



PRE-REGISTRATION PHARMACY PROGRAMME

HANDBOOK 2019-2020

**Centre for Professional Development
and Lifelong Learning**

(CPD4ALL)

School of Pharmacy, Keele University, ST5 5BG

Pre-registration Programme

Dear Colleague,

I am very pleased that you have chosen to undertake your training in the West Midlands and I would like to welcome you to the region.

Your pre-registration year is arguably the most important year in your formal pharmacy education. You are now embarking on a period of training where you will be given the opportunity and experience of applying in practice, perhaps for the first time, the knowledge you have acquired during your undergraduate course. Depending on the University where you completed your Pharmacy degree, you will probably find that some of the topics covered on the Keele study days are not new to you. This is important for reinforcement of your learning so far, and to help you meet the General Pharmaceutical Council's (GPhC) requirements. You will also acquire new skills and knowledge which will develop your competence and increase your confidence in your abilities to fulfil your future professional role.

Although you have chosen to undertake your pre-registration training in hospital, you will find that the programme includes elements relevant to pharmacy practice in the community and in primary care. As well as achieving a satisfactory level of competence in areas of direct relevance to hospital pharmacy, it is important that you appreciate pharmacy in its wider context.

The elements of your pre-reg year that focus on aspects of practice in community pharmacy and primary care contribute to a complete training experience, including any cross-sector training that you participate in during the year. This is important for your future career planning and will be viewed favourably by potential employers.

Please refer to the diary page to identify where each study day will be held. I hope you find the days useful, not only to work through the programme but also to network with fellow pre-registration pharmacy colleagues. We expect you to dress on the study days to reflect the professional image that you would wish to project.

I wish you well in the coming year and urge you to take full advantage of the opportunities that this year offers. Your positive attitude to all aspects of the training will ensure that you reap the rewards of a unique year in your pharmacy career.

Yours sincerely

Mrs Sharon Warren
Regional Pre-registration Facilitator for West Midlands

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Introduction

This handbook should be read in conjunction with the [pre-registration trainee manual](#) produced by the General Pharmaceutical Council (GPhC). This handbook provides you with **essential** information about the study days organised by the Centre for Professional Development and Lifelong Learning (CPD4ALL), School of Pharmacy, Keele University, for pre-registration trainee pharmacists working in hospitals in the West Midlands. Please read the requirements for each day so that you can come prepared. You will be required to complete some reading/tasks before some study days. It is essential that you do this so that you and your colleagues get the most out of the days.

CPD4ALL Website (www.cpd4all.co.uk)

We use the CPD4ALL website to allow you easy access to further resources throughout the year. You will be provided with a username and password for the 'Pre-registration trainee programme resources' area on the website following the first study day.

Study Days

There is approximately one to two study days each month, held at various venues in the West Midlands region. Attendance is compulsory and please note that a register is taken at each study day to allow us to inform your pre-registration tutor of any gaps that may occur in your training. It is your responsibility to ensure that you arrive in plenty of time for the start of each study day. If you are unable to

attend any study day, please inform your pre-registration tutor **and** Linda Foster, the pre-registration administrator at Keele University on 01782 734117. If you are unable to attend a study day it is your responsibility to arrange for a colleague to pick up the relevant handouts for you.

The study days cover various aspects of pharmacy practice which have been chosen in order to help you fulfil the GPhC's performance standards for the pre-registration year. As you know, you are also required to sit an examination at the end of the pre-registration year. The examination and the performance standards cover a wide variety of topics which would be difficult for you to cover at the base hospital, or by means of self-study. Therefore, these study days provide another vehicle to enable you to cover some of the essential elements of the training programme.

The study days normally take the form of short presentations followed by participatory workshops where you have the opportunity to problem solve in small groups. Please bring a current BNF and calculator to every session. Aims and objectives are provided in the handbook for each of the study days. **The relevant GPhC performance standards and the registration assessment framework that the study days encompass are highlighted in italics. Obviously, you are expected to demonstrate performance standard A1.1 ('Behave in a manner consistent with membership of the profession') and B1.2 ('Behave in a polite and helpful manner') at all times.**

Due to reasons beyond our control please note that the content of study days and speakers outlined in this programme may be subject to change without notice.

Refreshments, including a light sandwich lunch (with a vegetarian choice) are provided when the study day is held at the NMC. Please feel free to bring your own refreshments and lunch if you prefer. If you have any special dietary requirements please let Linda Foster, the pre-registration administrator know before the first study day in August. Linda's number is 01782 734117.

Please note that no lunch is provided at the Medicines Information Study day that is held at Keele University in September. There are ample places to purchase lunch on campus or alternatively you can bring your own lunch if you prefer.

Car Parking

There is ample room for car parking adjacent to the NMC Venue.

Pre Study Day Reading

You are expected to read any pre-study day reading material, where indicated. This will either be highlighted in the handbook, available on the CPD4ALL resources area and/or emailed to you. Please note you need to be a member of the Royal Pharmaceutical Society to access the Pharmaceutical Journal. If you are not a member, then it is your responsibility to obtain the article(s). Please ask your local MI centre for further advice.

Case Presentation Day

For the case presentation study day (4th February 2020) you must prepare and present a clinical case based around an intervention that you have made. Your pre-registration tutor will help you identify a suitable case. Further guidance for the case presentation is provided in Appendix 1.

Project

It is a requirement of the performance standards (GPhC competency A4.8) that a pre-registration trainee pharmacist successfully engages in a quality improvement process (this could be achieved, for example, by carrying out a small audit assignment, or completing a PDSA cycle). This project will normally be set and supervised by your pre-registration tutor. You are strongly advised to explore topics with your tutor as early as possible. The principles of quality improvement projects and audit (including the audit cycle) will be discussed on one of your study days.

All students will be expected to present their project, in the form of a poster presentation. This will take place on the final study day on Wednesday 1st July 2020. You must email your poster in *pdf* format to Linda Foster at l.j.foster@keele.ac.uk, no later than Friday 17th April 2020. It is the responsibility of each student to ensure that they seek their own IT support in converting their work into *pdf format* before submitting to Keele. **It is also the responsibility of each student to get their poster printed for the poster presentation day.** Further guidance for the pre-registration audit project is provided in appendix 2.

Diary Page

Study days will be held at various venues around the West Midlands, as stated.

Tuesday 13 th August 2019	-	NMC, West Bromwich Making the Most of Your Pre-registration Year
Wednesday 4 th September 2019	-	NMC, West Bromwich Community Pharmacy Practice
Wednesday 18 th September 2019		Keele University, Staffordshire Medicines Information
Thursday 17 th October 2019		NMC, West Bromwich Audit, Quality Improvement and Presentation of Results/Calculations <i>You should bring your project title along to this study day</i>
Wednesday 20 th November 2019	-	NMC, West Bromwich Clinical Skills for Pharmacy Practice/ Getting a job in the NHS
Thursday 5 th December 2019	-	NMC, West Bromwich Clinical Practice
Thursday 9 th January 2020	-	NMC, West Bromwich Specialist Clinical Practice <i>You should hand in your case presentation title at this study day</i>
Tuesday 4 th February 2020	-	NMC, West Bromwich Case Presentations
Wednesday 6 th May 2020	-	NMC, West Bromwich Practice Pre-registration assessment
Wednesday 1 st July 2020	-	NMC, West Bromwich Audit Poster Presentations

Other Key Dates

Friday 17th April 2020 - posters to be emailed to Keele –
l.j.foster@keele.akeele.ac.uk

Principal Pre-Registration Course Tutor

Mrs Sharon Warren
Regional Pre-registration Facilitator for West Midlands
Centre for Professional Development and Lifelong Learning, School of Pharmacy,
Keele University

s.l.warren@keele.ac.uk

Pre-Registration Course Administrator

Ms Linda Foster
Regional Pre-registration Administrator for West Midlands
Centre for Professional Development and Lifelong Learning, School of Pharmacy,
Keele University

01782 734117
l.j.foster@keele.ac.uk

West Midlands Pre-Registration Pharmacist Advisory Committee

Mrs Sharon Warren
Pre-registration Manager
Centre for Professional Development and Lifelong Learning, School of Pharmacy
Keele University
Staffs
ST5 5BG

Mrs Daxa Knowles
Clinical Pharmacy Programme Manager
School of Pharmacy
Keele University
Staffordshire
ST5 5BG

Mr Dave Millett
Pharmacist Team Manager (Education and Training)
Pharmacy Department
Shrewsbury and Telford Hospital NHS Trust
Mytton Oak Road
Shrewsbury
SY3 8XQ

Ms Gaenor Feelie
Principal Pharmacist Surgical, Critical Care and Women and Children's Services
University Hospitals Birmingham NHS Foundation Trust, Heartlands, Good Hope
and Solihull Hospitals
Pharmacy Department
Bordesley Green East
B9 5SS

Ms Emma Barnes
Lead Pharmacist – Education & Training
Worcestershire Acute Hospitals NHS Trust
Worcestershire Royal Hospital
Charles Hastings Way
Worcester
WR5 1DD

Pre-registration Programme Facilitators

Ms Lisa Gilbert
Pre-registration Training Facilitator
GPhC

Ms Jessica Hall
Learning and Development Manager – Clinical and Professional
Well Pharmacy

Mr David Millet
Senior Pharmacist (Education and Training)
The Shrewsbury and Telford Hospital NHS Trust

Mrs Anne Noott
Teaching Fellow, CPD4ALL, Keele University

Mrs Michaela Probert
Academic Postgraduate Clinical Educator, CPD4ALL, Keele University

Ms Jyoti Saini
Prescribing Advisor and Independent Prescriber at Walsall CCG
Sessional Tutor at Keele University

Dr Robert Saunders
Teaching Fellow, Prescribing, CPD4ALL, Keele University

Mr Alex Sweeney
Clinical Lead Pharmacist
University Hospitals Coventry & Warwickshire NHS Trust

Ms Alison Tennant
Chief Pharmacist
Birmingham Women's and Children's NHS Foundation Trust

Mrs Sharon Warren
Pre-registration Manager, CPD4ALL, Keele University

Study Day One
Tuesday 13th August 2019
NMC, West Bromwich

Making the Most of Your Pre-Reg Year

- | | |
|------------------|---|
| 9.00 – 9.30 am | Registration
Refreshments available |
| 9.30 – 10.15 am | Welcome and introduction to the pre-registration year
<i>Mrs Sharon Warren</i> |
| 10.15 – 10.45 am | Welcome from the Regional Pharmacy
Support Network
<i>Ms Alison Tennant</i> |
| 10.45 – 11.30 pm | Question and Answer Session: GPhC and your pre-reg year
<i>Ms Lisa Gilbert</i> |
| 11.30 – 11.45 pm | Royal Pharmaceutical Society: role of the RPS |
| 11.45 – 12.00 pm | Pharmacist Support |
| 12.00 – 12.15 pm | CPPE |
| 12.15 – 12.30 pm | Pre-registration trainee from 2018/19 |
| 12.30 – 1.30 pm | Lunch |
| 1.30 – 3.15 pm | Gathering evidence for your portfolio to meet the GPhC's
competencies |
| 3.15 – 3.25 pm | Evaluation of the day
<i>Mrs Sharon Warren</i> |

Aims and Learning Outcomes Study Day One

Aims:

- To provide you with the opportunity to get to know the Course Tutors from Keele University, the Regional Pharmacy Support Network and the other pre-registration trainees working in hospital in the West Midlands.
- To provide you with an understanding of how to collect and document evidence for your portfolio (A5.6)
- To encourage you to plan a project at your base hospital (A4.8)
- To provide you with the opportunity to meet representatives from the GPhC, RPS, Pharmacist Support & CPPE

Learning outcomes:

At the end of Study Day One, you should be able to:

1. State what is appropriate 'evidence' for your portfolio
2. Have a clearer understanding of the pre-registration year, what you need to document, and what is expected of you

**Study Day Two
Wednesday 4th September 2019
NMC, West Bromwich**

Community Pharmacy Practice

It is essential that you have completed any pre-study day reading/tasks for this study day

You will need to bring a copy of your BNF

9.00 – 09.15 pm	Registration Refreshments available
09.15 – 04.15pm (inc. Refreshments)	Community Pharmacy Practice Ms Jessica Hall
12.00 – 12.45 pm	Lunch
4.15 – 4.20 pm	Evaluation of the day <i>Mrs Sharon Warren</i>

Aims and Learning Outcomes Study Day Two

Aims:

- To provide you with the opportunity to work through and engage with pharmacy activities related to community pharmacy practice (B1.11, C2.1, C2.8, Registration Assessment Framework 10.2.2, 10.2.4)
- To introduce the concept of ethical decision-making, liability, accountability and professional responsibility (Registration Assessment Framework 10.1)

Learning outcomes:

At the end of Study Day Two, you should be able to:

1. Identify conditions that need referring to another healthcare professional
2. Identify conditions that may be treated by non-prescription medicines
3. Provide appropriate information and advice to patients on OTC medicines
4. Discuss the legal and ethical problems that may be encountered by pharmacists

Study Day Three
Wednesday, 18th September 2019
Dorothy Hodgkinson Building (DH.009), Keele University

Medicines Information

Programme TBC

Aims and Learning Outcomes Study Day Three

Aims:

- To provide an understanding of the practical skills and resources essential to the provision of medicines information (A4.6, A4.7, B1.4, B1.5, B1.11, C2.1, C2.4, C2.11)

**Study Day Four
Thursday 17th October 2019
NMC, West Bromwich**

**Audit, Quality Improvement and Presentation of
Results/Calculations**

It is essential that you have completed any pre-study day reading/tasks for this study day (if applicable). Please bring a calculator and your project title along to this study day.

9.00 – 9.30 am Registration
 Refreshments available

You will be split in to 2 groups for this study day

Group 1

9.30 – 12.00 pm
(inc. Refreshments)

Preparing for your QI/audit project
Mr Alex Sweeney

Group 2

12.45 – 3.15 pm

Group 2

9.30 - 12.00 noon
(inc refreshments)

Calculations
Mrs Sharon Warren

12.45 – 3.15 pm

Group 1

12.00 – 12.45 pm

Lunch

12.45 – 3.15 pm

Groups swap over

3.15 – 3.20 pm

Evaluation of the day
Mrs Sharon Warren

Aims and Learning Outcomes Study Day Four

Aims:

- To encourage you to plan a quality improvement project at your base hospital (A4.8, Registration Assessment Framework 10.2.5)
- To provide you with the opportunity to practice pharmacy calculations (C1.5, Registration Assessment Framework 10.2.3)

Learning outcomes:

At the end of Study Day Four, you should be able to:

1. Demonstrate an understanding of the purpose and process of quality improvement and its application in improving pharmacy practice
2. Carry out a small, planned quality improvement or audit project
3. Accurately perform calculations affecting patient care

Study Day Five
Wednesday 20th November 2019
NMC, West Bromwich

Clinical Skills for Pharmacy Practice/Getting a job in the NHS

It is essential that you have completed any pre-study day reading/tasks for this study day (if applicable)

You will need to bring a copy of the BNF

9.00 – 9.30 am	Registration Refreshments available
9.30 - 11.00 (inc refreshments)	Getting a job in the NHS Mr Dave Millett
11.00 – 12.00 pm	Clinical Skills for Pharmacy Practice <i>Dr Bob Saunders</i> <i>Mrs Jyoti Saini</i>
12.00 – 12.45 pm	Lunch
12.45 – 3.15 pm	Clinical Skills for Pharmacy Practice (Continued) <i>Dr Bob Saunders</i> <i>Mrs Jyoti Saini</i> <i>Mrs Michaela Probert</i> <i>Mrs Anne Noott</i>
3.15 – 3.20 pm	Evaluation of the day <i>Mrs Sharon Warren</i>

Aims and Learning Outcomes Study Day Five

Aims:

- To provide you with a brief overview of pharmacy career pathways within the NHS
- To provide you with an understanding of the recruitment process for pharmacy within the NHS
- To allow you to practice performing patient assessment skills applicable to pharmacists working in Practice (Registration Assessment Framework 10.2.4)

Learning outcomes:

At the end of Study Day Five, you should be able to:

1. Demonstrate common assessments skills used in practice
2. Demonstrate appropriate clinical decisions based upon your findings from patient assessment
3. Describe the recruitment process for pharmacy within the NHS (including job specifications, person specifications, job adverts and interviews)

**Study Day Six
Thursday 5th December 2019
NMC Venue, West Bromwich**

Clinical Practice

It is essential that you have completed any pre-study day reading/tasks for this study day (if applicable).

You will need to bring a copy of the BNF to this study day.

9.00 - 9.15 am	Registration Refreshments available
9.15 – 12.30 pm (inc refreshments at 11.00)	Clinical Pharmacy Cases - workshops <i>Palliative Care, Paediatrics, Cardiovascular</i>
12.30 – 1.15 pm	Lunch
1.15 – 4.15 pm	Clinical Pharmacy Cases – workshops continued <i>Diabetes, Antibiotics, Respiratory</i>
4.15 – 4.20 pm	Evaluation of the day <i>Mrs Sharon Warren</i>

This day will be supported by Pre-registration Tutors from the region

Aims and Learning Outcomes Study Day Six

Aims:

- To develop your clinical medicines optimisation skills

(Performance standards covered in this study day include A2.4, A4.6, A5.3, C2.1, C2.2, C2.3, C2.4 and C2.7. Registration Assessment Framework 10.2.1, 10.2.2, 10.2.3, 10.2.4)

Learning outcomes:

At the end of Study Day Six, you should be able to:

1. Apply your clinical knowledge to real-life patient scenarios
2. Demonstrate problem solving skills when faced with real life patient scenarios

Study Day Seven
Thursday, 9th January 2020
NMC Venue, West Bromwich

Specialist Clinical Practice

It is essential that you have completed any pre-study day reading/tasks for this study day (if applicable).

You will need to bring a copy of the BNF to this study day.

9.00 - 9.15 am	Registration Refreshments available
9.15 - 12.30 pm (inc refreshments)	Clinical Pharmacy Cases - workshops <i>Nutrition, Emergency Medicine, Neonates</i>
12.30 - 1.15 pm	Lunch
1.15 - 4.15 pm	Clinical Pharmacy Cases – workshops continued <i>Oncology, Mental Health, HIV</i>
4.15 - 4.20 pm	Evaluation of the day <i>Mrs Sharon Warren</i>

This day will be supported by Pre-registration Tutors from the region

Aims and Learning Outcomes Study Day Seven

Aim:

- To provide you with a broad understanding of specialist clinical services in the hospital.
- To develop your clinical medicines optimisation skills

(Performance standards covered in this study day include A2.4, A4.6, A5.3, C2.1, C2.2, C2.3, C2.4 and C2.7. Registration Assessment Framework 10.2.1, 10.2.2, 10.2.3, 10.2.4)

Learning outcomes:

At the end of Study Day Seven, you should be able to:

1. Apply your clinical knowledge to real-life patient scenarios
2. Demonstrate problem solving skills when faced with real life patient scenarios

Study Day Eight
Tuesday 4th February 2020
NMC Venue, West Bromwich

Case Presentations

09.00 – 09.30 am	Registration Refreshments available
09.30 – 12.00 am (inc. refreshments)	Case Presentations
12.00 – 1.00 pm	Lunch
1.00 – 3.00 pm	Case Presentations
3.00 – 3.05 pm	Evaluation of study day <i>Mrs Sharon Warren</i>

This day will be supported by Pre-registration Tutors from the region

Aims and Learning Outcomes Study Day Eight

Aim:

- To provide you with a forum to present a clinical case of your choice and to witness case presentations by fellow colleagues (B1.1. C2.1.C2.2, C2.3, C2.7)

Learning outcomes:

At the end of Study Day Eight, you should be able to:

1. Develop a deeper knowledge of the drugs used in a particular disease state
2. Learn the importance of background reading and research, especially current relevant publications and critical appraisal.
3. Develop presentation skills to enable effective communication of clinically orientated information.
4. Develop skills in the selection and extraction of relevant information from case notes.

Study Day Nine
Wednesday 6th May 2020
NMC Venue, West Bromwich
Practice Pre-Registration Assessment

08.30 – 09.00 am	Registration Refreshments available
09.00 – 9.15 am (inc. refreshments)	Introduction to the assessment
9.15-11.15 am	Paper 1 – Calculations
11.15-11.30 am	Refreshments
11.30-12.15 pm	Paper 1 feedback
12.15 –1.15 pm	Lunch
1.15 –3.45 pm	Paper 2
3.45 – 5.15 pm	Paper 2 feedback
5.15 – 5.20 pm	Evaluation of Study Day

Aims and Learning Outcomes Study Day Nine

Aim:

- To provide practice in exam technique and revision support

Learning outcomes:

At the end of Study Day Nine, you should be able to:

1. Outline your strengths and weaknesses as they relate to the GPhC registration exam framework
2. Devise an effective revision programme for yourself

Study Day Ten
Wednesday 1st July 2020
NMC Venue, West Bromwich

Audit Poster Presentations

The day will consist of poster presentations throughout the day.

**Aims and Learning Outcomes
Day Ten**

Aim:

- To provide a forum for presenting your Quality Improvement/Audit Project

MAPS

National Metalforming Centre (NMC), West Bromwich

<https://www.nmcvenue.com/directions>

Keele University, Staffordshire

https://www.keele.ac.uk/media/keeleuniversity/group/kudis/campusmapandguide/Keele_campus_guide_colour.pdf

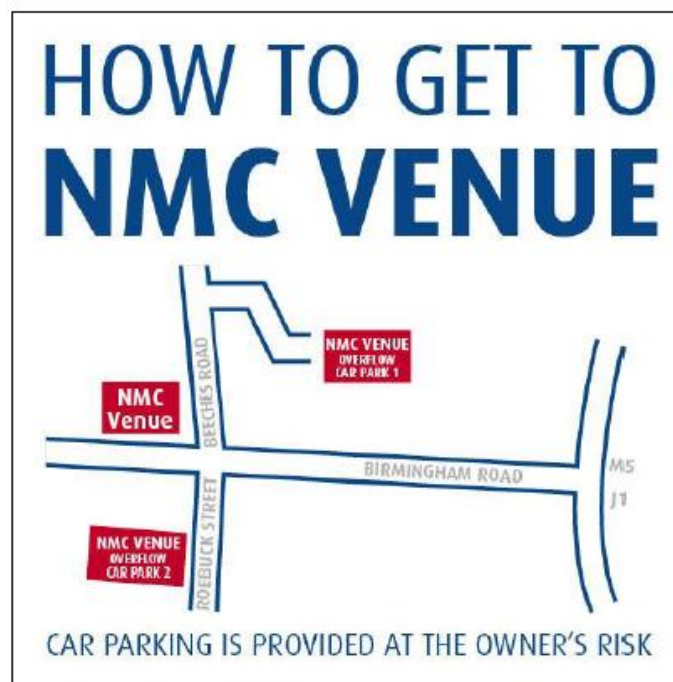
National Metalforming Centre (NMC Venue) car parks

The National Metalforming Centre (NMC Venue) may be quite busy during the day your event is due to take place. If our main car park is full when you and your delegates arrive, we have following arrangements in place for additional, free car parking:

1. The Beeches Road Community Enterprise, 1 Beeches Road, B70 6QE.
This car park is opposite of the NMC Venue and less than a minute walk to the NMC Venue.
2. The Roebuck Street overflow car park, Roebuck Street, West Bromwich, B70 6RB.
This car park is on the opposite side of Birmingham Road and about a minute walk to the NMC Venue.

There is also on street parking available should all car parks be full.

Please note that disabled parking at the NMC Venue.



How to find us: We are on the corner of Birmingham and Beeches Road, the entrance to the building is in Beeches Road. The SatNav users should use the following post code: B70 6QE. Our telephone number is: 0121 601 6350.

Please let your delegates know in advance about the parking facilities.

Appendices

Guidance for Case Presentations

For the case presentation study day you must prepare and present a clinical case based around an intervention that you have made or observed (with the help of your pre-registration tutor or another clinical pharmacist you have worked with) and the intervention should be the focus of your presentation and discussion. You should read the current literature relating to the drug therapy, and use references from scientific publications in your presentation (**see Appendix 3 – for guidance on how to cite references using the Vancouver style**).

During your Case Presentation you should:

- discuss the presentation, symptoms and management of a disease state by relating it to your patient. You should place particular emphasis on the role of drug therapy in such management.
- critically appraise all available drug therapy including side effects, efficacy, patient acceptability and cost; to justify your recommendations. You should support your argument with recent references (i.e. within the last two years) wherever possible, and ensure you discuss the references in detail.
- relate the knowledge gained to the actual treatment of the patient involved in your intervention especially the drugs used and the response to therapy.
- explain any terminology, procedures or tests used.

An understanding of the diagnosis and disease state is necessary, but the majority of your discussion should centre around drug therapy. The following questions may help you in preparing your presentation when considering the drug(s) involved in your intervention:

- Why has this drug been prescribed?
- How does it work?
- What harm can it do?
- What good will it do?
- Is there an alternative?
- What are your recommendations?

There may be no clear cut answer, but it is important to discuss this in your presentation. The case does not have to be a rare or complicated one as long as the drug therapy has been comprehensively discussed.

Oral presentation

It is not necessary to present an in-depth discussion of the disease or pharmacology of the drugs unless something particularly interesting or difficult arose. It is recommended that you distribute handouts on the day of the presentation. Slides should be used to highlight the important points. A laptop and LCD projector will be provided. Please bring your presentation along to the study day on a pen drive/memory stick. Your talk should last approximately ten minutes and should not last longer than fifteen minutes. **It is strongly advised that you discuss your presentation with your pre-reg tutor / another senior clinical pharmacist and present your case presentation at your base hospital prior to the study day as a practice run.**

Checklist of a successful oral presentation.

- Pick out the salient points – emphasise your intervention
- Make use of visual aids – keep them clear and simple
- Make it interesting
- Speak clearly – make sure your audience can hear and understand you
- Stick to the time: your talk should take approximately ten minutes
- Discuss up to date, relevant evidence for drug therapy used and relate this to your patient.

Question and discussion time

Your talk should inspire questions and discussion from the rest of the group. Make sure that your research includes rationale of treatment, alternative treatments available and progress of the patient so that you are ready to answer these questions. Approximately 5 minutes will be allocated for questions.

Feedback for case presentations

A pre-reg tutor will be present during the case presentations who will facilitate the session but will not be providing any individual feedback. Your colleagues will provide you with feedback using the peer assessment form below. You will also have the opportunity to peer review fellow colleagues' presentations, using the feedback form.

GPhC's performance standards

You will be able to meet some of the GPhC's professional standards by completing the case presentation. The pre-reg tutor allocated to your group on the day would be happy to sign a testimonial as evidence.

Clinical Case Presentation - Peer Assessment Form

Part 1: Please indicate how much you agree or disagree with the statements listed below by placing a tick in the appropriate box.				
	Strongly Agree	Agree	Disagree	Strongly disagree
Understanding				
The presentation was clear and easy to understand				
Medical terminology was defined				
Reasons for tests were explained				
Questions were answered clearly and confidently				
Critical Appraisal				
All drug therapy was discussed including alternatives				
The reasons for the students recommendations were clear				
References were discussed and commented on eg size of study, validity				
Intervention				
The intervention was fully discussed				
The intervention was focal to the presentation				
The intervention was appropriate				
The intervention was effective e.g. accepted by medics/nurses/patient				
Presentation Skills				
Visual aids were clear and uncluttered				
Visual aids enhanced the presentation				
The pharmacist spoke clearly and fluently				
The length was OK (10-15mins)				
The presentation was well organised				
Part 2: Please comment below on one aspect of the case presentation that you thought was particularly good and one area that the presenter could improve on.				

Guidelines for the Pre-registration Project

In the West Midlands, all pre-registration pharmacists are encouraged to undertake a quality improvement (QI) or audit project during their training year. Students will derive a number of benefits from this work and will, at the same time, be able to cover some of the performance standards required by the GPhC.

These are general guidelines for your audit or quality improvement project. You will have a presentation and workshop on your project on your study day on 17th October 2019. You will be required to present your QI/audit project as a poster on 1st July 2020. Please note that this poster must be emailed to Linda Foster in PDF format by 17th April 2020. It is your responsibility to seek help from your internal IT department to ensure that your poster is in pdf format 'prior' to emailing to Keele.

In conducting an audit it is essential that you:

- identify accepted standard(s) of care or best practice in relation to the topic of your audit
- compare performance within the hospital where you work against the standard(s)
- identify any changes or improvements that you would make
- produce an implementation plan for the changes or improvements that you have identified

In conducting a quality improvement project you should:

- clearly identify and assess the problem and analyse the causes
- clearly describe the intervention and strategy for change
- explain how you will measure the improvement
- describe the effects of the change
- draw conclusions stating what was learnt from the process and what could have been done differently
- clearly state the next steps

The GPhC performance standard explicitly states PDSA as one tool. The following link provides further information on PDSA cycles:

- [Plan, Do, Study, Act \(PDSA\) cycles and the model for improvement](#)

Further tools are available on the [NHS improvement website](#).

Format for the Poster

The size of the poster board is 2m x 1m, double-sided. You will, however, be given only **HALF of one side of a board**. Therefore, the space allocated to each presenter is 1m (length) and 1m (height). The poster should be A1 size printed in PORTRAIT format. Alternatively, the poster should comprise 8 sheets of A4, including the title of project (but note space restrictions). N.B. If you prefer, the poster may be laminated.

Text should be generated by PowerPoint, Word (or similar), not hand-written.

Poster Format/Layout

- ❑ Title of project
- ❑ Name of presenter and hospital
- ❑ Background / introduction
- ❑ Aim and Objectives
- ❑ Measures (for QIP) or Audit standards (if conducting an audit)

- ❑ Method
- ❑ Results
- ❑ Discussion / conclusions and implications for practice
- ❑ References (up to four) – cited using the Vancouver convention – see Appendix 3 of the Pre-registration Pharmacy Programme Handbook

Keep material brief; only the key points should be given. Additional information may be provided in handouts.

The names and addresses of all authors should be included in any handouts.

The recommended font size is 20-25 point. Titles should be in text not less than 2.5 cm. high. Remember that the poster will need to be read from a distance of 1.5 -2 metres.

Charts and graphs, tables etc. need to be clearly understood and not overburdened with information.

The poster should be contained within the given area. The number of words required will depend on the text size and the number of tables, figures etc.

Materials should be restricted to items that can be mounted on the board plus any handout material.

Posters can be attached to the poster boards with Velcro pads. **You should bring your own Velcro pads.**

Presenters should be in attendance at times specified by the organisers and be prepared to provide information or answer questions on the project.

Recommended reading:

Malson G. Preparing a research poster for a conference. Clinical Pharmacist, April 2015; Vol 7, No 3, online | DOI: 10.1211/CP.2015.20068193 Available from: <http://www.pharmaceutical-journal.com/publications/previous-issues/cp-march-2015/preparing-a-research-poster-for-a-conference/20068193.article> <accessed 18/7/2018>

Although you do not need to submit your final audit report to Keele, it is advisable that you write up your report (up to 3000 words). A suggested format is detailed below.

The presentation should be clearly arranged in a logical sequence of:

- Abstract
- Background and/or introduction, appropriately referenced (see Appendix 3)
- Aim(s), objectives (plus audit standards for audits)
- Method(s)
- Results
- Discussion, appropriately referenced (see Appendix 3)
- Conclusion
- References

Charts and graphs, tables etc need to be clearly understood and not overburdened with information.

GUIDELINES ON HOW TO CITE REFERENCES

For this Postgraduate Programme, we ask you to use the **Vancouver style**, which is used in the British Medical Journal and in the Pharmaceutical Journal.

Indicating references in-text

This is done by placing a citation number in the text. This also applies to references in tables and figures.

- Number references consecutively in the order in which they are first mentioned in the text. Ensure that the same numbers are reused each time that specific reference is cited.
- Use arabic numbers e.g. 1,2
- Identify numbers by either:
 - Superscript e.g. ...fatalities have been reported.¹

OR

- Brackets e.g. ...fatalities have been reported.(1)

Choose any style but be consistent throughout.

- Multiple references are cited:
 - If inclusive numbers; joined by hyphen e.g. (2-5)
 - If non-inclusive: separated by commas e.g. (2,5,8)

Citing sources

Generally you need to cite the following information for books/journals:

- Author(s)'s or editor(s)'s surname with initials of forenames; or the group, body/organisation responsible. List all authors. If more than six authors, list the first 6 and add "et al". If there are no authors listed leave blank or you can use the abbreviation for anonymous i.e. Anon.
- Title of article or chapter. Do not use italics or underlining.
- Name of journal or book. For journals use the universally recognised abbreviated name. A list of abbreviations can be found at <http://www.ncbi.nlm.nih.gov/sites/entrez?db=journals>
- Edition (if applicable). Only if other than first edition.
- Publisher's name (if applicable e.g. for book). Write out in full.
- Place of publication (for book).
- Year of publication
- Volume number (for journal)
- Issue number (for journal). Do not need issue information for journals such as the Pharmaceutical Journal and British Medical Journal, which have continuous page numbering through volume.
- Page numbers

Students are reminded that they should not use any references (e.g. those listed at the end of a paper they have read) without reading and checking the facts in that paper. If this was not done and there was an error in the citation this would be attributed to the student and not to the person who had first cited the article.

Examples of Vancouver style citation

A citation/reference is made by putting together all the details from a source of information in a specified order. The order of the details and punctuation can vary depending on the source of information. Some examples are shown below. Remember to be consistent in your approach.

Journal article

Author's surname Author's initial(s). Title of article. Title of journal (abbreviated) Year of Publication;Volume Number(Issue Number):Page numbers of article.

Note the use of the semi-colon (;) and colon (:) in the above example.

Duffy M, Hughes S. Gout clinical features and diagnosis. Clin Pharm 2012;4:73-6

Current issues in the drug treatment of asthma. MeReC Bulletin 2008;19(2):1-6

Book

Author's surname Author's initial(s). Title of book. Edition (if not first). Place of publication: Publisher's name;Year of publication.

Ashley C, Currie A editors. The renal drug handbook. 3rd ed. Oxon: Radcliffe Publishing Ltd;2008

Khanderia S, exec. ed. British National Formulary. 66th ed. London: BMA & RPS;2013

Chapter in a book

Author's surname Author's initial(s). Title of chapter. In: Editor's surname Editor's initial, editor. Title of the book. Edition (if not first). Place of publication: Publisher's name;Year of publication. p. page number of chapter.

Wynne HA, Edwards C. Laboratory data. In: Walker R, Whittlesea C, editors. Clinical pharmacy and therapeutics. 5th ed. Edinburgh: Churchill Livingstone;2011. p.76-95.

Secondary citation

In the majority of cases, primary sources should be cited. However, occasionally, you may wish to quote a reference that you have read within another author's work. In case such as these you should quote the original source (which the author will have cited)

AND the reference where it was found. For example:

Chapuy MC, Arlot et al. Vitamin D3 and calcium to prevent hip fractures in elderly women. NEJM 1992; 327: 1637-1642. Quoted in: Jerram P. Supplementation with calcium and vitamin D: Isle of Wight PCT strategy. Pharm J 2004;273: PM2

Report

Author's surname Author's initial(s). Title of report. Place of publication: Publisher's name;Year of publication

National Institute for Health and Care Excellence. Rheumatoid arthritis: the management of rheumatoid arthritis in adults. Clinical Guideline 79. London: NICE 2009

Other

Enbrel 50mg solution for injection in pre-filled syringe. Summary of Product Characteristics. Pfizer Ltd;Oct 2013

Journal article on the internet

Author's surname Initials, Author's surname Initials. Title of article. Abbreviated Title of Journal [serial on the Internet]. Year of publication Month day [cited Year Month Day];Volume Number(Issue number):[about number of pages or screens]. Available from: URL

- Only cite month/day if applicable
- Can list **either** pages or screens

Rosendaal FR. Statins and venous thrombosis: a story too good to be true? PloS Med [serial on the Internet]. 2012 Sept 18; [cited 2013 November 25]; 9 (9): [about 5 screens]. Available from: <http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.1001311>

Book/Monograph on the Internet

Imboden B, Hellmann DB, Stone JH. eds. CURRENT diagnosis and treatment: reumatology, 3e [monograph on the internet]. Columbus: McGraw-Hill Global Education Holdings; 2013 [cited 2013 Nov 28]. Available from: <http://accessmedicine.com/resourceTOC.aspx?resourceID=809>

Web site / homepage

Author/Editor/Organisation's name. Title of the page [homepage on the Internet]. Place of publication: Publisher's name; [updated yr month day; cited yr month day]. Available from: (url)

HeartCentreOnline [homepage on the Internet]. Boca Raton, FL: HeartCentreOnline, Inc.; c2000-2004 [updated 2004 May 23; cited 2004 Oct 15]. Available from: <http://www.heartcenteronline.com/>

Web Site/part of a Homepage:

- Add number of screens and title of page

American Medical Association [homepage on the Internet]. Chicago: American Medical Association; c1995-2013 [cited 2013 Nov 28]. Accelerating Change in Medical Education; [about 2 screens]. Available from: <http://www.ama-assn.org/ama/pub/about-ama/strategic-focus/accelerating-change-in-medical-education.page>

Article with a Digital Object Identifier (DOI)

Several journals have started publishing articles electronically before they become available in paper form, for example BMJ Online First and J Clin Endocrinol Metab. When citing these, the entire number should be used as well as the date of publication

Massie J, Castellani C, Grody WW. Carrier screening for cystic fibrosis in the new era of medications that restore CFTR function. Lancet 2013 August 30; [http://dx.doi.org/10.1016/S0140-6736\(13\)61092-2](http://dx.doi.org/10.1016/S0140-6736(13)61092-2)

For students who are studying modules on KLE.

References to messages on KLE:

In your assessments(s) you are required to draw on relevant on-line discussions in your Tutor Group. This is to encourage you to participate actively in your Tutor Group on KLE and gain reward by integrating the discussions into your assessment(s). When you quote from or refer to messages, you should use the following style:

- a) In the assessment report

For example:

In our discussions in Activity 1, Jean Green (M5 JG Activity 1 18 April 2002) made an interesting point about the public's perception of community pharmacies as outlets for health promotion.

i.e. insert the following in parenthesis after the contributor's/author's name: (Module number Tutor's initials Activity number Date of entry of message with the month spelled out)

b) In the reference list, number the reference as usual and type as:
Green, J. M5 JG Activity 1 18 April 2002-06-19

If you are referring to different messages contributed by the same person on one day you should put a, b, c etc after the date to distinguish between the messages.

Reference list and bibliography

A reference list should contain all sources you have directly quoted or paraphrased, listed in numerical order at the end of your written work, but before the appendices.

A bibliography list should contain all sources consulted regardless of whether you used that material directly quoted or paraphrased, listed in alphabetical order by author. The bibliography list should immediately follow the reference list.

Example

References

1. Duffy M, Hughes S. Gout clinical features and diagnosis. Clin Pharm 2012;4:73-6
2. Current issues in the drug treatment of asthma. MeReC Bulletin 2008;19(2):1-6
3. Khanderia S, exec. ed. British National Formulary. 66th ed. London: BMA & RPS;2013

Bibliography

Enbrel 50mg solution for injection in pre-filled syringe. Summary of Product Characteristics. Pfizer Ltd;Oct 2013

National Institute for Health and Care Excellence. Rheumatoid arthritis: the management of rheumatoid arthritis in adults. Clinical Guideline 79. London: NICE 2009

Wynne HA, Edwards C. Laboratory data. In: Walker R, Whittlesea C, editors. Clinical pharmacy and therapeutics. 5th ed. Edinburgh: Churchill Livingstone;2011. p.76-95

This guidance is based on a tutorial that is available at:

<http://www.lib.monash.edu.au/tutorials/citing/index.html>. Further guidance with more examples is provided also on the National Library of Medicine website http://www.nlm.nih.gov/bsd/uniform_requirements.html and <http://www.ncbi.nlm.nih.gov/books/NBK7256/>