might be of non-trivial importance for a Chief Pharmacist. This protection is likely multifaceted; including protection from exposure to professional risks and pressure to work on the edge or outside their responsibility/competencies etc. Burnout does not discriminate based on banding.

If the Chief Pharmacist is to have a duty of care for their staff, it is important that there is also a duty of care **to** the Chief Pharmacist. How does this framework tackle burn out at Chief Pharmacists level? The organisation should have a duty of care for the Chief Pharmacist as should the Chief Pharmaceutical Officers.

Other healthcare professionals
Positive impact

Please describe the impact you think our proposals will have and the individuals or groups concerned.
The standards increase understanding of the roles and responsibilities by other healthcare professionals.

Pharmacist and pharmacy technician students and trainees
Positive and negative impact

Please describe the impact you think our proposals will have and the individuals or groups concerned.
Positive - The standards can promote more cohesive working, ability to share learning and lead to improved patient care ultimately.

Negative - The standards could be used to make demands to facilitate agendas.

Any other comments

6. Is there anything else related to the Chief Pharmacist standards that you would like to raise?

There should be a standard to ensure all staff promote environmentally sustainable working practices working towards NHS net zero ambitions. For England, this is under legislation, i.e. Health and Social Care Act 2022 as a mandate for all staff.