This month sees the launch of the Centre for Pharmacy Postgraduate Education hospital pharmacy training programme “Learning at lunch”. This is an initiative designed for hospital pharmacists and registered pharmacy technicians, who will work together in small group settings in their own hospitals, to learn more about particular clinical topics.

“Learning at lunch” is being delivered in collaboration with a number of organisations — the United Kingdom Clinical Pharmacy Association, the Guild of Healthcare Pharmacists and the Association of Pharmacy Technicians UK — and specialist groups. The programme is expected to be rolled out nationally later this month following the success of a number of pilots across England in January.

This article describes the development and design of the “Learning at lunch” programme, focusing on the first module in the first series of topics to be launched. It also reports on the feedback the CPPE has received from the pilots and how pharmacists and pharmacy technicians view the programme.

### Background

In April 2005, the CPPE was allocated funding to support the learning and development needs of hospital pharmacists and pharmacy technicians. To identify their learning needs, a series of three focus group meetings was held in July last year. Data were also collected from the Thames Valley Education and Training Strategy Group and chief pharmacists from the North West and the East Midlands areas. The NHS Education and Development Committee was kept informed of progress.

Although there were mixed responses about pharmacists learning together with technicians, it was recognised that learning in diverse groups would bring benefits in terms of team building and that different staff would bring varying levels of expertise to the situation. Thus, participants in the focus groups thought that practice-based skills and management training might lend themselves more easily to joint training.

### Design

The “Learning at lunch” programme is aimed at supporting the learning and development needs of hospital pharmacists at all levels, from preregistration trainees to specialist and principal pharmacists, as well as registered hospital pharmacy technicians with one or two years’ experience of clinical work and medicines management.

In addition to having a self-learning element, the programme enables participants to work together during a lunchtime session with a facilitator from their own hospital. The ideal number of participants per group was originally thought to be between 15 and 20. However, following feedback from the pilots, the CPPE now recommends that the sessions work better in smaller groups. If the numbers are large, alternatives include having two or more facilitators or running “back to back” sessions over lunch breaks.

Acute NHS trusts in England were contacted by the CPPE to inform them of the new training initiative and to identify a member of staff who would be responsible for both receiving information about the programme and finding a suitable facilitator to run the lunchtime sessions.

### Panel 1: Future “Learning at lunch” topics

The following topics are currently being developed for the “Learning at lunch” programme — the first two of which are expected to be launched later this year:

- Palliative care
- Diabetes
- Mental health (psychosis)
- Public health
- Gastrointestinal disorders

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advise those pharmacy departments or trusts that do not already have facilitators to “join forces with a neighbouring trust that may be holding sessions or maybe a facilitator from another hospital pharmacy department may be willing to host a group session in your department.”

— Learning material

The learning material provided in the programme can be used as an open learning package and is linked to the RCPA’s Continuing Professional Development recording format as well as its competency development criteria. The programme also supports the implementation of the Knowledge and Skills Framework. At this stage in the development of the programme, there are no plans to link it with accreditation for diplomas. However, the CPPE is currently working towards accreditation with the College of Pharmacy Practice.

A number of clinical areas are expected to be covered in the future, many of which will be made up of different modules. The first series is on cardiovascular disease and currently consists of the following short clinical modules:

- Acute coronary syndromes
- Secondary prevention
- Stable angina

The first module in the cardiovascular series, which was piloted in five hospitals in January, is made up of three booklets to help break down the module. An outline of the contents of each booklet appears in Panel 2. Booklets are expected to take approximately one hour each to complete and should ideally be completed in the order in which they present. Booklet 2 forms the lunchtime discussion group session during which participants complete two case studies.

Future topics in the “Learning at lunch” programme are listed in Panel 1. Each series will be accompanied by appropriate training guidelines for facilitators.

— Feedback

So what did participants who attended the pilots think of the initiative?

Facilitator Nicola Turner, surgery and research pharmacist, Wythenshawe Hospital, South Manchester University Hospitals NHS Trust, says that the programme’s “bite-size” method of bringing participants’ knowledge up to a practical level was particularly useful for both recently registered pharmacists and those pharmacists who have an area of specialisation outside the subject area. She says that the module on acute coronary syndrome leaves participants with a working knowledge of the subject to provide them with the confidence and competence in managing the pharmaceutical care of these patients. She says that one participant stated: “The programme has refreshed my understanding of day-to-day practice for management of ST elevation myocardial infarction [STEMI] and non-STEMI.” Another participant found that reading the background material before attending the session helped expand the learning outcomes from the material.

In terms of running the session, Miss Turner comments that “Learning at lunch” is presented in a way that makes the subject easy to deliver for the facilitator, even without specialist knowledge of the subject. “It was useful to bring trust guidelines to the session so that the answers to the cases could reflect what is trust policy and we could see how our guidelines reflect the current evidence,” she says. “The format of the material is flexible and allows the facilitator to deliver “Learning at lunch” in a way that suits the department. I split the participants into groups and used flip charts for the participants to feed their answers back to the group to promote general discussion.”

Chris Jay, principal pharmacist, medicines management, Dudley Group of Hospitals NHS Trust, and chairman of the UKCPA education programme committee, also facilitated one of the pilots. He says that the pharmacists who got involved were enthusiastic about the training package. “It made them reflect on their level of knowledge, motivated them to go away and read more on the subject, answer the multiple choice questions and helped with their CPD.” His pharmacy department already runs lunchtime meetings once a month, and this type of learning is ideal for a lunchtime environment, he says.

Pharmacy technician Vicky Thomas, Royal Cornwall Hospital, attended a pilot of the programme that was held in her hospital and recommends the programme to other hospital pharmacy technicians. “Like me, they may feel it is a little over their heads or not relevant to their job role,” she says. However, she adds that the programme provides an insight into different conditions and the treatments associated with them. “My advice is to give it a go. You will be amazed at how much you can learn in a lunchtime,” she says. “The idea of having mixed grades of staff is excellent as it allowed everyone to ask questions and for those with more knowledge of the subject to answer others’ questions.”

— Improvements

According to Janice Mason-Duff, programme design and support, CPPE, the feedback from participants and facilitators has been invaluable in identifying areas where the programme can be improved. A common concern was the length of the lunchtime session and the pace of delivery. The one-hour lunchtime session was considered to be too short for the two case studies involved. As a result, the case studies are now being reviewed to streamline the discussion points and questions. It was also found that the format worked better in smaller groups with a good skill mix of junior and senior staff.

— National roll-out

National roll-out of the first “Learning at lunch” module is expected to take place at the end of this month. Commenting on the launch and need for the new programme, Christopher Cutts, director of CPPE, says: “The CPPE views the NHS hospital pharmacy workforce as a key target audience and we realise our current learning portfolio may not have appeared to meet their needs. Focus groups with leaders in hospital pharmacy scoping our thoughts and we are keen to support the modernisation of the services offered by the hospital pharmacy workforce through learning opportunities.”

Learning materials are provided free of charge to hospital pharmacists and registered pharmacy technicians providing NHS services in England. The CPPE adds “It will also be possible to download a copy of the learning programme from the CPPE website to study on your own.”

— Panel 2: Acute coronary syndromes module

Booklet 1 Pre-course reading and reflective questions to determine current level of knowledge. Society’s CPD cycle — reflection and planning.

Booklet 2 Small group learning using case studies to facilitate interactive discussion — this is the section of the module that is undertaken during a 50–60 minute lunch break. Society’s CPD cycle — action.

Booklet 3 Multiple choice questions, CPD entry recording and suggestions for practice based activities. Society’s CPD cycle — evaluation.