**What characteristics does someone who is professional demonstrate?**

There are several elements to displaying professional characteristics:

**Personal characteristics**

1. They demonstrate excellent leadership qualities. They demonstrate accountable honest and transparent behaviours, particularly when things go wrong. They are trustworthy and demonstrate integrity and expertise.
2. They have a sound knowledge base and ensure they keep up to date with CPD. This relates to clinical, regulatory and good practice knowledge.
3. They possess excellent communication skills and tailor the message to the patient wherever possible.
4. They are able to positively exploit their experience for the benefit of patients.
5. They maintain a proper relationship with the team in the pharmacy in order to set and maintain boundaries and performance.
6. Their personal beliefs and values reflect a professional ‘way of life’. This applies to personal life outside of work particularly when working and living in the same area; ‘unsavoury’ activities in personal lives can affect the public perception of a professional. The professional is aware of he dangers of using social networking sites and manages their interactions to ensure that posts reflect favourably on their attitudes and behaviour.
7. The professional is smart in appearance and has a confident manner. Time-keeping is important to the professional as this is often viewed as a basic personal standard and poor time-keeping is often viewed negatively.
8. Ensures staff are fully trained and competent to work in the role that they are doing, keep up to date with any significant changes to product licensing (POM's to P's), company policies and fully compliant with all company guidelines and SOP’s.

**Relationships with the patient**

1. Nothing about the patient prevents the pharmacist/technician giving the best possible service (history between them, demographics, attitude or state of mind, etc.)
2. Nothing about the pharmacist/technician prevents them giving the best possible service (what's going on in the dispensary, what may be happening outside work, general mood, etc.). A big part of this is preparation i.e. making sure nothing can interfere (e.g. don't come to work when too ill to work to high standard, learn techniques to prevent stress, leave family problems at the door).
3. They understand the patient’s needs and what a successful outcome is for the patient.
4. They follow up on a patient issue/query if delegated to somebody else or an alternative healthcare provider to ensure that the patient is properly cared for.
5. Respect continues after the patient interaction has finished, as if they were still present (e.g. no gossip, maintaining confidentiality).
6. The pharmacist does not judge lifestyle choices that the patient may have made which may have been detrimental to their health and supports them to improve their lifestyle choices.

**Quality standards**

1. Excellent environmental standards are set and maintained. This is reflected in a clean, tidy, organised working environment which minimises the opportunity for error and maintains a professional appearance.
2. There is a commitment to set, agree and maintain processes and procedures that develop and maintain a safe, yet efficient, service. This requires attention to detail, self-assessment to ensure that expectations are maintained, leadership by example, keenness to be actively involved in new services/initiatives and to develop and enhance practise. The professional has the ability to ‘infuse’ other staff with these standards.
3. They promote a favourable image of the profession to those they come into contact with. In particular, interactions with other healthcare professionals are conducted in an appropriate manner. Where possible information is researched in advance of the interaction to ensure accuracy and relevance. The professional never disparages another professional either in person or as a group.

**What characteristics does someone who is patient-centred demonstrate?**

**Personal Characteristics**

1. They adjust their personal priorities depending on situation (e.g. They prioritise waiting patients over those who are not present in the pharmacy).
2. They demonstrate an understanding and caring nature (a ‘bedside manner’).
3. They ‘go the extra mile’ to provide good quality care (e.g. when you know there is a manufacturing supply problem, instead of sending the patient off to try find it elsewhere they ring around for them or contact the GP with a suitable alternative). They recognise that they have a ‘duty of care’.
4. They seek to remove or overcome any barriers, within regulatory frameworks and accepted good practise, to provide excellent patient care.
5. They are happy to achieve targets and goals but they would also display similar characteristics if these goals were removed.

**Relationships with the patient**

1. They tailor the service to the patients' circumstances wherever possible (e.g. if elderly & frail patient they automatically considers needs for easy-open bottles) and they are non-judgemental.
2. The advice given takes into account the patient's state of mind, family circumstances (if known) and likely level of understanding. In other words they are empathetic.
3. They take care that they don't use jargon or technical language when communicating with patients. This applies equally whether the interaction with patients is via phone, email or face to face. They test the patient’s understanding during the counselling process whenever possible.
4. They listen to the patient and support them in their decision making whether this be with regard to lifestyle choices or medication adherence.
5. The pharmacist considers the whole person and isn’t just focussed on medication but all aspects of the patients life and circumstances.
6. The pharmacist doesn’t just focus on the individual patient but also provides advice and support to carers - so as to enable the best possible care for the patient.

**Quality standards**

1. They need a good knowledge base and have a desire to stay up-to-date. When they learn something new that may be of relevance to patients they take steps to communicate that new knowledge if and when appropriate.

**We would like to hear about situations you have been in or seen, when you think pharmacists and pharmacy technicians have acted professionally or been patient-centred. What went well in those situations?**

**Professional**

1. Pharmacist refused to supply a supervised dose of methadone to a client who was under the influence of alcohol, due to the increased risk of toxicity for the client. The refusal involved a very difficult conversation with the client, but demonstrated a professional approach from the pharmacist and was ultimately in the clients best interest.
2. A patient collapsed in a pharmacy which was adjacent to a GP practice. The pharmacist obtained support from the patient’s GP and asked patients waiting for prescriptions if they were happy to wait outside the pharmacy to ensure privacy of the patient. The pharmacy appropriately managed the needs of the collapsed patient, whilst ensuring patients who required prescriptions were still able to receive them.
3. A pharmacy had a prescription for a medication that was out of stock with their wholesaler, the patient was going on holiday and needed the medication urgently. The pharmacist contacted other pharmacies within the same company and identified that there was no stock available locally. They then contacted a range of pharmacies from different companies nearby, located stock for the patient and returned the prescription to enable them to obtain the appropriate supply.
4. Pharmacist identified that the dose of a CD pain killer for a patient was particularly high. They contacted the nurse prescriber to clarify the dose and the nurse became abusive and aggressive because the pharmacist was questioning the dose. The pharmacist remained calm and worked through the calculation with the nurse which confirmed that the dose 10 times the required dose had been prescribed.

**Patient centred**

1. A patient suffering from side effects from simvastatin and discussed options with the pharmacist who referred them to their GP to identify a suitable alternative. It became apparent that the alternative medication was also causing unwanted side effects. The patient was provided with advice regarding potential risks of stopping the medication and dietary advice to support and improved cholesterol profile by the pharmacist. The patient discussed this further with their GP, stopped the statins, had improved quality of life and when cholesterol level was measured this was found to be under control via diet.
2. Nursing home key worker contacted a pharmacy on a Saturday because their patient had been discharged from hospital and run out of medication. The pharmacist was able to obtain confirmation of discharge medication by fax and made arrangements for the patient to receive a delivery of an Emergency supply of their medication.
3. The pharmacy team were advised by a concerned patient that their partner, who was their carer, ensuring that they took all of their medication correctly was in hospital and would be there for some time. The team discussed the option of the patient receiving their medication in an MDS and explained how to use the tray. The patient was relieved that support was available and was able to continue to live at home and remain compliant with their medication which benefited their health and was also reassuring to their partner.
4. 20 year old patient was concerned about diabetes as her sister was type 1 diabetic. She was concerned she may also be developing diabetes as she had used one of her sisters testing strips and the results had come back high. The pharmacy reassured the patient and as they offered a diabetes screening service offered a blood screening test. The results of the test were explained sensitively to the patient and she was referred to her GP. She was subsequently diagnosed with type 1 diabetes.
5. A patient advised the pharmacy that they were struggling to collect their medication following a recent hip replacement. As the pharmacy offered a delivery service they arranged to deliver the medication.
6. A patient presented in the pharmacy feeling unwell. They had been diagnosed with hypertension and were concerned that their blood pressure was raised. The pharmacy offered a blood pressure screening service, checked the patient’s blood pressure and was able to reassure the patient.
7. A patient presented in the pharmacy and was very confused about their medication as they were struggling to keep track of when medication was due as it was due on lots of different days of the month. The pharmacy offered to synchronise the patient’s medication so that they only had to collect one day a week.

**We would like to hear about situations you have been in or seen, when you do not think that pharmacists or pharmacy technicians have acted professionally or been patient-centred. What do you think could have been done to improve on what you saw?**

1. A pharmacy said that they were unable to dipense a veterinary prescription, “under the cascade” for a customer because they “didn’t dispense veterinary prescriptions”. On attending a different pharmacy the prescription was reviewed and dispensed for the customer who was very grateful.
2. Pharmacist had not completed regular CD balance checks, or ensured that they were completed by a suitably trained member of staff, as per company SOP’s. This resulted in an inability of the pharmacy to be able to identify or track any issues wih balances in the CD register.
3. Patient confidentiality not being adhered to. Pharmacist discussing patient sensitive information over the counter rather than offering the patient the option of speaking in the consultation room where the patients privacy can be ensured.
4. Failure to report / under reporting of dispensing incidents/ near misses to the appropriate bodies.
5. A pharmacist failed to handle a customer complaint in a sensitive and customer focussed manner. Which manifested in the pharmacist shouting and swearing at the patient.

**What are the barriers to pharmacists and pharmacy technicians demonstrating professionalism and being patient-centred?**

1. Excessive red tape (e.g. Contractual rules that don't make sense, SOPs that try to cover every eventuality (which is usually because of other professionals’ unprofessionalism), bureaucracy imposed by NHS and other bodies). Admin tasks and other non-patient centred jobs will always be important but finding a way to overcome these time constraints will allow patients to feel valued and pharmacists/technicians to feel that they are always acting in a professional manner
2. Stock ordering restrictions (e.g. quotas, restricted supply arrangements). This also includes manufacturing issues which appear to have an increasing prevalence.
3. Staff management issues can take a considerable time to deal with when they occur and can easily disrupt a busy, well-run pharmacy.
4. Staffing levels particularly when staff are sick or at peak holiday times.
5. Fear of legal action or some kind of judgement by professional bodies.
6. The demands of other healthcare professionals or the inability to contact them quickly and efficiently when there are queries or concerns can be time consuming. Competing professional agendas between different professions can also affect interactions and take time to resolve.
7. Technology has a major part to play in inefficiencies in the system. Pharmacy systems do not ‘talk’ to the wider NHS and pharmacy does not have read and write access to patient records. A range of new issues have arisen with EPS such that when the spine is lost patients cannot access their medication and this falls on the pharmacy team to resolve and explain. There can be multiple claims processes for local services operating in the same pharmacy to the extent that the complexity of the claims process, and the duplicate entries required, can be off-putting to delivering the service. This links to a need to better implement and communicate new services so that they are properly integrated into day-to-day practise.

**NB**. Information in the media and on the internet makes it more difficult to demonstrate being patient-centred as patients often arrive in the pharmacy with a little knowledge (which may be wrong) and the professional spends excessive amounts of time trying to persuade the patient that their understanding is either incomplete or incorrect.

**What are the enablers to pharmacists and pharmacy technicians demonstrating professionalism and being patient-centred?**

1. Ensuring that there are good, organised, planned and managed working practices (e.g. making sure that medication, particularly MDS, is completed in a timely manner to avoid rushing to complete prescriptions and increasing the risk of error, robust date checking procedures, etc.)
2. Working with colleagues in other pharmacies (e.g. being able to obtain hard-to-get stock from other pharmacies in the same company by emailing around). In addition, having head office/ area manager support and another professional at the end of the phone POM-to-P switches allow pharmacists to be more involved with the care of their patients.
3. Minor Ailment Schemes and other locally commissioned services help pharmacy teams have a more complete understanding of their patients’ needs. Services which involve the use of PGDs also enhance the role and hence professionalism of the pharmacist in the eyes of the patient.
4. Support and guidance from professional bodies and head office. This can help with queries, managing workload and minimising non patient-centered activities.
5. Access to CPD and further training resources allows pharmacists to develop skills and knowledge. This may be from national bodies, supplied by the employer or self-directed learning. Self-declaration of competence using the DoC system should drive professional behaviours and accountability.
6. A consistent message from senior management or a clear company vision that is communicated to all individuals working within the organisation.
7. A clear example of what the best of the best/gold standard looks like and what behaviour you should display to achieve this
8. Feedback when things go well as when as when things can be improved.
9. A clear role for Technicians described nationally and underpinned by a suitable regulatory framework (e.g. under the rebalancing of the supervision regulations).