



# HWICS Pharmacy Workforce Strategic Plan 2024-2029

<b>Version No. and date:</b>	2.0 (Nov 24)
<b>Time period covered:</b>	2024- 2029
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<b>Approved by:</b>	Medicines and Pharmacy Board
<b>Dated Approved:</b>	9 <sup>th</sup> May 2024

## **H&W Pharmacy Workforce Strategic Plan**

### **CONTENTS**

#### **1.0 National Context**

#### **2.0 Purpose and Aim**

#### **3.0 Where are we starting from?**

##### **3.1 Workforce Data**

##### **3.2 Training and Development**

##### **3.3 Recruitment and retention**

##### **3.4 Workforce challenges**

##### **3.5 Impact of the Workforce Challenges**

##### **3.6 H&W ICS Academy Structure**

##### **3.7 H&W ICS Pharmacy Faculty**

#### **4.0 Where do we want to be?**

#### **5.0 Theme 1: Workforce Supply and Attraction**

#### **6.0 Theme 2: Recruitment and retention Strategy**

#### **7.0 Theme 3: Upskill and train pharmacy workforce**

#### **8.0 Theme 4: Workforce redesign – New ways of working**

#### **9.0 Theme 5: Communication and Engagement**

#### **10.0 Theme 6: Leadership and Succession**

#### **11.0 Progress so far**

#### **12.0 Proposed timeline for pharmacy workforce strategy to deliver results.**

#### **References**

#### **Appendix One: Workforce Data**

#### **Appendix Two – Health Education England Star Workshop Report**

#### **Appendix Three – Pharmacy Faculty Maturity Matrix progression**

## 1.0 National Context

The NHS Long Term Workforce Plan<sup>1</sup> describes how the public will increasingly rely on clinical care provided by pharmacy professionals across all pharmacy sectors. There is widespread recognition of the increased demands on health and social care services and significant workforce pressures in all sectors. Pharmacists, pharmacy technicians and pharmacy support staff have demonstrated that they are an integral part of the health and social care workforce and have a fundamental role in all sectors across Integrated Care Systems (ICSs).

Over the last two decades, driven by a surge of new innovative treatments, unprecedented demand for health care services, and the COVID-19 pandemic, the expertise of pharmacists and the role of pharmacy technicians has evolved and expanded significantly to deliver clinically focussed person-centred care integrated into multidisciplinary care teams and local systems across primary care, in general practice, in community care and in hospital pharmacy.

This increased demand for pharmacy services and more roles for pharmacy professionals across the integrated health pathway have created vacancies. In March 2021 the pharmacist role was added to the Home Office Shortage Occupation List ([SOL](#))<sup>2</sup>

The 2023 Pharmacy Workforce Wellbeing survey<sup>3</sup> conducted by the Pharmacist Support charity and the Royal Pharmaceutical Society (RPS) found that 60% of respondents had considered leaving their role or the pharmacy profession in the last 12 months and 86% are at high risk of burnout. The top factors for poor mental health and wellbeing are inadequate staffing, lack of work / life balance, lack of protected learning time, lack of colleague / senior support and long working hours.

## 2.0 Purpose and Aim

The purpose of this strategic plan is to describe how the pharmacy workforce in Herefordshire and Worcestershire will be supported to increase retention, recruitment and development over the next 5 years as well as supporting the changes to Pharmacist Foundation Year training.

This pharmacy workforce strategic plan has been developed in partnership with stakeholders for the whole pharmacy workforce across the system, who agreed that given the significant pressures in relation to pharmacy workforce a joined-up approach was needed to address the current and future challenges impacting staff and patient care.

The overarching aim is to increase the retention, attraction, recruitment and development of the pharmacy workforce across Herefordshire & Worcestershire in collaboration, not competition, with NHS and independent sector partners by:

- Accelerating education and training capacity to drive an increase in practising prescribing pharmacists across all pharmacy sectors.
- Supporting an increase in prescribers trained to be Designated Prescribing Practitioners (DPP).
- Establishing new and refined patient pathways where pharmacists are routinely utilising their advanced skills, knowledge, and expertise.
- Developing the wider pharmacy workforce where pharmacy technicians will lead on medicines management processes, working together with pharmacy support staff.
- Exploring opportunities to make Herefordshire and Worcestershire a desirable place to train and work.

## 3.0 Where are we starting from?

The three broad sectors of employment are:

- direct by NHS in a provider trust or Integrated Care Board (ICB)
- by community pharmacy contractor, or
- by general practice contractor

Other sectors include health & justice, academic institutions, and industry.

### **3.1 Workforce Data**

Workforce data is available from the Workforce Intelligence Portal (WIP) for primary care, secondary care and ICBs and is shown in Appendix One.

Community pharmacy data is available from the national workforce survey and is also included in Appendix One.

### **3.2 Training and Development**

#### **3.2.1 Foundation year (FY) trainee pharmacist placements (see data Appendix One)**

- For H&W the number of FY trainee pharmacists for 22-23 was 17. Calculated as trainees per weighted population, this equates to one trainee per 53,401 weighted population which is one of the lowest in the West Midlands where the average is one trainee per 24,970 weighted population. The England average is one trainee pharmacist per 24,308 weighted population.
- 10 of the 17 FY placements in 2022 were in provider trusts with four being cross sector, the remaining seven placements were in community pharmacy.
- Number of trainees were highest for H&W in 2017 when there were 24 but dropped in 2019 to 12 and although rose in 2021, dropped again in 2022 to 17 and H&W is only one of two ICBs in the Midlands where the FY trainee places have dropped in 2022.

#### **3.2.2 Changes to Foundation Year Pharmacist Training and placements**

- From 2025-2026 all placements will need to be advertised and recruited through Oriel, have a Designated Prescribing Practitioner (DPP) and a prescribing learning environment identified.
- From 2026, all placements are required to be cross sector.
- Funding allocations have changed resulting in a large increase for community pharmacy but reduction for Provider Trusts.

#### **3.2.3 Pre-registration Trainee Pharmacy Technicians (PTPTs)**

- PTPT data from NHSE funded places is in Appendix One Section F and shows an increase in placements due to the pharmacy technician workforce expansion programme
- In 2023-24 there were 21 PTPTs (5 in WVT), (7 in *Worcs Acute*) and (1 in *H&CT*) in provider trusts, 3 at Training Hub (*cross sector in primary care.*) and 5 in *Community pharmacy*

### **3.3 Recruitment and retention**

- From WIP, staff turnover rate for pharmacists is quoted as: Wye Valley NHS Trust (WVT) 15.4%, Worcestershire Acute NHS Trust (WAHT) 24.4% and Herefordshire and Worcestershire Health and Care Trust (HWHCT) 29% (Dec 23)
- From WIP, staff turnover rate for pharmacy technicians is quoted as: WVT 10.1% and WAHT 6.4% (Dec 23)
- Local data from NHSE WIP (ESR data) shows we are not meeting local projected workforce targets.
- Vacancy rates are between 20-25% for employed and locum pharmacists from national community pharmacy data (Community Pharmacy Workforce Survey 2022)
- Managed sector vacancy rates are 30% for pharmacists and 22% for pharmacy technicians from combined local acute trust data. (Aug 23)
- Primary care data is in Appendix One Section D and shows that directly employed staff have reduced in number but the staff in Additional Roles Reimbursement (ARRs) roles have increased in the period February 2023 to February 2024.

### **3.4 Workforce challenges**

- A stocktake of current workforce in H&W in 2023 showed that there are significant secondary care workforce shortages and significant recruitment issues. It also showed there are a high proportion of senior staff across all trusts likely to retire within the next five years but for PCN employed staff there are only 3.1% of pharmacists in the 55+ age group.
- The national drive to increase the pharmacy workforce in primary care through the ARR scheme has seen an increase in numbers of pharmacists and pharmacy technicians working in Primary Care Networks (PCNs) whereas in all the other sectors the numbers have remained constant or have decreased. (Appendix One Section D)
- Since the last Pharmaceutical Needs Assessment was undertaken in 2022, the number of community pharmacies in H&W has gone from 122 down to 117. High levels of vacancies across all sectors and unplanned community pharmacy closures, due to the absence of a Responsible Pharmacist, exacerbate the workload pressures for those remaining in the system, with a negative impact on workforce mental health and wellbeing.
- With the changes to the pharmacist Foundation training year and expansion of the clinical roles there are specific challenges:
  - The need to ensure the existing workforce is upskilled to provide sufficient supervisory and designated prescribing practitioner (DPP) capacity to support increasing independent prescribers across all sectors and to train foundation trainee pharmacists to become prescribers on registration having received the appropriate level of supervised practice.
  - For the foundation training year 2025/2026, all trainee pharmacists must be recruited through the National Recruitment Scheme using Oriel. This scheme does not allow employers to select their prospective trainee pharmacist(s), and it is the only route to recruit a trainee pharmacist creating a new process for some Community pharmacy contractors.
  - The total funding at ICS level for 25-26 has increased from previous years but levelling up means a significant reduction in funding for providers and a cost pressure from 2025-2026 of approximately £8-10,000 per trainee. This creates a risk that the number of trainees will reduce at a time when a year-on-year increase is needed to meet projected targets for long term workforce plan.
  - No funding stream available to procure DPP supervision for foundation trainees. Community Pharmacy contractors have the option of using some of the funding available

to foundation training sites hosting a trainee to pay a placement fee to another site to secure DPP supervision adding a minimum cost pressure of £1500 per trainee.

### **3.5 Impact of the Workforce Challenges**

Workforce vacancies across the ICS are creating pressures on medicines related services.

#### **3.5.1 Workforce fragility**

- An insufficient workforce is likely to lead to an inability to meet current and future demand across all pharmacy sectors. This is currently articulated as a risk that sits on the ICB risk register scoring 16.
- Performance will be affected and in provider trusts the reduced ability to dispense is likely to result in decreased patient flow, delayed discharge and increased length of stay. In community pharmacy this leads to a reduction in provision of clinical services as core dispensing has to be prioritised.
- Financial consequences of a reduced workforce include increased medicines waste, increased use of agency staff (where available), inability to implement best use of resources schemes and inability to procure medicines effectively.
- There is a risk to organisational reputation from poor patient experience, adverse impact on league tables, detrimental effect on ability to attract new staff. Provider trusts inability to participate in research if clinical trial participation was halted would also impact medical recruitment.
- Workforce issues in one sector will have an effect for system partners, for example; increased workload for general practice post discharge and pressure on community pharmacy dispensing services.

#### **3.5.2 Adequacy of Aseptic Services at Provider Trusts**

- Potential inability to meet growing demand to deliver chemotherapy and other compounded medicines for patients, including those who require cancer treatment. This is currently articulated as a risk that sits on the ICB risk register scoring 15.

#### **3.5.3 Supervision capacity (DPP)**

- Development of pharmacist Independent Prescribers, including supervision capacity, is critical for two reasons:
  - To support the [Delivery plan for recovering access to primary care](#)<sup>4</sup>, community pharmacists need to train as Independent Prescribers. Currently there is limited supervision capacity in community pharmacy, so support is required from other sectors.
  - All trainee pharmacists require Independent Prescribing supervision from 2025/26, if there is no capacity, H&W will be unable to support training of future pharmacists.

### **3.6 H&W ICS Academy Structure**

The Herefordshire and Worcestershire ICS Academy uses a collaborative approach to develop staff providing a 'one stop shop' for a vast array of training, development, and career opportunities for all staff groups and which are available to everyone across ICS partner organisations.

<https://youtu.be/BV6-lzSX72Y> - Academy video



The **ICS Academy Exchange** is a shared platform accessible to the Herefordshire & Worcestershire Integrated Care System workforce. 'The Exchange' holds a central repository of information, toolkits, learning and training packages and job opportunities with access to system-wide communications and personal development offers all in one place.

The Academy is the Home of the professional and sector faculties including pharmacy, who work collaboratively in groups across the system to determine the learning, development and training requirements of their profession, as well as consider the future needs of their workforce and professional skills.

## ICS Academy Reporting Structure



- Academy Vision:**

The ICS Academy's vision is to establish our integrated workforce development and to encourage people to work in Herefordshire & Worcestershire. It will facilitate us working beyond our organisational & professional boundaries to liberate & maximise on our workforce talent; developing our professional & non-professional groups to build greater capacity and capabilities – improving our system, 'place' and local outcomes in health and social care. To provide increased and enhanced education & upskilling, workforce development, capacity & capability that meets 'system', 'place' and 'local' integrated health & care requirements.

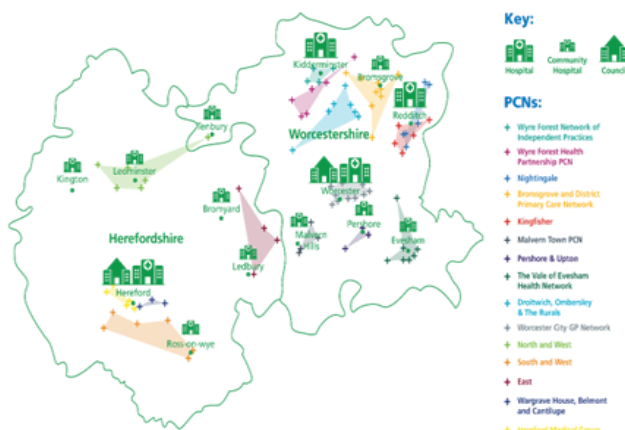


- Academy Values:**

- Working in partnership and collaboration
- Thinking and doing differently
- Striving for education and learning excellence
- Pushing integrated workforce development boundaries
- Providing equality of learning access to all
- Widening participation & opportunity

### 3.7 H&W ICS Pharmacy Faculty

To help achieve the objectives set out in the NHS Long-Term Plan (NHSE, 2019) and the People Plan (NHSE, 2020), Health Education England (HEE) Midlands invested in the development of Pharmacy Faculties in each Integrated Care System (ICS). A Pharmacy workforce faculty for Herefordshire and Worcestershire (H&W) was established in September 2022 and consists of multiple providers of Pharmacy Services from all sectors that formally work together across Herefordshire and Worcestershire ICS to develop initiatives to increase the attraction, recruitment, retention and development of the pharmacy workforce across the system.



The partners listed below are members of the H&W ICS Pharmacy faculty:

- H&W Health and care trust
- Worcestershire Acute Hospitals Trust
- Wye Valley Trust
- Primary Care Networks (PCNs) via Pharmacy Ambassadors
- H&W Training Hub
- H&W Integrated Care Board
- Community pharmacy (CP HW) Herefordshire and Worcestershire
- HEI – University of Worcester

These partners provide services covering Secondary Care, Primary Care, Mental Health Services, Community Services, independent organisation, and education and training providers.

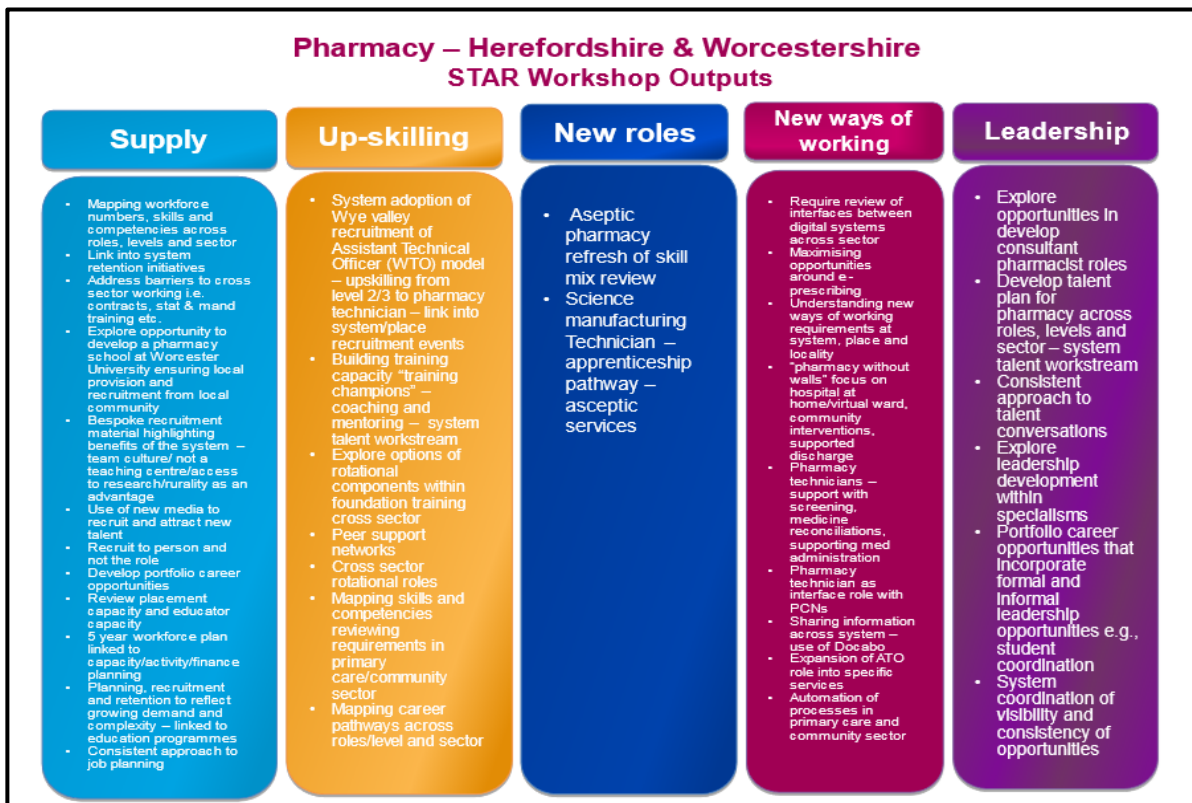
The H&W ICS Pharmacy Faculty also feeds into the Midlands Regional Pharmacy Faculty which is there to assist in linking best practice between ICS' and as a point of escalation for local issues to NHSE WT&E.



## 4.0 Where do we want to be?

### 4.1 Star Workshop June 23 to identify workforce plan

A face-to-face H&W system wide scoping Star workshop was facilitated by NHSE Workforce Training and Education (WTE) in June 23. The purpose of the workshop was to identify themes and outputs which would contribute to the H&W Pharmacy Workforce Strategic Plan. The outputs are shown in the table below:



Priorities from June 2023 assigned by Pharmacy faculty from Star Workshop report (*see Appendix 2*) with delivery supported by Pharmacy Workforce Lead.

The ambitions for the pharmacy workforce are listed below under six thematic domains, shaped by the stakeholder engagement and the STAR workshop.

## 5.0 Theme 1: Workforce Supply and Attraction

**Attract new & grow your own pharmacy workforce at all levels across all sectors**

*How will we achieve this?*

### 5.1 Understand the current workforce.

- Use a data driven approach to understand the demographics, diversity, distribution and attrition of the pharmacy workforce across the ICS.
- Project future demand to meet ICS workforce needs and meet the Long-Term Workforce Plan (LTWP) targets.

### 5.2 Promote Pharmacy as a career -Schools and colleges engagement

- Use innovative approaches to attract new pharmacy workforce including ‘growing our own’, to increase the number of applicants within the ICS.

- Build a network of Pharmacy “attraction leads” with resource packs for attraction and recruitment, able to represent all sectors and all pharmacy roles at careers events
- Implement initiatives to attract younger people to pharmacy careers e.g. developing taster opportunities targeting school leavers, apprenticeships.
- Increased number of clinical and summer placements for students across all sectors.
- Increase the number of apprenticeship opportunities to include non-pharmacy apprenticeships e.g. management, advanced clinical practice, health care science.

### **5.3 University engagement – Undergraduate placements, summer schemes**

- Student Pharmacists - Invest in undergraduate summer placement program (finance approved) to improve future recruitment.
- Introduce cross sector placements for all foundation training placements.
- Build pharmacy trainee capacity across all sectors & roles by exploring increased placement quality & increasing quantity of training places.
- More organisations being responsive to providing pharmacy undergraduate placements will influence future graduates to come to H&W.

### **5.4 Promote Pharmacy careers profile**

- Update image of pharmacy careers and promote H&W ICS as an excellent place to work.
- Develop the profile of pharmacy professionals across the ICS (registered and non-registered pharmacy staff)
- Support pharmacy staff working across sectors e.g. travel options.
- Create Portfolio career options across acute, community pharmacy, primary care and other settings.

## **6.0 Theme 2: Recruitment and Retention Strategy**

**To recruit, train, value and retain a highly skilled workforce to meet the needs of our patients**

***How will we achieve this?***

### **6.1 Recruitment**

- Update image of pharmacy careers and promote H&W ICS as an excellent place to work.
- Review of all JDs & adverts (if appropriate) to include recruitment and retention incentives, relocation expenses, funded diploma and independent prescribing course.
- Improve remuneration offers to attract new pharmacy staff.
- Develop options for second careers in pharmacy – future apprenticeship model.
- Grow associate pharmacy roles through career pathways.
- International recruitment
- ICS Academy social media platforms to promote vacancies and secondment opportunities.

### **6.2 Retention**

- Develop retention initiatives to retain our pharmacy workforce – e.g. flexible working agreements.
- Introduce early career coaching conversations and develop system level support.
- Develop system mentoring arrangements.
- Encourage Leadership development opportunities.

- Encourage continuous professional development, expanding the boundaries of clinical practice, ensuring roles stay interesting and challenging e.g. IP, DPP
- Encourage continuous professional development into post-registration – using '[HEE Newly Qualified Pathway E-portfolio](#)'
- Where the opportunity arises, offer secondment/ job shadowing opportunities to support career development into other sectors.

### **6.3 Career progression Pathways**

- Systems support clear career development pathways that are attractive to staff within and outside the region.
- Develop advanced specialist and advanced generalist roles for pharmacists and pharmacy technicians.
- Create Portfolio roles and remove barriers to working across sectors with different employers (digital passport)

## **7.0 Theme 3: Upskill and train pharmacy workforce**

### **Modernise approach to education & training delivery**

#### ***How will we achieve this?***

- System-wide investment in workforce training and development infrastructure to grow the numbers of trainers & mentors.
- Pre- and post-registration training for pharmacy staff members is targeted to meet the workforce needs of the system.
- Trainee pharmacists and pre-registration trainee pharmacy technicians will receive multi-sector training across primary care, secondary care and community pharmacy to ensure they have a rounded view of healthcare delivery and their potential career paths.

### **7.1 Apprenticeships (PTPTs)**

- Continue to maximise the opportunities the apprenticeship levy can offer to upskill our own staff.

### **7.2 Undergraduate Placements and Training**

- Innovate clinical placements to improve trainee experience and attract to H&W
- Regularly use feedback to improve placement experiences.

### **7.3 Foundation training**

There is an urgent need for pharmacy workforce and services to be transformed due to future professional changes expected 2025/26 when pharmacy undergraduate students will graduate as qualified Independent Prescribers (IP).

- Build capacity for Designated Prescribing Pharmacists and Designated Supervisors
- Include multidisciplinary Training offer in placement – e.g. Simulation.
- Educational institutes to support future proposals (Worcester University)

### **7.4 Post registration pathways and Independent prescribing training (legacy staff)**

- Demonstrate advancing levels of post-registration practice using RPS frameworks ([credentialing](#)) and pathway progression from Foundation to Core Advanced to Consultant level <sup>5</sup>
- Increased number of Community Pharmacists enrolled onto IP courses to attain IP qualification across the two counties being supported by DPP/DMPs from a variety of sectors e.g. urgent care centres; practice/ PCN based/ community pharmacy based settings.
- Maximise the use of pharmacists as prescribers in new and existing NHS services to transform patient pathways, and services to ease NHS pressures.
- Support legacy (non-prescribing) pharmacists with IP status to utilise their prescribing skills more effectively.
- Supporting IP pharmacists to use their prescribing in practice and include IP Pharmacist integration and training as a priority to creating future DPP capacity.

### **7.5 Pharmacy technicians**

- Promote the role of pharmacy technicians across the wider healthcare system.
- Promote the different routes of entry and develop a clear career pathway
- Increased number of Accredited Checking Technicians (ACTs) utilising their qualification in community pharmacy settings.
- Utilise Level 4 and Level 5 pharmacy courses to upskill pharmacy technicians in clinical roles or ILM/NHS leadership academy courses to upskill in management roles.
- Horizon scanning future changes to legislation and subsequent workforce requirements eg PGDs and Supervision for Pharmacy Technicians

### **7.6 Non registered staff (ATO, Pharmacy Assistants)**

- Develop and promote career pathways for all job roles in all sectors eg ATO to pharmacy technician
- Support pharmacy non registered staff development into the pharmacy technician workforce.
- Promote the role of pharmacy assistants, ATOs across the wider healthcare system to ensure understanding of the roles in different sectors.

## **8.0 Theme 4: Workforce redesign – New ways of working**

### **Seamless workforce models: Expand at scale and pace cross sector & rotational pharmacy roles, Aseptic Pharmacy Skill mix**

#### ***How will we achieve this?***

- Develop a flexible workforce that can work as part of a multidisciplinary team across all care settings.
- Pharmacy technicians and pharmacy support staff working in patient-facing roles delivering better, safer and more cost-effective care will:
  - reduce medicines wastage
  - support and implement changes to improve patient and medication safety
  - support medicines optimisation
- Systems use cross-sectoral rotational posts in order to share staffing risks, support pharmacy team members that can work in portfolio roles across-sectors and create attractive positions that bring staff into the region and retain them within the region.

- Develop agreed principles for new ways of working at system, place and locality – using '[Shared workforce model for pharmacists: optional guidance for employer](#)'
- Review & adapt pharmacy services to improve skill mix and release capacity to innovate the role of registrants.
- Use e-rostering to its maximal functionality – using '[E-job planning for pharmacists and pharmacy technicians: A good practice guide](#)'
- Agree career pathways/frameworks to take an individual from student to advanced / consultant level practice.
- Better integration of community pharmacy into the primary care team working collaboratively to support the wider NHS.
- Pilot new services in community pharmacies e.g. IP Pathfinder Sites, Pharmacy First; Pharmacy Connect model which is an approach to pharmacists working better together across different sectors supporting each other efficiently in the day to day work portfolio but also developmentally.

## 9.0 Theme 5: Communication and Engagement

**Digital integration and improved communication to underpin workforce transformation.**

***How will we achieve this?***

### 9.1 Digital

- Scope the current and future digital and technology advances that will impact pharmacy services over the next 5 years.
- Review and align interfaces between digital systems across sectors.
- Maximise opportunities for e-prescribing.
- Automation of processes in secondary care and community pharmacy
- Explore and utilise simulation as a tool for education and training

### 9.2 Stakeholder Engagement (Communication strategy)

- Publicity – promotion of pharmacy, establishing & promoting the Faculty and H&W using different platforms e.g. webinars, podcasts, conference submissions.
- Make best use of available digital technology to integrate our profession, improve communication and support our population – Pharmacy connect platform, ICS Academy, Future NHS Platform
- Collate and present information on the roles within current pharmacy teams in all sectors, to demonstrate our value to patients and healthcare colleagues and to expand others' understanding of 'pharmacy'
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## 10.0 Theme 6: Leadership and Succession

**Build a psychologically safe and inclusive culture through our leadership approach**

***How will we achieve this?***

### 10.1 Inclusion and belonging (Professional Support and Wellbeing)

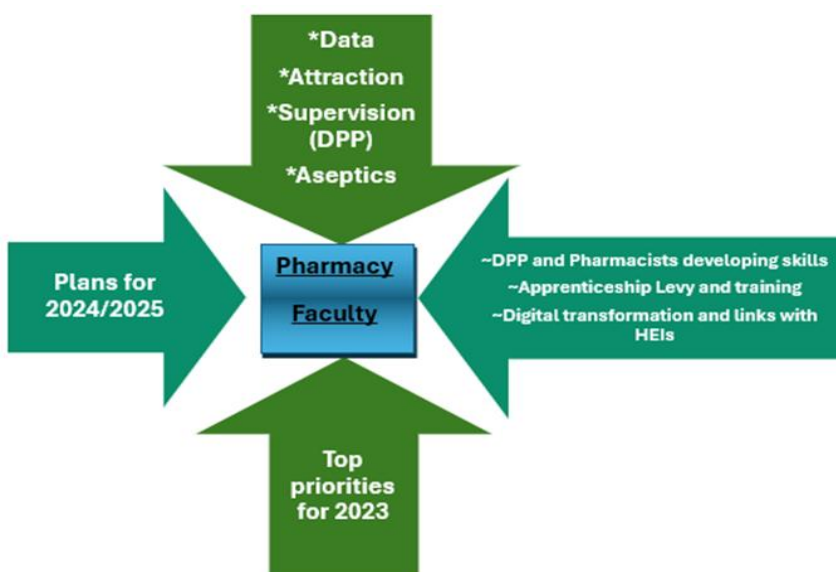
- Adopt Midlands charter principles and support ICS pharmacy inclusion champion to promote inclusive pharmacy practice.

- Utilise our pharmacy networks (pharmacy inclusion champion) to better understand the lived experience of our workforce with respect to inclusivity and diversity.
- Build a psychologically safe and inclusive culture through our leadership approach - leaders are more visible, compassionate, and inclusive.
- Developing a positive and inclusive culture supporting retention, developing our current pharmacy workforce, and attracting new staff
- Undertake widening participation initiatives to ensure a diverse and inclusive pharmacy technician and pharmacy support staff workforce.
- Improve morale and culture within department by making staff feel valued (listen, learn, act)
- Support individuals and their teams to have a strong voice with a shared sense of pride, purpose and belonging.
- Ensure physical and psychological health is supported by quality and timely Occupational Health and Wellbeing services.
- Personal and professional development for all, to maximise potential; regardless of background all staff will have the same opportunities to succeed and fulfil their potential.

## 10.2 Leadership

- Through the development of portfolio career opportunities, incorporate formal and informal leadership opportunities.
- Develop talent plan for pharmacy across roles, levels and sector – integration into system talent workstream.
- Develop leadership development opportunities within specific specialisms.
- System coordination of visibility and consistency of leadership development opportunities
- Create opportunities to offer delivery of Mary Seacole programme locally by supporting the development of local programme facilitators who will be trained and supported by a member of the national Academy mobilisation team.
- Plan effective succession planning to maintain and maximise skill mix.

## 11.0 Progress so far





## 12.0 Proposed timeline for pharmacy workforce strategic Plan to deliver results.

### Key focus areas:

**Understand the current workforce.**

**Attract new & grow your own pharmacy workforce**

**To recruit, train, value and retain a highly skilled workforce**

**Modernise approach to education & training delivery.**

**Seamless workforce models: cross sector & rotational pharmacy roles. Aseptic Skill mix**

**Digital integration and improved communication**

**Build a psychologically safe and inclusive culture through leadership and talent management.**

### Priorities for 2024 to 2025

Agree senior ownership of H&W Pharmacy Workforce Strategic Plan

Pharmacy Faculty Workforce Lead to develop implementation plan

Continue Workforce Data collection and analysis

Collaborative approach to attract and grow new pharmacy staff.

Determine current Supervision (DPP) capacity and DPP register

Aseptics services staff skill mix and estates review.

Foundation training mandatory multisector placements 26/27.

Communication strategy across sectors – Changes to IETP reform

Expand Pharmacy Connect Test and Treat Model for community pharmacists to attain IP to further DPP/DMP host settings

Investigate Pharmacist international recruitment

Continue to upskill our pharmacy workforce obtaining relevant skills e.g. IP, DPP, credentialing.

### 2025 to 2026

Increase the opportunities for DPP support within HW system partners (IPs using prescribing qualification and upskilling with DPP training courses)

Optimise Apprenticeship levy and training opportunities.

Digital transformation and links with HEIs - Simulation and VR Technology for training

Established retention initiatives to support Pharmacy workforce.

Increased number of clinical and summer placements across all sectors.

Foreign trained pharmacy staff supported at induction and skills effectively utilised to support service delivery.

Increase the number of Community Pharmacists receiving support for IP training through Pharmacy Connect model

Develop pilots and secure funding to test these locally (DPP supervision and simulation)

### 2027 and beyond

Grow pharmacy training capacity to deliver regulatory changes required for development of the pharmacy workforce and to provide a sustainable future pipeline.

Sufficient capacity built for Designated Supervisors/ DPP

The benefits of multi-sector and portfolio roles to service users and the workforce are well accepted.

Clear career development pathways established for pharmacists, pharmacy technicians and pharmacy support roles.

Electronic Prescribing systems and single Electronic Patient Records fully implemented in all pharmacy settings

Horizon scanning future changes to legislation and updating workforce requirements.

Refresh this Strategic Plan in 2027, informed by enhanced understanding of our barriers and opportunities.

## References

1. NHS Long Term Workforce Plan <https://www.england.nhs.uk/publication/nhs-long-term-workforce-plan/>
2. *The Pharmaceutical Journal*, PJ, April 2021, Vol 306, No 7948;306
3. Pharmacy Workforce and Wellbeing Survey 2023  
[Workforce and Wellbeing Survey 2023-007.pdf \(rpharms.com\)](#)
4. [NHS England » Delivery plan for recovering access to primary care](#)
5. <https://www.rpharms.com/development/credentialing>

## Appendix One: Workforce Data

### A. Pharmacist Data

Secondary care pharmacist workforce data/info from NHSE WIP in December 2023 (Quarterly Trend from 2018-2023)



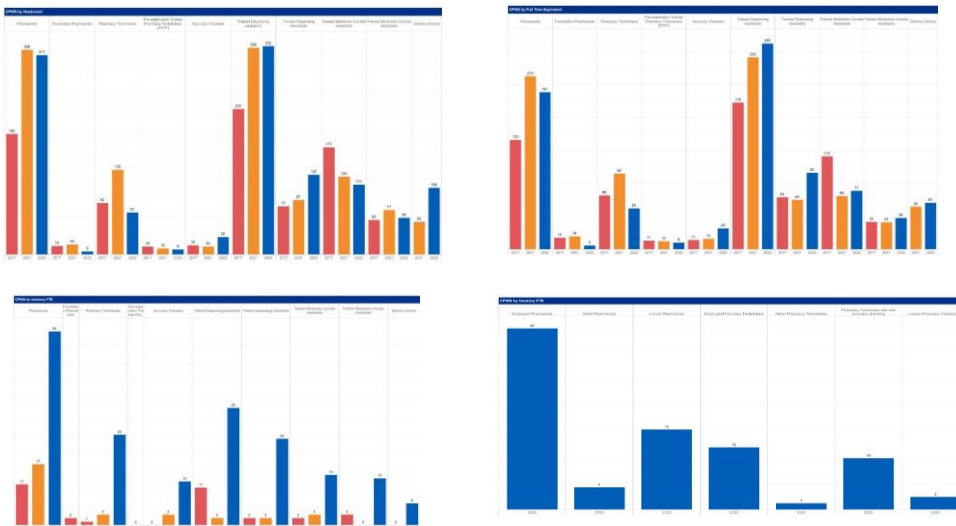
**B. Pharmacy Technician data**

Secondary care pharmacy technician workforce data/info from NHSE WIP in December 2023 (Quarterly Trend from 2018-2023)



**C. Community pharmacy Workforce survey**

Community Pharmacy workforce - ICB



#### D. General Practice Data (Training Hub)

General Practice Staff	Employed direct at practice :-	Employed by PCNs to work in practices :- (ARRS)
	Feb 23 → Feb 24	Feb 23 → Feb 24
Advanced pharmacy practitioner	3 → 4	8 → 10
Pharmacists	56 → 52	54 → 73
Pharmacy technicians	4 → 4	28 → 37

#### E. Foundation Year Placement data



ICS%20FT%20Place  
ments%20Trends%2

#### F. Pre-registration trainee pharmacy technician (PTPTs) NHSE Data (funded places)

Site	Programme	2022/23 current 2 <sup>nd</sup> year trainees	2023/24 current 1 <sup>st</sup> year trainees	Expected new trainees for 2024/25- waiting to send out confirmation letters
Hereford and Worcestershire Health and Care Trust	Regional commissioned	0	1	1
Knights Pharmacy	PT Workforce Expansion Programme	0	5	N/A
Taurus (H&W Training Hub)	PT Workforce Expansion Programme	0	3	N/A
Worcestershire (inc Redditch)	Regional commissioned	3	7	8
Wye Valley	Regional commissioned	3	5	5

## **G. Workforce datasets – 1.ESR managed sector, 2. General Practice 3 Ethnicity data**



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## **Appendix Two – Health Education England Star Workshop Report**



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## **Appendix Three – Pharmacy Faculty Maturity Matrix progression**



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