How the roles of pharmacists and pharmacy technicians in community pharmacy could be developed

A structured career framework which relies upon a skills and salary escalator should be established for both pharmacists and pharmacy technicians in order to develop new roles in the community pharmacy setting.

New roles for community pharmacists need to be fully scoped out, including clinical governance, training and funding considerations, and integrated into the Community Pharmacy Contractual Framework and NHS patient pathways and/or enhanced service specifications, before extended roles for pharmacy technicians can be considered. A suggested career structure which relies upon practitioner, advanced practitioner, specialised practitioner and established specialised practitioner levels, is detailed in this report – with accompanying job descriptions and training, competency and experience requirements.

The Department of Health’s New Ways of Working programme, which was a success, changed the way that mental health staff work and introduced a range of new and extended roles for a range of staff grades. It provides a useful template for implementing any proposed changes to skill mix in pharmacy. One of the important lessons from the programme was that not only would stakeholders need to sign up to it, they must become active partners in its implementation.

Additional dispensary support must be available to pharmacy teams before the role of the pharmacy technician can be safely extended. Essential precursory clinical governance improvements include greater use of automation, the integration of bar-code checking into the dispensing process, the regular availability and reliance upon clinical information and adequate staffing levels.
The status of pharmacy technicians in community pharmacy, which currently appears tenuous, must be strengthened. Many pharmacy technicians are unaware of the implications of being on a public register and they have a weak leadership body. Low salaries, low-grade qualifications and the lack of a structured career framework all contribute to a lack of regulatory traction and must all be improved if the General Pharmaceutical Council is to be able to ensure public protection from this group of individuals.

If the collective engagement and buy-in of pharmacists and subsequently pharmacy technicians is to be secured, then future developments must be linked to a clinical career framework with associated salary and skills escalator.