

# **Pre-registration Trainee Pharmacy Technician (PTPT) Integrated Training Pilot 2020/2022:**

**Information for Prospective Lead  
Employers and Host Sites**

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## **Introduction**

**Health Education England (HEE) are looking to work with employers to develop and run the 24-month Pre-registration Trainee Pharmacy Technician Integrated Training Pilot for 48 PTPTs commencing February 2020, in line with the General Pharmaceutical Council's (GPhC) Initial Educational and Training Standards<sup>1</sup>.**

This national pilot is funded by the Pharmacy Integration Fund (PhIF). The PhIF commissions and delivers a range of training and development programmes to support the development of the community pharmacy profession through a partnership arrangement between Health Education England (HEE) and NHS England.

Individuals undergoing education and training to become a registered pharmacy technician are known as a pre-registration trainee pharmacy technician (PTPT) and will be referred to as 'PTPT' in this document here forth.

The pharmacy technician workforce has been recognised through various national policies and white papers as being essential. This workforce supports the skill mix and service transformation required to deliver the Medicines Value Programme<sup>2</sup>, NHS Long Term Plan<sup>3</sup>, Community Pharmacy Contractual Framework<sup>4</sup> and GP Contract Five-year Framework<sup>5</sup>.

Pharmacy technician education underpins transformation and is fundamental to developing a large pharmacy technician workforce, enabling the appropriate skill mix to support the infrastructure changes required to enhance the roles of clinical pharmacists and pharmacy services across integrated care systems.

The vast majority of pharmacy technicians train in one sector. This is not conducive to the development of a flexible workforce with a transferable skill set, able work across sectors. Whilst new workforce demands are emerging in areas such as care homes, primary care and mental health, these sectors have not traditionally contributed to the supply pipeline. It is not sustainable in the long term for new sector demand to continue to rely on the workforce supply from secondary care and community pharmacy services. It is important to acknowledge the new and emerging roles of pharmacy technicians in these sectors and explore ways to enable the system to increase appropriate training capacity, supporting workforce growth.

A new workforce and education model is required to ensure a sustainable pipeline of pharmacy technicians who are competent and confident to support the delivery of the objectives detailed in the NHS Long Term Plan. Multiple systems of support are required to ensure successful implementation of this model including educational and practice/clinical supervision.

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<sup>1</sup> [https://www.pharmacyregulation.org/sites/default/files/standards\\_for\\_the\\_initial\\_education\\_and\\_training\\_of\\_pharmacy\\_technicians\\_october\\_2017.pdf](https://www.pharmacyregulation.org/sites/default/files/standards_for_the_initial_education_and_training_of_pharmacy_technicians_october_2017.pdf)

<sup>2</sup> <https://www.england.nhs.uk/medicines/value-programme/>

<sup>3</sup> <https://www.longtermplan.nhs.uk/>

<sup>4</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/819601/cpcf-2019-to-2024.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/819601/cpcf-2019-to-2024.pdf)

<sup>5</sup> <https://www.england.nhs.uk/wp-content/uploads/2019/01/gp-contract-2019.pdf>

## **Pre-registration Trainee Pharmacy Technician (PTPT) Integrated Training Pilot 2020/2022**

The PTPT integrated training pilot is an opportunity to increase the pharmacy technician workforce by creating an additional cohort of trainees, recruited to multi-sector training posts. The pilot aims to support future workforce needs in new and expanding roles that have not traditionally fed into the pharmacy technician pipeline. Employers are encouraged to consider how they can work in partnership to provide educational opportunities which will increase the numbers of pharmacy technicians needed to support the system needs now and in the future.

This pilot aims to develop models that meet the GPhC evidence framework<sup>6</sup>, with the required infrastructure to support PTPTs. With 48 PTPTs, this pilot also aims to provide sufficient volume to determine suitable curricula and educational and practice/clinical supervisory arrangements to inform good practice and next steps.

### **Benefits of getting involved**

#### **What are the benefits of being part of this project?**

There are a significant number of benefits for all, including:

- Contribution to the development of a flexible pharmacy technician workforce, better prepared to deliver enhanced integrated cross-sector healthcare system services, e.g. services across community pharmacy, general practice, care homes, secondary care and community mental health
- Improved understanding of the transfer of care issues and how to support patients as they transition between care settings
- Enhanced relationship development between partners supporting the development of primary care networks and integrated care systems
- Raising awareness (in all sectors) regarding barriers and difficulties regarding communication and transfer of care
- Developing PTPTs with a broader skill set, allowing them to better support service delivery to patients and the public across all healthcare systems
- Although PTPTs will be supernumerary, they will support service delivery.

### **Getting involved**

#### **Who can employ a PTPT?**

We are looking for tri-partnerships that will support 48 PTPTs being trained in three of the following healthcare settings:

- secondary care
- community mental health
- community pharmacy
- general practice
- care homes

Within the tri-partnership one employer will take the role of lead employer and they will be responsible for employing the PTPT(s).

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<sup>6</sup>[https://www.pharmacyregulation.org/sites/default/files/document/gphc\\_initial\\_education\\_and\\_training\\_of\\_pharmacy\\_technicians\\_evidence\\_framework\\_april\\_2018.pdf](https://www.pharmacyregulation.org/sites/default/files/document/gphc_initial_education_and_training_of_pharmacy_technicians_evidence_framework_april_2018.pdf)

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The lead employer will be responsible for working with the host employers to agree a learning plan for the PTPT(s) that meets the GPhC Initial Education and Training Standards.

The PTPT(s) will be employed by one of the partners, known as the lead employer from the tri-partnership to facilitate financial payments.

### Who can host a PTPT?

The employers from the tri-partnerships will all host the PTPT(s) as agreed in the learning plan.

It is expected that the host organisations will have appropriate infrastructure to support the placements, for example desks or hot desks, access to IT equipment, facilities and appropriate practice/clinical supervision arrangements.

### Will remuneration be provided?

Funding will be provided to support the sites in developing the programme, preparing for the trainee and supporting them through the training programme.

Payment	Amount	Allocations per financial year		Covers
		2019/20	2020/21	
<b>Integrated model support</b>	£1,000 per trainee	£1,000 (Feb 2020)		Support development of placements
<b>Educational supervision</b>	£11,000 per trainee	£5,500	£5,500	Support supervision and education by the lead employer
<b>Practice/clinical supervision</b>	£20,000 per trainee	£10,000	£10,000	Support supervision and education in all sectors
<b>Education provision</b>	Paid by HEE directly to the provider			

**Note:** PTPTs will start the 24-month training programme February 2020 and complete the training programme end of January 2022.

Payment for the full programme must **be effected before** March 2021. However, the lead employer must assure HEE that financial arrangements are in place to support the PTPT throughout the duration of the programme (ending January 2022). All payments will be made to the lead employer. The tri-partnership should agree how funds are distributed.

***Salary for the PTPT will be funded by the employing organisation. HEE will not provide salary funding.***

### How will PTPTs be recruited?

All PTPTs who are part of the pilot must be recruited by the lead employer. The lead employer will lead on recruitment in collaboration with host organisation(s), and in line with their existing policies and procedures.

All applicants for the post should meet the following criteria:

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- Eligibility criteria for PTPTs to enrol onto the training programme will be four GCSEs at Grade A\*-C/9-4 including Mathematics, English Language, Science and one other subject
- 16 years of age or older
- Appropriate DBS check and references as per the employing organisations' HR policies

Due to the requirements of an integrated training programme across three sectors, it is preferred that PTPTs will be employed on a full-time contract. However, part-time will be considered on a case by case basis, as long as the GPhC Initial Education and Training Standards can be met and there is no impact on educational attainment.

To access programme funding PTPTs should be employed at a level commensurate with Agenda for Change pay scale (Annex 21, band 4) and terms and conditions<sup>7</sup>, to ensure parity and consistency for trainees as they move through rotation.

### How do I get involved?

The first step is to form a tri-partnership (as a minimum). Then consider the number of PTPTs you have the capacity to host, support and supervise and the proposed plan for placement rotation.

Once you have this information, please submit an Expression of Interest form by the 15<sup>th</sup> November [[available here](#)]. If you have further queries, please contact the team at [HEE.PHIF@hee.nhs.uk](mailto:HEE.PHIF@hee.nhs.uk) stating 'PTPT Integrated Training Pilot' in the email subject header.

### Education provision

HEE will procure and fund the education provision for the PTPTs, to include accuracy checking of dispensed items. It will be delivered by virtual/e-learning and meet the GPhC evidence framework. Employers need to facilitate the completion of the education provision.

### Structure of the placements

The pilot aims to be flexible and allow sites to develop placements in line with their service models. However, key principles will inform the development of the placement models. These are based on the training programme:

1. meets the requirements of the GPhC Initial Education Standards (IET)<sup>8</sup>.
2. is overseen by an Educational Supervisor
3. has a work-based practice/clinical supervisor in each rotation
4. provides good experiential learning opportunities
5. meets the Health Education England quality framework<sup>9</sup>

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<sup>7</sup> <https://www.nhsemployers.org/pay-pensions-and-reward/agenda-for-change/pay-scales>

<sup>8</sup>

[https://www.pharmacyregulation.org/sites/default/files/standards\\_for\\_the\\_initial\\_education\\_and\\_training\\_of\\_pharmacy\\_technicians\\_october\\_2017.pdf](https://www.pharmacyregulation.org/sites/default/files/standards_for_the_initial_education_and_training_of_pharmacy_technicians_october_2017.pdf)

<sup>9</sup> <https://www.hee.nhs.uk/our-work/quality>

### **Minimum requirements for each placement**

The PTPT will rotate through each sector at least once during each year, during the 24-month training programme. Each rotation must be a minimum of 12 weeks.

The placements can take a number of formats including block placements, split week or a combination of the two. This is at the discretion of the host partners and dependent on the service delivery model of the hosts and ensuring practice/clinical supervision of the PTPT.

The decision regarding how the placements are split must facilitate the supervision of the trainee by a registered pharmacy professional. For example, if a split-week model is being used, the PTPT's days must mirror those of their practice/clinical supervisor.

Or if, for example, the practice/clinical supervisor is on site certain days of the week, then the trainee must undertake a split-week placement and be based at the clinical learning environment on the same days.

### **Does that mean that the PTPT cannot be on site if the practice/clinical supervisor is absent?**

No. There will be times when the practice/clinical supervisor is absent, for example on annual leave, and the PTPT is at the site. This should be planned, and appropriate supervision by another registered health professional and activities put in place for the PTPT in these instances. Arrangements must be in place for the management of unplanned practice/clinical supervisor absences, for example sickness, including who has responsibility for the supervision of the PTPT. Unexpected prolonged absences would need to be escalated to the lead employer and the regional facilitator.

### **Do the placements have to happen at specific times over the two years?**

The timing of each of the component placements should be in the learning plan and support the successful completion of the PTPT integrated training programme.

### **Can PTPTs spend their time across a number of sites in each sector?**

There are several benefits to exposing the trainee to a number of sites and experiences. However, the PTPT must be supervised as per the supervision requirements in this pilot.

### **Should the PTPT spend all of their time working with pharmacy professionals?**

No. The PTPT should be exposed to and learn from a wide range of professionals, whilst ensuring the GPhC Initial Education and Training Standards are met.

The time spent with other healthcare professionals must cover clinical duties as well as non-clinical activities relevant to the pharmacy technician role in that sector.

### **Can the PTPT support service delivery?**

Yes. However, as the PTPTs are not registered healthcare professionals, they must be supervised at all times. The degree of autonomy with which they can operate will be determined by the registered professional supervising them at that time, based on their assessment of the PTPT's knowledge and skills.



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PTPTs will be able to contribute to quality improvement activities. However, the bulk of their time should be spent on activities relating to the delivery of patient focused and, where appropriate, patient-facing activities.

While the PTPTs are supernumerary, they should be undertaking activities (with the appropriate supervision) that support them in developing the knowledge, skills and behaviours required to function as an autonomous professional upon registration.

### **Should PTPTs spend most of their time shadowing others?**

No. This programme should provide PTPTs with significant hands-on practical experience in order to prepare them for practice as autonomous professionals. It is therefore expected that they be given the opportunity to learn by undertaking the range of tasks expected of a registered pharmacy technician.

### **What activities is the PTPT expected to be involved in?**

PTPTs will undertake a range of activities dependent on the clinical learning environment in which they work, their knowledge and skills and their competence and confidence. Activities should allow them to meet the requirements of the GPhC Initial Education Standards (IET) and link to the agreed learning outcomes as agreed in the learning plan.

## **Trainee supervision arrangements**

All PTPTs must have an education supervisor who will oversee the training programme and practice/clinical supervisors in each rotation.

### **Educational Supervisor**

Partnerships must have a named registered pharmacy professional to act as an educational supervisor. At the point when the PTPT commences the programme, the supervisor must have been practising for at least three years in the sector of the pharmacy in which they wish to supervise.

An educational supervisor is someone who is selected, appropriately trained and responsible for the overall supervision and management of the PTPT's educational progress during the 24-month training programme. Further information regarding the role of the educational supervisor can be found in the [GPhC's guidance on supervising pharmacy professionals in training](#).

To become a pharmacy educational supervisor, you must:

- be a registered pharmacy professional
- have been practising for at least three years in the sector of pharmacy in which you wish to supervise
- meet the GPhC supervision requirements<sup>10</sup>
- meet the education provider's requirement

The educational supervisor should work collaboratively with the practice/clinical supervisors to ensure the overall training programme meets the GPhC's Initial Education Standards (IET) and

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<sup>10</sup>

[https://www.pharmacyregulation.org/sites/default/files/document/guidance\\_on\\_supervising\\_pharmacy\\_professionals\\_in\\_training\\_august\\_2018.pdf](https://www.pharmacyregulation.org/sites/default/files/document/guidance_on_supervising_pharmacy_professionals_in_training_august_2018.pdf)



monitor the PTPT's progress throughout the training programme in order to give feedback at each annual appraisal.

It is expected that the PTPT will review progress with their educational supervisor at least once a month to ensure the provision of holistic care and support to the PTPT. The educational supervisor should receive regular updates from the practice/clinical supervisor at least monthly and conduct a site visit for each rotation to review progression and offer support to the trainee and the practice/clinical supervisor.

### **Can an educational supervisor also be a practice/clinical supervisor?**

Yes, they can. Although, when they meet with the PTPT, they must make it clear what role they are carrying out.

### **Practice/clinical supervisors**

A practice/clinical supervisor in pharmacy is someone who is selected, appropriately trained and responsible for overseeing a specified PTPT's work and providing developmental feedback during a period of training. Each practice supervisor must be a registered pharmacy professional with appropriate assessment skills. Practice/clinical supervisors will support PTPTs to identify opportunities for learning in the workplace and provide supervision of PTPTs on a day-to-day basis, identifying PTPTs requiring additional support. Practice/clinical supervisors are involved in and contribute to a work-based learning culture.

The GPhC Initial Education Standards (IET) require PTPTs to have the opportunity to work with the wider multi-professional team to reflect the necessary knowledge and skills required of the role. We recognise that on occasion, supervision may be best placed with registered professionals outside of the pharmacy profession, for example, a practice nurse supervising a PTPT counselling on inhaler technique.

Examples of roles which would be considered to provide practice/clinical supervision are:

- NVQ assessor
- NVQ expert witness
- Section/rotation/placement trainer
- Other multi-professional practice/clinical supervisor

HEE London and South East Pharmacy have developed a practice/clinical supervisor framework<sup>11</sup>. This can be used as a tool for practice/clinical supervisors to identify the competencies relevant to their role and to demonstrate competence against criteria by mapping their experience to them and identifying learning needs for their role as a Practice/clinical supervisor.

The practice/clinical supervisor should meet with the PTPT at the start of a rotation to agree learning outcomes, training and support. They should then meet with the PTPT mid-rotation to provide interim feedback and support and then again at the end of the rotation to give summative feedback.

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<sup>11</sup> [https://www.lasepharmacy.hee.nhs.uk/dyn/\\_assets/folder4/educational-frameworks/HEELaSEPSFramework2019Final.pdf](https://www.lasepharmacy.hee.nhs.uk/dyn/_assets/folder4/educational-frameworks/HEELaSEPSFramework2019Final.pdf)

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**If a practice/clinical supervisor works in more than one site, can they act as the practice/clinical supervisor for multiple sites?**

Yes, provided they can meet the GPhC requirements for supervision.

### **Support for host sites**

As well as the financial support offered for being involved in the project, additional support will be made available to facilitate shared learning and support the quality and consistency of approach across the national footprint.

There is a national lead for the project and regional facilitators will shortly be available to answer questions and provide support.

### **Next steps**

1. Form a tri-partnership (as a minimum)
2. Consider the number of PTPTs you have the capacity to host, support and supervise
3. Consider the proposed plan for placement rotation.
4. Submit an Expression of Interest form by the 15<sup>th</sup> November  
[\[https://healtheducationyh.onlinesurveys.ac.uk/expression-of-interest-for-multi-sector-ptpt-pilot-2\]](https://healtheducationyh.onlinesurveys.ac.uk/expression-of-interest-for-multi-sector-ptpt-pilot-2)

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