

SYSTEM-WIDE PHARMACY WORKFORCE PLAN

The Humber and North Yorkshire Pharmacy Workforce Plan builds on the HEE star workshop, and was developed through collaborative local engagement alongside national research. The ambition is for the plan to be a mechanism to drive collaboration and change to ensure the pharmacy workforce feels valued, has access to development opportunities and is supported



- Designated Prescribing Practitioners (DPPs).
- NHS Long-term Workforce Plan (LTWP) Building partnerships to develop a sustainable supply of locally recruited and trained staff.
- **Apprenticeships** Maximise uptake of clinical and non-clinical apprenticeship roles.



RECRUITMENT & RETENTION

 Cross-sector roles Enable staff to move seamlessly between provider organisations.
 Focus on cross-sector roles by working with the <u>HNY Breakthrough group</u> '<u>enabling colleague</u> <u>movement</u>'.



RETENTION

- Support pharmacy teams to ensure their workforce has a sustainable role.
- Improve education and training for the current workforce.
- Pharmacy leaders to continue to engage with the 6 HNY Places (SICBL).





• Promote leadership and development support, ensuring we have utilised existing local, regional, and national resources.



EQUALITY DIVERSITY & INCLUSION (EDI)

• The HNY System-Wide Pharmacy Workforce Group and this plan will closely link with the North East and Yorkshire Regional Inclusive

Pharmacy Practice Group and Manifesto.



WORKFORCE DATA/PLANNING



COMMUNICATION & ENGAGEMENT

- Work with the <u>Breakthrough Programme</u> 'telling the people's story' group to develop a dashboard.
- Support pharmacy teams to take a proactive approach to their workforce planning.
- Work with communication and engagement colleagues to align with and support each others messaging.



Humber and North Yorkshire Integrated Care Partnership System-Wide Pharmacy Workforce Plan

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Theme	Detailed breakdown of actions
Recruitment	 Designated Prescribing Practitioners (DPPs) - In response to the change in regulations <u>Standards and guidance for registered pharmacies General Pharmaceutical Council (pharmacyregulation.org)</u> create a system-wide approach across Humber and North Yorkshire Integrated Care Partnership to Designated Prescribing Practitioners(DPPs) and Independent Prescribers (IPs) to fully utilise the roles, including but not exclusive to: a) Map existing DPPs across HNY and define requirements of future DPPs, to identify groups/individuals to upskill into roles. b) To include consideration of a different delivery model for training such as DPP for trainee group per year. Review the 'Teach and Treat' model deployed in the Southwest region and share it within HNY to consider adoption. c) Consider the wider approach to the DPP role and who can undertake it, exploring the potential for cross-professional training for benefit beyond pharmacy, for example, the inclusion of medics. d) A plan for newly qualified pharmacists, starting their careers, for development/support, to support future students and implementation of rotational placements and to improve retention from 2025/26. e) Investigate technological and digital solutions to support supervision requirements.
Recruitment	 2. NHS Long-term Workforce Plan (LTWP) Building partnerships to develop a sustainable supply of locally recruited and trained staff: a) Work with the ICB People Team to promote HNY as the 'best place to work'. b) Demonstrate the placement/training to employment rates across all professions.



	 c) Collate and review existing recruitment and attraction materials across the organisations in the system. Aim to identify gaps and opportunities for improvement to meet the needs of potential pipelines including the local communities, those studying out of the area and younger generations. d) Develop advanced assistant roles e.g. cleanroom supervisors and dispensary supervisors, Accuracy Checking Technicians (ACTs) and take the opportunity to develop advanced pharmacy technician roles, for example, final release in aseptic, clinical trials, clinical services, antimicrobial stewardship, senior management roles. e) Increase the amount of practice-based research from pharmacists and pharmacy technicians. f) Consider innovative recruitment strategies such as digital outreach or partnerships with educational institutions that might further enhance the effectiveness. g) Building on the <u>HNY Career Hubs</u> to ensure that the wide breadth of pharmacy roles are actively promoted for all. h) Ensure there is a coordinated approach to career events, this includes: connecting to existing career fayres; ensuring pharmacy is incorporated into existing offers and promoted as a career choice. i) Explore the work and funding required to set up a local School of Pharmacy to train future workforce within the area. j) Promote the <u>HNY ambassador programme</u>.
Recruitment	 3. Apprenticeships - Maximise uptake of clinical and non-clinical apprenticeship roles and develop the workforce through maximising the apprenticeship levy by: a) Working with relevant colleagues, e.g. ICB Education and Training team to develop a suite of apprenticeship information that is available via the <u>HNY apprenticeship website</u> to enable implementation, utilising existing intelligence and expertise from across the system and including a list of all apprenticeships available for all roles/posts. b) Promoting the systems recruitment/apprenticeship opportunities to improve pipelines from local areas. c) Including detailed plans on how to measure the success of these apprenticeship programs. d) Exploring how to offer additional support mechanisms for apprentices, such as mentoring or career progression pathways, that could enhance the attractiveness and retention of apprenticeship roles.
Recruitment & Retention	 4. Cross-sector roles: Enable staff to move seamlessly between provider organisations. Focus on cross-sector roles by working with the <u>HNY Breakthrough group</u> 'enabling colleague movement' to: a) Develop standardised Service Level Agreement (SLA)/ Memorandum of Understanding (MoU) and Staff Passports. Making shared and rotational roles much easier, which in turn results in an increase in staff retention as they have a better employment experience. b) Develop system-wide consultant pharmacist posts over the next 12 months (Seek to look at using existing funding for posts from all sectors). c) Collate learning from existing cross-organisational pharmacy roles to consider wider spread within HNY, and create communications and engagement plans to support future implementation.



	 d) Develop clear guidelines on how to overcome potential bureaucratic or administrative hurdles in implementing cross-sector roles. e) Sharing success stories or case studies of existing cross-sector roles can serve as motivational examples and provide practical insights.
Retention	 5. Support pharmacy teams to ensure their workforce has a sustainable role, including but not limited to: a) Fostering a culture of retention with the promotion of coaching and mentoring programmes for all pharmacy staff and ensuring access to health and wellbeing support. b) Create a mechanism to ensure regular support/development/health and wellbeing conversations in place for all staff to improve retention. c) Explore the health and wellbeing needs of staff, collate existing offers, and identify gaps to ensure the range of relevant and appropriate support available to all staff. d) Identify professionals who are considering leaving the profession and support career conversations. e) Develop initiatives that support retention, particularly for those who are considering leaving the system. f) Work with ICB colleagues and Retention Lead to create a system-wide approach to exit interviews to ensure an understanding of reasons for leaving across HNY, and capture trends with analysis to inform our ways of working and processes when reviewed. g) Share good practices and celebrate successes to develop resilience, and offer peer support, within the workforce to support with daily challenges. h) Develop a planned pathway to support colleagues to work at the top of their scope of practice, e.g. <u>Calderdale framework.</u>
Retention	 6. Improve education and training for the current workforce: a) Work with ICB education and training group to ensure all sectors of pharmacy are aware of offers and their work plan. b) Ensure all pharmacy sectors are fully utilising the roles and opportunities shared by NHSE Workforce, Training and Education (WTE). c) Ensure the Primary Care sector is fully utilising support available from the Primary Care Workforce Training hub and explore the potential of them being the knowledge library of training as well as providing support & assistance in accessing the support available. d) Ensure HNY optimally utilises available external resources e.g. CPPE, PrescQIPP, e-learning for healthcare etc. e) Develop a coordinated approach across HNY system to pharmacy technician training to reduce duplication and improve collaboration. f) Ensure there is a greater focus on continuous professional development and protected learning time across pharmacy. g) Explore opportunities to expand the roles of support workers and pharmacy technicians to support service delivery. h) Ensure pharmacy is linked to existing work within organisations across the system around CPD and skills/knowledge/development mapping, ensuring awareness and input from all employing organisations.



	 i) Develop education and communication plans, for all professions/roles, to enable better understanding of the role of pharmacy staff and processes they follow, supporting the management of expectations. j) Create a directory of post-qualification pharmacy career options & the possible paths to attainment, to show the breadth of different opportunities and share this with pharmacy teams. k) Ensure communication is concise i.e. all levels can understand the wording. l) Include detailed plans on how these initiatives will be implemented. m) Include specific metrics to measure the success of these training and education initiatives, to enhance accountability. n) Establish regular review mechanisms for the training programs to ensure they remain relevant and effective. o) Assess and implement a technology and digital programme for pharmacy, consider ensuring information and offers are accessible to all staff at the time it is needed (e.g. use of apps rather than email only). p) Plan for the growth of our pharmacy technician workforce with the new Pre-Registration Trainee Pharmacy Technician (PTPT) qualification and its focus on near-patient clinical care. q) Create a clear pathway for pharmacy technicians from foundation to advanced and specialist practice with managerial, project management, leadership and research skills incorporated.
Retention	 7. Pharmacy leaders to continue to engage with the 6 HNY Places (SICBL) to ensure they: a) Connect and understand local challenges and population needs exploring opportunities and areas for improvement. b) Identify work needed to build better relationships between practices in PCNs and Integrated Neighbourhood Teams, truly incorporating all that pharmacy has to offer to support our population into INTs.
Leadership & Talent Management	 8. Promote leadership and development support, ensuring we have utilised existing local, regional, and national resources: a) Define leadership development opportunities and pathways for both operational and clinical leaders across all sectors. b) Provide detailed examples of leadership development programs and opportunities that would help clarify the initiatives. c) Include ways to measure the effectiveness of leadership and development support programs to enhance their impact d) Addressing potential barriers to accessing leadership development opportunities to ensure a more inclusive approach. e) Define pharmacy technician and support worker leadership that exists currently and scope what will be required in the future to support workforce development. f) Create a system-wide succession/talent plan to develop and retain talent & leadership within HNY. g) Support and enable a proactive approach to identifying and developing 'talented' individuals including working with, and utilising the HNY Breakthrough Programme 'Leadership, Talent and Succession' group. h) Explore ways to ensure ICS 'talent' identification & development frameworks are visible to all areas of the system and the individuals, ensuring all sectors have access to development opportunities to promote the skills/experiential diversity of our future leadership.



	 i) Ensure there is a good understanding of information/offers amongst leaders so that they have the knowledge and skills to support staff, for example, proactively promote talent management <u>NHSE talent management resources</u> to support and develop future leaders earlier in their careers through opportunities e.g. shadowing and supporting leadership work. j) Use education and training opportunities, for example, from CPPE, PrescQIPP, e-learning for healthcare, and Apprenticeship leadership qualifications to upskill pharmacists and pharmacy technicians. k) Promote the NEY Leadership Academy <u>Leadership Learning Zone (LLZ) Modules Catalogue</u> for a range of learning modules on leadership. l) Establishing data sharing across all organisations regarding workforce and 'talent'. m) Explore the introduction of specialist roles within pharmacy – linked to HNY attraction, recruitment, and retention strategy. n) Explore barriers to the development and role extension for staff in all roles to identify challenges and inform communications and engagement plans to support overcoming those barriers.
Equality Diversity and Inclusion (EDI)	 9. The HNY System-Wide Pharmacy Workforce Group and this plan will closely link with the North East and Yorkshire Regional Inclusive Pharmacy Practice Group and Manifesto <insert hyperlink="" ready="" when="">. Ensure we: a) Recognise the relationship between EDI and workforce recruitment, retention and leadership. b) Link with local EDI networks. </insert>
Workforce Data/Planning	 10. Work with the <u>Breakthrough Programme</u> 'telling the people's story' group to develop a dashboard as a mechanism to: a) Improve access to pharmacy workforce data ensuring, as a minimum, availability periodically (working group to provide indicative dates), by role, locality, and place of work. b) Fully understanding current, and future, workforce skills gaps and challenges around recruitment and retention to inform the supply of the future workforce, including training and education placement numbers across sectors and roles. c) Include mapping of pharmacy services and the implications for the workforce to ensure staffing models/approaches are aligned and supporting current service needs. d) Benchmark workforce arrangements between NHS trusts. e) Establish a method to obtain training needs to employment rates across all professions, for example, by use of the 'PharmOutcomes' system, ESR, and/or Model Health System. f) Ensure the data on the dashboard is accurate and updated regularly to be effective.
Workforce Data/Planning	 11. Support pharmacy teams to take a proactive approach to their workforce planning by utilising: a) Vacancy, turnover, sickness rates. b) Map out all pharmacy workforce (including locum and agency staff), to identify strengths and gaps of the current workforce across the system. c) Plan for the growth in required undergraduate placements with the new pharmacy degree structure.



	 d) Map HEIs and other education providers that the system can work with (including Teesside and Coventry University at Scarborough) to ensure relationships are established and to support the recruitment and development of staff in HNY. e) Establishing feedback mechanisms from the workforce can help refine and improve workforce planning efforts.
	12. Work with communication and engagement colleagues to:
	 a) Identify ways to educate patients to support their navigation through the system. b) Ensure information reaches all staff including these working for commercial partners.
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	 c) Collate and share knowledge and examples of different professions/roles (including new roles) and how they work together across the system.
	 d) Create a plan to ensure leads in all sectors/organisations in HNY (including commercial/retail organisations) understand the role of pharmacy and/or HNY system opportunities to be able to share them with staff.
Communication	 Review the <u>HNY Breakthrough Programme</u> and the workforce group membership to ensure sufficient pharmacy representation.
& Engagement	f) Identify lead and/or support staff to work with the pharmacy group to deliver the agreed workforce plan and projects.
	 g) Specific Education Strategies: Providing more details on the specific strategies or methods for educating patients to enhance the clarity of the plan.
	 b) Develop information on the communication channels that will be used to reach all staff, especially those in commercial partnerships.
	 i) Include examples and/or case studies of how knowledge sharing has previously improved outcomes to provide practical insights and motivation.
	 j) Establish a mechanism for regular updates and feedback on the communication and engagement efforts to ensure they remain effective and relevant.