

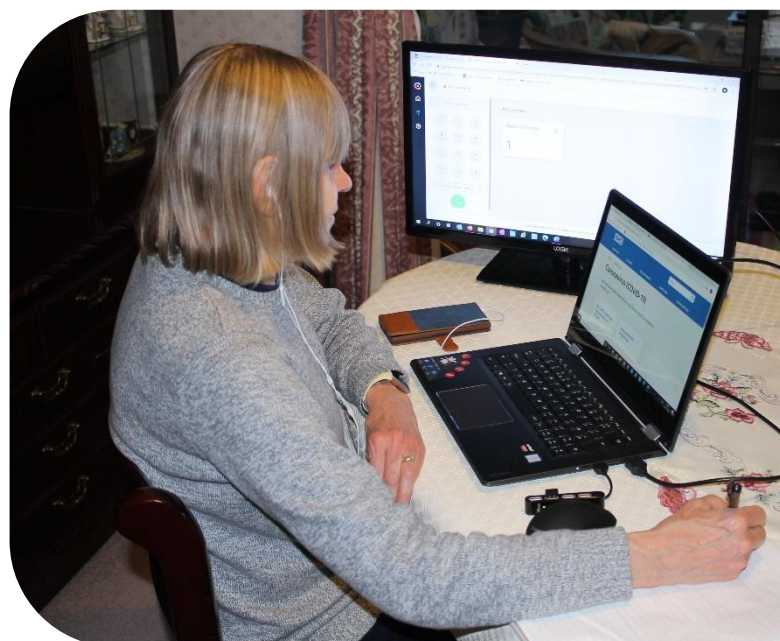
Pharmacist

Working life Medicines are the most common treatments offered to NHS patients. A pharmacist is an expert in medicines and their use. Their knowledge of medicines and the effect they have on the human body is critical for the successful management of every type of medical condition.

Case study: Alyson Skaife

Alyson Skaife originally trained as a pharmacist working in a hospital. However, she wanted more patient contact so spent most of her career working in community pharmacy, ending up in a pharmacy attached to a medical centre. She retired from that job in March 2019 and for the following year worked as a locum as well as doing some tutoring and mentoring at Keele University. During the Covid-19 pandemic she wanted to do something to help but has a health condition which in the early days made her reluctant to work in a role where she was having face to face contact with patients.

Alyson read about the NHS111 Pharmacy Clinical Assessment Service (PharmCAS) on the C&D website and decided to apply. She started in late July 2020 and now works two 4 hour shifts a week, which is part of a national service, responding to enquiries from patients, from any part of the country that are referred to her from their local NHS111 provider. She works from home, using a laptop to remotely access the NHS 111 clinical systems. When she logs in, she can see the nature of the calls waiting for a call back from a pharmacist, and their priority, and calls them up, recording the call as well as completing records on screen. Often, she can solve the query over the phone (such as a missed dose of medication, what the consequence may be and what action should be taken) but if not, she can:



- Make an appointment with certain GP surgeries
- Refer the patient to their GP, and send information about the consultation
- Advise an individual to go to an Urgent Care Centre or Emergency Department
- Refer the individual to the Out of Hours Service for a consultation with a prescriber, or call an ambulance
- Signpost to other services – clinical and non-clinical

The priority for the service is to support non-Covid-19 cases but in practice the service does receive calls about Covid-19 and the rules around isolation, as well as some Covid-19 queries related to patients in social care.

Often people ring up for advice, such as why was a blood test taken, or what do the results mean, or what does a particular medication do? Previously they may have discussed this with their GP or pharmacist but due to Covid-19 many patients are choosing to seek advice from NHS111 instead. For many people it's important to be able to discuss information rather than look it up online, and for some people who are very isolated they also benefit from talking to a healthcare professional. In other cases individuals call with a query about their medication but after consulting with the patient, Alyson sometimes realises that they have more serious symptoms and is able to persuade or reassure them that they should go to a GP.

There are real differences between seeing patients face to face and over the phone. There are no visual clues so she needs to ask a lot more questions, which is often difficult for patients who have hearing loss. Because PharmCAS is a national service it's important to be able to understand local accents and idioms to really work out how best to help the patient. Although the meeting is being recorded, it's still important to take accurate notes during the consultation, which is very different to seeing a patient in a pharmacy consulting room. However, it does afford time to talk to a patient without distractions which is more satisfying.

One aspect of the job that Alyson finds challenging is not knowing what happened to a patient after the call, which is different to community pharmacy where the patient will often come back and tell her. Also, the nature of some of the calls are related to 'social' problems, for example disability equipment, loneliness, visa and benefits advice. These are things for which no formal training has been received and it is sometimes difficult to know the correct service to signpost the patient to.

In preparing to work in the PharmCAS, Alyson received a comprehensive induction, and there is ongoing training both through the Centre for Postgraduate Pharmacy Education and through the NHS111 service provider, including webinars and speakers on various subjects such as NHS Test and Trace. When Alyson starts each shift she makes sure she has quick access to all the information she needs on her computer as well as a pen and paper just in case. It's important to work within her



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scope of competence and Alyson can see the nature of the call before contacting the patient, ensuring that she only handles calls that she can safely manage.

Alyson is part of a WhatsApp group of over 50 pharmacists working in this role across the PharmaCAS, and although she's never met any of them, they are a useful source of information and support within the service.

Alyson is now doing the occasional locum shift in retail settings and is e-mentoring some pharmacy students from Keele University but will continue working in the NHS111 PharmaCAS as long as it is needed. Sometimes patients just need reassurance and it provides helpful information and support to patients which means that people don't always need to go to the GP or Emergency Department. Alyson is proud to be part of this service, and contributing to maintaining effective health services during the pandemic.

Read more about the role:

<https://www.healthcareers.nhs.uk/explore-roles/pharmacy/roles-pharmacy/pharmacist>