

## Case Study 15: Primary Care Pharmacist



### Jill

Jill is a 49-year-old pharmacist who lives with her husband and two of her three children in a rural area. Her current role is divided between being a practice pharmacist/dispenser for a local GP-dispensing doctor's surgery and acting as a senior medicines management pharmacist for the local PCT. She has been with the dispensing doctor's surgery for over ten years now and very much enjoys her role there. She started in the PCT just under five years ago and is finding keeping up with the ever-changing responsibilities extremely challenging.

Prior to joining the dispensing doctors, Jill's career took her outside pharmacy altogether when she was working for the local council, training playgroup leaders and acting as a school governor.

Her CPD entry arose when one of the GPs she works for as a practice support pharmacist asked her for advice about the prophylactic use of aspirin for patients with cardiovascular disease. This type of question was routine in her role. Her research would not only go to help the one patient that the doctor was initially enquiring for, but would then go on to influence the local practice policy on aspirin prescribing.

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### Record Sheets

#### reflection

**Name of entry:** Aspirin dose in cardiovascular disease **Date Identified:** 22/03/2004

**What do you want to learn to be able to do?**

Make recommendations about dosage of aspirin for patients with cardiovascular disease. Learn what the local guidance is.

**How have you identified this learning objective?**

Request from GP for guidance, in my role as practice support pharmacist.

**What methods did you use to identify this objective?**

Choose...

Feedback from users of services/products  
Talking to colleagues/peers/peer review

**Who is driving this?**

Bottom up: users of your services/products

**What skills, knowledge, attitudes and behaviours will you need to develop?**

Choose...

Knowledge of aspirin policy. Influencing skills

**To which areas of competence does this learning objective relate?**

Choose...

Using expert knowledge and skills to benefit patients

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### planning

**Urgency:** By when will you need to meet this learning objective?

30/6/2004

**Importance:** What will be the impact of your learning on you, users of your services, colleagues and organisations to whom you are contracted?

Impact on you:

1 2 3 4 5  
      
 Low

Impact on the users of your services/products:

1 2 3 4 5  
      
 Low

Impact on colleagues:

1 2 3 4 5  
      
 Low

Impact on organisation

1 2 3 4 5  
      
 Low

**What activities could you undertake to meet this objective?**

Description	Action Category	Advantages/Disadvantages	Selected
Attend meeting run by local cardiologist.	Meetings	Local but may not be timely	<input checked="" type="checkbox"/>
Read relevant articles	Structured reading	Not local. Time consuming	<input checked="" type="checkbox"/>
Contact local medicines information department	Information Service	Local	<input type="checkbox"/>

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action

Description	Date completed	Time taken	Add to CE record
Attend meeting run by local cardiologist.	23/6/2004	1h 0mins	<input checked="" type="checkbox"/>
Read relevant articles	30/4/2004	2h 0mins	<input checked="" type="checkbox"/>

**What have you learnt as a result?**

Recommended dose is 75mg dispersible aspirin daily. However, local cardiologists recommend leaving a patient on their current dose and form unless there is an identified clinical need to change.

evaluation

**Has your learning objective been met?**

Fully

Partly

Not at all

**Please describe an example of how you have applied what you have learnt**

GPs have been informed at a practice meeting of the local advice. Patients have been left on current medication.

**Please describe any feedback you have had from those on whom your learning was to have an impact or those who have been able to observe your performance**

Thanked by GPs for doing the research

Mark entry as completed

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### Reflection

Jill had already undertaken a series of similar CPD entries relating to responding to GP requests for information. She was able to specify what she wanted to be able to do (make recommendations) and what she needed to learn in order to be able to do it (establish local guidance).

### Planning

When planning her CPD, Jill had under-estimated the potential impact of her learning. She had scored the impact to everyone as being low. She felt that this was a routine enquiry and although she knew it was her job to undertake the learning, she didn't feel that it would be of any significant value.

It is easy to fall into the trap of feeling that routine learning is not significant and that CPD is all about learning totally new and challenging things. This is not always the case and retrospectively Jill could see that her learning had potentially major impacts. She was then able to re-word the importance of her impact as:

By finding out the local guidance:

- I will be able to perform my role as a practice pharmacist,
- The GP will prescribe aspirin for his patient appropriately thereby reducing his/her risk of cardiovascular disease whilst minimising side-effects,
- I shall be able to inform my practice and PCT colleagues of any changes in local guidance thereby possibly affecting prescribing in the other practices in the PCT area and
- If there are patients who should be prescribed aspirin and are not, any guidance produced following this learning may increase the numbers of patients benefiting from the cardiovascular effects of aspirin therefore helping the organisation achieve its goals.

### Action

Jill was able to find out the information she needed by reading current relevant articles and going to a meeting where the local hospital cardiologist was able to answer her direct question.

## Evaluation

Jill was able to pass on the information that she had accessed directly to the GP. During her evaluation of her CPD cycle she also asked herself who else may benefit from her learning. She decided to pass on the information to the practice meeting so all the GPs would be aware. She also told all the practice pharmacists that worked for the PCT so that they would also benefit and be up-to-date. They could have used this information to start a CPD entry at action if they had wanted.

## Summary

This may seem like a simple entry but it does show how easily a CPD entry may be completed. It also shows how your learning can easily be shared with others.

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## Remember

- **Don't under-estimate the impact of your learning just because it's routine.**
- **In your Plan & Record entry, always think through and describe the impact of your learning to all groups concerned. This will help you prioritise your CPD needs.**
- **During evaluation ask yourself "Who else may benefit from my learning?" Passing on information may change somebody else's practice and may provide you with some feedback.**