

PROFESSIONAL DEVELOPMENT & EDUCATION

Continuing Professional Development (CPD)

Comments

1. Must ensure motivation and support for real learning are not lost to a 'tick box' culture
2. CPD (and revalidation) is one of the main membership benefits
3. It is good that CPD support has been made a priority
4. CPD resources can demonstrate the worth of the PLB to members now and it affects all members
5. CPD is not a means to an end but should be recognised as something which supports the development of professional practice and enables individuals to practice as competent professionals
6. Need to get the messaging right around CPD
7. Signpost to learning and accreditation of learning

Suggestions

8. Needs to be less complex to record – should be able to record an entry in 5 minutes
9. The design of the revised CPD website should be inclusive of stakeholders as well as GPhC staff
10. Learning needs could include delegation, working in a multi-disciplinary team effectively etc
11. GPhC messaging is a 'relaxed' approach to CPD so PLB should have a similar approach
12. Need to give examples of the ways of doing CPD such as letters, events, incidents, shadowing, structured learning etc
13. CPD in the future could be tied in with remediation

Questions

14. Revalidation links to CPD and will be important to employers because of the potential impact on workforce so what can the PLB do to support this agenda?
15. Need to clarify what is being developed in relation to CPD (remove fear factor, demystifying CPD, simplifying recording and 1:1 support) ?
16. Where does revalidation sit – here or under professional support?

Support for Pre-registration

Comments

1. There is a recognition amongst commissioners that when graduates exit the degree course they are at a certain level of competency and can deliver x, but that they can then move to an experienced general level and then advanced and specialist practice

Suggestions

2. Role of PLB in pre-reg may need a radical reform if the integrated 5 year MPharm is introduced
3. Need to plan support for pre-reg students who have tutors that have not joined the PLB
4. Need to develop a relationship with under graduate students so that carries on into pre-reg and qualified
5. Revalidation needs to be against the practice framework

Support for advanced and specialist practice

Comments

1. True leaders in pharmacy will be those who are practicing at the 'cutting edge' of pharmacy
2. The average pharmacist will not be attracted by A&S practice – need to make sure we don't alienate the generalists
3. Need to create a culture of co-operation not competition with partner bodies
4. The competencies of SIGs needs to be comparable

Suggestions

5. A&S practice should be based on commonalities of practice and not the different sectors of practice
6. There are existing frameworks to support professional development from generalist to advanced practice – don't reinvent the wheel
7. A&S development needs to link into what is already available such as MSc, MBA etc and could be an income stream for the PLB (they provide certificates / diplomas etc where there are gaps which could be attractive to members)

8. Working with current SIGs will need trust and UKCPA should act as a lead / link / mediator
9. There are different frameworks for A&S practice in different countries and this needs to be remembered and taken into account
10. How will the SIGs sit within the PLB – would be useful to have a model structure so that the current SIGs could see how it would work and this would enable engagement with these groups
11. Competencies at a general level need to be defined across the profession (CoDeG work – general level frameworks) – across all sectors and environments of practice
12. The accreditation of service provision needs to be harmonised and this could be a role for the PLB – commissioners would then be able to identify pharmacists accredited to certain levels – PLB could provide the training
13. Need to engage with pharmacists at the ‘fringe’ – industry, government

Questions

14. The ability of the PLB to ‘recognise’ different forms of advanced practice should be a strength – in relation to requirements of commissioners Should general level (community) practice be recognised as a speciality (like GPs) and how does this fit with Responsible Pharmacists?
15. Need a good definition of advanced and specialist practice – what does this mean as you could specialise in a particular field but not be an advanced practitioner ?

General

Comments

1. Leading in education would include support for financial ‘pinch-points’
2. Whoever pays the membership fee will be looking at the benefits for themselves – individuals and employers

Suggestions

3. PLB should be attentive to the needs of employers (not a unanimous view)
4. Role of the PLB is to contribute to the culture of the profession, from undergraduate through the pharmacist’s career – and need to demonstrate what it means to be a professional
5. Research is a vital contributor to the role of a PLB – needs to underpin all of this work
6. Cross project / workstream links are not clear to stakeholders and need to be made more transparent

7. The development of the PLB has to set clear priorities and focus on these – not try to do everything at once
8. Need to get a balance between core services and individualistic support
9. Needs to be a good relationship between the GPhC and PLB – interface should be defined and responsibilities determined
10. Need to look at what can realistically be provided in the timescales

Questions

11. What is the role of the PLB in undergraduate curriculum – they need to be able to influence the agenda ?
12. How will the PLB influence the new 5 year integrated MPharm course?
13. How does this workstream link to others that include revalidation?
14. How will all of these projects and services be paid for – impact of the plans for the PLB on resources is a key factor ?