

Get revalidation ready at CPC April 27-28!

- ✓ Obtain your CPD records
- ✓ Find your peer
- ✓ Plan your reflective account

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The conference programme is now live!

- ✓ 164 sessions
- ✓ 150 speakers
- ✓ 103 hours of educational content

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# THE Clinical Pharmacy CONGRESS

The Home of Clinical Pharmacy  
April 27th - 28th 2018 ExCel London  
pharmacycongress.co.uk

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2018 WINTER EDITION

# 2018: GETTING THE RIGHT SIDE OF THE PRESCRIPTION

2017 was an interesting year, but one thing became clear – pharmacy professionals have to get on the right side of the prescription.

Hospital pharmacy transformation was initiated by Lord Carter of Coles. He asked that hospitals transformed so that their pharmacists and technicians could spend more time on clinical services than on infrastructure services. That is not to say that the procurement and distribution of medicines is not important, but he felt that the available resource could be better directed to reduce variation and improve outcomes. Reactive ward pharmacy is being replaced by proactive medicines reconciliation and discharge management. More pharmacists are taking on specialist roles with independent prescriber status, managing patients and writing prescriptions. More consultants feel that their team is not complete without a pharmacist.

Listen to Rahul Singal, Associate Director of Pharmacy – Operational Productivity, King’s College Hospital NHS Foundation Trust and Gareth Adams, Programme Manager, HPTP Collaborative in Manchester at 11am on Friday 27th at CPC in the Strategy and Policy Forum for examples across London and Manchester and how collaboration across STPs can help reduce variation.

Over £100m of investment was committed to support an extra 1,500 clinical pharmacists to work in general practice by 2020/21 following the publication of The General Practice Forward View.

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## The Training Pathway with CPPE

The Centre for Pharmacy Postgraduate Education (CPPE), provides the training pathway for all pharmacists employed in NHS England phase 1 and phase 2 bid sites. We have created a programme that is flexible to meet the needs of these pharmacists and will ensure they are fully equipped in their key general practice team roles. We work with GP deans to ensure a multidisciplinary approach, and engage with patients and the public in our programme development.

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# 2017

# 2018



## GPhC to Introduce Revalidation in March 2018

GPhC will introduce revalidation for pharmacy professionals from 30 March 2018, after their governing council approved the framework for revalidation and agreed the timetable for its implementation. This decision means that

all pharmacists and pharmacy technicians in Great Britain will have to demonstrate that they are regularly reflecting on their learning and practice and keeping up to date.

Once revalidation has been fully implemented, pharmacy professionals will have to complete and submit four CPD records, a record of a peer discussion and a record of a reflective account every year. They will be asked to explain in each record how what they have done has benefited

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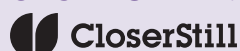
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# 2018: Getting the right side of the prescription

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The programme is well under way and pharmacists are entering General Practice to support the delivery of the GP contract. These pharmacists will have enhanced diagnostic skills, independent prescriber qualifications and will support the delivery of acute and long term condition services. The Clinical Pharmacy Congress has launched two new features for General Practice professionals in conjunction with PCPA, CPPE and PDA - see page 4 for more details. They will see patients, make diagnoses and prescribe treatment. GPs now value practice pharmacists as part of their team. You can hear from all the RMOs Pharmacy Leads (Richard Seal, Professor David Webb, Steve Brown and Michele Cossey) in the Keynote Theatre on Friday at 4:30pm.

As CCGs and STPs develop into Accountable Care Systems and Accountable Care Organisations the role of the pharmacist will change. The ACS will have a greater role in population health and service development. Medicines are a common element across patient pathways and their value and place needs to continue to be defined. Pharmacists will pay more attention to driving consistency as a mechanism to reduce variation. Time spent auditing medicine use will be replaced by time spent ensuring the most appropriate medicines are used in the first place. This will require greater focus on medicines optimisation understanding both the required population based outcome and the patient experience. RMOs will support standardisation and reduce variation.

Community Pharmacy has to adopt new business models to shift from a post-prescription role to a pre-prescription role. The effect of 2017 has demonstrated that there is little profit in dispensing medicines and little will to pay for advice. To deliver the new business model, pharmacy staff have to be freed from the dispensing role and directed to revenue earning clinical services. Pharmacists must be able to better diagnose conditions, use state of the art diagnostics and have greater access to medicines through PGDs or independent prescribing status. The pharmacy team must develop new ways of integrating with their local community, understanding their needs and delivering services.

Pharmacists everywhere must look at how medicines are selected and used. We need to think about medicines and addiction, medicines in the community services and the self-selection of medicines to support self-care. We need to think about stopping medicines and not prescribing medicines in the first place as much as starting them.

We have to tackle compliance and waste in the system, acknowledging that after the prescription is written is usually too late. Compliance is part of behaviour and behaviour is driven by cognition. If we don't try to understand what people think, we have no chance to change behaviour and will not improve compliance, reduce waste and improve outcomes.

2017 was called the year of the clinical pharmacist/technician. In 2018 we have to push hard to get on the right side of the prescription.

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# The Training Pathway with CPPE

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Phase 1 education has piloted the 18 month education pathway approach delivering clinical, leadership, consultation skills, clinical assessment skills and practical skills training to be successful in a GP clinical pharmacist role. Clinical pharmacists and senior clinical pharmacists are supported by a CPPE education supervisor, a clinical mentor (local GP or primary care pharmacist) and GP clinical supervisor. Additional support for clinical pharmacists is available from senior clinical pharmacists to support role development and integration in the multidisciplinary team. [Hear from some of these senior pharmacists in the new General Practice Pharmacy stream located in the heart of the exhibition floor.](#)

Personal education supervision has been welcomed and valued by GP clinical pharmacists.

“ Very good course - excellent opportunities to enhance skills and network with a great crowd, boosted my confidence to work in a GP practice. ”

Pharmacist on phase 1 pathway

“ My ES deserves a medal ... motivation and support at the right time in the right way ... and always with positivity and openness. ”

“ My CPPE Education Supervisor, has been the best support I have had on the pilot. She has always been there at the initial stages when it was difficult for me to figure out my role/responsibilities in the MDT and she helped me to settle in. ”

Clinical pharmacists complete workbased assessments during their pathway education including case based discussions, patient satisfaction questionnaire reflection, multisource feedback professional discussion, clinical assessment and procedural skills assessment, safeguarding children and vulnerable adults and consultation skills assessments.

The final statement of progression provides a credentialing statement that all of these assessments have been passed. The statement of progression also details personal evidence of the pharmacist's role, engagement with pathway learning and additional achievements.

The phase 1 pathway offers local clinical learning groups and regional study day events led by GPs, clinical demonstrators and experts. In September 2017 we were delighted to bring together all 450 clinical pharmacists in four regional events to hear from patients, clinical mentors and local leaders. Clinical pharmacists showcased the varied work they have achieved in general practice including medicines leadership, improvement work and how they have developed their patient facing role.



Visit us at stand L10 to receive the latest updates on the training pathway.

To receive the latest updates in clinical pharmacy join us 27-28 April 2018 at London ExCeL.

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# GPhC to Introduce Revalidation in March 2018

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people using pharmacy services, to make sure improving the care people receive is at the heart of the process.

GPhC Chair Nigel Clarke said: "Revalidation is a significant step-change for pharmacists and pharmacy technicians and I am delighted that the Council has given the go-ahead to implement this important process. We believe that the introduction of revalidation will further assure users of pharmacy services that pharmacy professionals will provide them with safe and effective care throughout their careers."

We have been working towards this goal alongside a range of groups, professionals, employers and patients for a number of years to make sure we can collectively bring revalidation forward in a robust and evidence based way. Going forward we will continue to work collaboratively with these groups as we make revalidation a reality."

In response to feedback received through the consultation, the Council has agreed to take a number of actions to further improve the framework for revalidation and to support pharmacists and pharmacy technicians to meet the new requirements.

These include strengthening guidance within the revalidation framework, and producing new guidance and supporting information to further explain some parts of the process, including peer discussion and the reflective account. The final framework is expected to be published in the coming weeks.

At the meeting, Council members emphasised the GPhC's commitment to and importance of continuing to work collaboratively with other pharmacy organisations throughout implementation, including on how they can support registrants to locate appropriate peers and engage with the process in the most meaningful way.

## What happens next?

All registrants will receive tailored information and guidance from February 2018 onwards to explain what they will need to do and when.

The following overall timetable for implementation has been agreed by the Council:

1. A new online portal will be made available to registrants to record their revalidation records from March 2018.
2. In 2018, the first group of registrants with a registration expiry date of 31 December 2018 will be asked to submit four CPD records when renewing their registration.
3. In 2019, the first group of registrants with a registration expiry date of 31 December 2019 will be asked to submit their full six records for revalidation (four CPD records, a record of a peer discussion record and a reflective account) when renewing their registration.

**TURN TO PAGE 7 TO SEE THE REVALIDATION FACT SHEET**

**To receive the latest information on the new revalidation framework, come see us present at CPC 2018 and visit us on stand D62.**

**Get revalidation ready at CPC!**

Join us at CPC 2018 where you can find everything you need to meet your revalidation requirements:

- ✓ CPD records. We have a variation of topics to cover your planned and unplanned records. Brush up on previous knowledge and enhance your skills across our 11 conference theatres and workshops.
- ✓ Find your peer. We look forward to welcoming the clinical pharmacy community this coming April where you can engage with a great mix of pharmacy professionals from all different backgrounds to organise your peer-to-peer discussion.
- ✓ Plan your reflective record with the information you have obtained throughout the two most important days of the pharmacy calendar.

## Parliament Approves Legislation on Inadvertent Dispensing Errors

Legislation to introduce a new defence for inadvertent dispensing errors has been approved by Parliament. The UK-wide measure will introduce new defences for criminal offences relating to inadvertent preparation or dispensing errors by registered pharmacy professionals.

The change in the law is designed to increase patient safety by reducing the fear of criminal prosecution and encourage a more open culture of error reporting and learning from mistakes.

Health minister Steve Brine told the House of Commons: "This marks an important step forward in addressing barriers to providing a safer, higher quality service."

He explained that strict regulation of pharmacy professionals in relation to dispensing errors had hindered reporting of errors and accidents and learning from mistakes: "By removing the fear factor of a strict liability offence for inadvertent dispensing errors, our aim is to create a much more open and transparent culture, which in turn should help to improve learning and prevent mistakes from happening in the first place."

Mr Brine said a number of initiatives to support reporting and learning had already been introduced, including medication safety officers or champions, and national reporting systems. Pharmacy regulatory and professional bodies had drawn up standards and guidance to support the desired culture change, and community pharmacy trade bodies were encouraging pharmacy teams to follow those standards, report errors and share learning.

Labour MP Julie Cooper, said the change in the law was a step in the right

direction, but did not go far enough. She called for further legislation to totally decriminalise inadvertent errors.

She warned that despite the improved defences pharmacists could still face a police investigation, a lengthy trial and even prosecution under other provisions of the 1968 Medicines Act. "It remains a fact that pharmacy professionals are one of the few health professional groups to face criminal conviction and potential imprisonment, for an inadvertent dispensing error.... The prosecution of pharmacists and dispensing technicians is very rare, but it does occur, so pharmacy professionals always have that fear hanging over them."

The National Pharmacy Association, Pharmaceutical Services Negotiating Committee, Royal Pharmaceutical Society and patient groups have all welcomed the proposed changes.

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## Receive the latest clinical updates at CPC 2018.

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- ✓ 103 hours of educational content delivered by 150 leading sector experts
- ✓ A buzzing exhibition floor with 150 leading sector suppliers
- ✓ Unparalleled networking opportunities with peers, colleagues and old friends





# Conference Theatres and Workshops

## Keynote Theatre

The main Congress theatre will host a range of prominent government and clinical sessions delivered by influential speakers in the pharmacy profession.



## Leadership Theatre

Hear from the leaders in clinical pharmacy who will be presenting sessions designed to enhance your personal development, clinical knowledge and leadership skills to help you propel your team forward.

## General Practice Pharmacy Live!

This new live case feature is designed by and aimed at general practice pharmacy professionals. Visit stand L37 to enhance your engagement skills in a patient facing role.

\*Patients may be played by actors.

In partnership with:



New for 2018

## Medicines Optimisation Workshops

This interactive theatre invites speakers and delegates to engage with each other in an interactive learning format, focusing on patient safety, sustainability and integration.



## Clinical Theatre

Packed with hot topics that effect your role on an everyday basis, this theatre will cover everything from sepsis to headaches, from diabetes to antimicrobial resistance.

In partnership with:



## Clinical Leadership Theatre

This theatre will play an essential part of your Congress experience and is key for those looking to develop their career and take a step further in their clinical role.



## Changing Careers Theatre

An incredibly popular part of The Congress, this theatre will feature your pharmacy peers who will be presenting and sharing their experiences and will showcase alternative career pathways.



## Strategy and Policy Forum


This theatre allows you to meet with the current leaders and policy makers to find out how the latest policy changes may affect you.

Sponsored by: 



## Technology Forum

Explore and understand the latest innovative technology in these sessions delivered by NHS Digital and other pharmacy professionals who are implementing exceptional patient care through the use of technology.

In partnership with: 



## Clinical Pharmaceutics Theatre

This theatre will deliver content relevant for technical pharmacy professionals covering aseptics, production, procurement and homecare. Hear from Pharmacy Technicians helping to make life easier in their departments.



## General Practice Pharmacy Workshops

This theatre will provide you with the latest developments in general practice and primary care clinical pharmacy.

Content delivered in partnership with:



New for 2018

## Practical Skills Zone

This area provides hands on training which features innovative technology such as automatic drug recognition, enabling you to update and enhance your current skill set. Delivered in conjunction with CPPE, Keele, Sunderland and Portsmouth Universities.



**View the full programme on page 8.**  
**Our world class conference programme will provide 164 sessions to ensure you're revalidation ready for 2018.**

# #SaferPharmacies Charter

Visit the PDA at stand H10 and at the General Practice Pharmacy Theatre to receive the latest updates in primary care.

The PDA members have produced a charter of seven commitments to improve safety and care for patients through better working conditions in UK pharmacy practice. This charter defines basic standards to ensure safe practice wherever pharmacists work.

PDA believe that keeping patients safe is key to the role of every pharmacist. But that sub-optimal working conditions in pharmacies not only risk harm to patients, they can lead to intolerable pressure upon the mental health of pharmacists who are forced to contemplate having to take short cuts due to a lack of resources to work with.

The Pharmacists' Defence Association (PDA) is a not-for-profit organisation and trade union which aims to act upon and support the needs of individual pharmacists and, when necessary, defend their reputations. The PDA is the only organisation in UK pharmacy that exclusively looks after the interests of employee and locum pharmacists across all sectors of pharmacy, and currently has more than 27,000 members.

At The Clinical Pharmacy Congress you'll be able to hear from a number of PDA speakers about issues on which they are working, including the #saferpharmacies charter.

Protecting Patients

## A Safer Pharmacies Charter

### PURPOSE

Keeping patients safe is key to the role of every pharmacist. But less than safe working conditions risk harm to patients as well as damaging consequences for pharmacists – such as impacting on their physical or mental health. This charter defines basic standards to ensure safe practice wherever pharmacists work.

These commitments must be standard practice whenever and wherever pharmacy work is carried out.

### OBJECTIVES

Improved safety and care for patients, through better working conditions in UK pharmacy practice.



### COMMITMENTS

#### 1. NO SELF-CHECKING

Where pharmacists are directly involved in dispensing, or other processes requiring a high degree of accuracy, a suitably trained and competent member of staff will be readily available in the pharmacy at all times to provide an independent accuracy check.

An independent second check improves patient safety by preventing errors.

#### 2. SAFE STAFFING

Staffing levels will be sufficient to allow all legal, contractual and regulatory obligations to be met; to meet the workload involved in following standard operating procedures and to carry out other work in accordance with the organisation's expectations. All staff must be suitably trained and competent to carry out the pharmacy work they are involved in.

Providing enough suitably trained staff improves patient safety, quality of care and service.

#### 3. ACCESS TO A PHARMACIST

A pharmacist is traditionally one of the few healthcare professionals accessible to patients without an appointment. A pharmacist must be available wherever patients expect immediate access to face-to-face expert advice on any medicines-related matters. The pharmacy owner or employer will meet this expectation by ensuring a pharmacist is available to patients and present in the pharmacy throughout its hours of operation.

Pharmacists are the experts in medicines and must be present to ensure that medicines provided to patients are safe and appropriate.



#### 4. ADEQUATE REST

Pharmacists must be able to take at least their statutory and contractual breaks and rest periods, and additional breaks as required to meet their professional obligations. Pharmacists will be enabled to take these without interruption and will not be placed under any direct or indirect pressure to forfeit.

To keep patients safe, pharmacists must be alert at work.

#### 5. RESPECT FOR PROFESSIONAL JUDGEMENT

Pharmacists will be enabled and encouraged to exercise professional decision-making in the workplace, so that patient safety and professional standards can be placed above any commercial or other operational considerations. Organisational and other targets must not inhibit professional autonomy.

As health professionals, pharmacists put patients' health first.

#### 6. RAISING CONCERNS

Pharmacists will be able to raise concerns without reprisal or fear. This will be facilitated by a supportive, open and receptive organisational culture. Issues identified will be promptly addressed and robust and enduring solutions implemented without delay.

Concerns at work which could impact on patient safety need to be raised and resolved without delay.

#### 7. PHYSICALLY SAFE

Pharmacists will not have to work in the pharmacy alone and will have access to the necessary support at all times to perform their roles. Risks will be assessed and preventive measures put in place so that patients and staff are safe – and can feel safe. A zero-tolerance approach will be taken to violence or abuse of pharmacists and other pharmacy staff.

Pharmacies need to be safe places for patients, pharmacists and everyone.

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# Key Developments in Clinical Practice: 2017

Pharmacy professionals were faced with several significant developments in practice during 2017, including new drug launches, guidance that was updated or newly published by NICE and other organisations, as well as a range of patient safety issues.

## Some of the major items of interest included:

- The MHRA issued a safety update for canagliflozin, saying there was an increased risk of lower limb amputations (mainly toes)
- Pharmacists should ask patients who are prescribed medication to reduce fracture risk about adverse effects and treatment adherence
- Dopamine agonists, levodopa or MAO-B inhibitors should be offered in early stage Parkinson's disease if motor symptoms are not impacting quality of life (or levodopa if they are)
- NICE has called for more people to seek advice from pharmacies on self-care measures to manage self-limiting infections
- Patients at risk of anaphylaxis are now recommended to carry two auto-injectors at all times
- Oral isotretinoin can cause sexual dysfunction, notably erectile dysfunction and decreased libido
- The retinal disorder, central serous chorioretinopathy, has been linked to topical as well as systemic corticosteroid use
- Healthcare professionals were urged to report suspected adverse reactions to illicit drugs, particularly 'legal highs'

According to NICE, pharmacists should discuss treatment priorities and goals with patients on

medications for long-term conditions, consider if treatments could be stopped or altered to reduce the burden of medicine-taking, and record relevant details in their individualised management plans, which should state who is responsible for co-ordinating care.

In diabetes, selective sodium-glucose co-transporter 2 (SGLT-2) inhibitors dominated the news when the MHRA issued a safety update for canagliflozin, saying that treatment increased the risk of lower limb amputations and highlighted the importance of preventive footcare for all patients with diabetes.

Although there is no evidence of an increased risk with dapagliflozin and empagliflozin, the MHRA pointed to limited data and said that the risk could be a class effect.

NICE pulled together recent additions to the evidence base on safer insulin prescribing in a key therapeutic topic document. This reminds clinicians to ensure people on insulin are aware of the symptoms and management of hypoglycaemia, are provided with "sick day" rules, relevant patient information and an insulin passport, and know to notify the DVLA if they drive.

NICE also highlighted the recent influx of new insulin products, including high-strength, fixed combination and biosimilars, reminding clinicians to be aware of the differences in composition and usage.

In a different therapeutic area, arming patients with advice on the usually benign nature of lower back pain, the high probability of a rapid improvement in symptoms and the importance of returning to normal activities such as work and physical activity as soon as possible helps support self-management of the condition, NICE said.

A quality statement on the topic also stated that sufferers should not be given paracetamol, opioids, spinal injections, anticonvulsants or antidepressants to treat lower back pain without sciatica unless other indications are present.

A full version of this article appeared in the December 2017 edition of *Pharmacy Magazine*. <http://www.pharmacycongress.co.uk/>

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Cleanroomshop.com offers a range of sterile garments for aseptic pharmacy production, including hooded coveralls, gloves, protective eyewear and facemasks - as well as advanced cleaning & disinfection products with unrivalled technical data.

With upfront pricing, real time stock information and next day delivery on consumables, Cleanroomshop.com aims to improve purchasing efficiency. It also offers flexible payment options to suit any ordering process - Cleanroomshop.com automatically approve the majority

of NHS trusts for credit account facilities and also accept credit cards and PayPal.

Its dedicated customer service team adds value to clients as they offer specialist product knowledge and also run a YouTube channel with end user product demonstrations.

Cleanroomshop.com is a division of Connect 2 Cleanrooms, who provide classified controlled environments to world-leading organisations and also offer Cleanroom Training for those organisations looking to improve operator compliance.

Cleanroomshop is a specialist supplier and distributor to pharmacies, offering consumables and accessories where protection of mission critical environments is invaluable.

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# HIVPA - Improving Personal and Professional Development, for the Benefit of Patients, Pharmacists and Technicians

The HIV Pharmacy Association (HIVPA) was established in the UK in 1991 with the aim of promoting excellence in the pharmaceutical care of people living with HIV. HIVPA delivers high quality education, support and networking opportunities to pharmacists and pharmacy technicians, facilitating professional and personal development for the benefit of people living with HIV.

HIVPA is committed to providing a broad range of learning opportunities accessible to members and non-members in the UK, Ireland and internationally:-

HIVPA is The Royal Pharmaceutical Society's (RPS) recognised HIV education provider and affiliated partner, and we work closely together to promote the Foundation and Faculty frameworks and have worked collaboratively to develop the Knowledge and Information Tool (KIT) that is associated with both frameworks.

Opportunities for learning include an annual two-day Conference, four Study Days per year in London, regional Study Day events and online learning modules (eHIVe).

Our next conference will be held in Manchester in June 2018, the HIVPA Conference Team have produced the first release conference programme which can be found on our website at [www.HIVPA.org](http://www.HIVPA.org). Conference is a great place for networking as well as being educational and informative. There are a wide variety of topics on offer, with some very experienced speakers that will cater for all of our delegates.

2018 study day topics will include our annual "Introduction to HIV" study day in addition to:

- Managing pregnancy, adolescents, contraception and menopause in HIV
- HIV cure research and advanced pharmacy practice in HIV
- Updates to national treatment guidelines

HIVPA is the primary source of professional expertise in HIV pharmacy; working with the British HIV Association (BHIVA), the RPS, NHS and third sector organisations.

HIVPA's involvement at a national level includes:-

- Delivering education and training to a wide range of pharmacy colleagues and other healthcare professional colleagues at The Clinical Pharmacy Congress
- Representation on the NHS England HIV Clinical Reference Group and HIV Drugs Sub-group
- Representation on relevant British HIV Association (BHIVA) working groups, e.g. national treatment guidelines and national standards of care
- Working with other professional HIV associations
- Peer review of patient information produced by national HIV charities



This year we are excited to be delivering two presentations at The Clinical Pharmacy Congress; one will be targeted at an introductory level for pharmacists, technicians and pre-registration pharmacists who are either new to or unfamiliar with the specialty, with objectives to target the requirements for HIV knowledge within the Foundation Framework. The second will be at a more advanced level for pharmacists and technicians who are more comfortable with the introductory principles and target the requirements for HIV knowledge within the Faculty Framework. Work is on-going to align with APTUK frameworks; however content within both talks will also be relevant for technicians and of course anyone is welcome to attend either or both talks!

Both CPC presentations will be delivered by Lucy Hedley, HIVPA's Deputy Chair and Education and Co-Conference Lead who is leading on work with the RPS to promote the Foundation and Faculty frameworks working towards development of the Knowledge and Information Tool (KIT).



## UK RPG - Connecting Renal Pharmacists Around the UK Since 1982

The RPG has had a busy year having been involved in a number of projects. These include updating the drug related Patient Information Leaflets (pils) on the National Kidney Foundation website and also updating similar pils on the Renal Association website.

The annual RPG conference was held in Birmingham in September 2017 where topics such as 'Transition from paediatric to adult care', 'The use of Tolvaptan in Polycystic Kidney Disease', 'Update on nephrotic syndrome', and 'Use of DOACs in renal impairment' were among the lectures and workshops as well as a record number of posters presented on a wide range of topics.

The RPG has a new chair - Andrea Devaney - consultant renal pharmacist from Oxford who took over from the outgoing chair Caroline Ashley at the conference.

The publishers Taylor and Francis decided to bring forward publication of the 5th edition of the Renal Drug Handbook. Members of the RPG have worked hard to complete the manuscript, and the new book is scheduled to appear early 2018. It is also hoped that an App for smartphones will be developed to go with the 5th edition.

The RPG was very involved in the Think Kidneys national programme for acute kidney injury and produced several tools to help with the medicines optimisation of patients with AKI. It is

currently involved with other national programmes such as the British Renal Society's Patient Safety Forum, and the Kidney Quality Improvement Partnership, which is a collaboration of BRS, the Renal Association, the Renal Registry, the RPG, patient groups, GPs, etc. Its aim is to develop a platform to enable improvements in the quality of care given to kidney patients.

The RPG continues to be an active participant at The Clinical Pharmacy Congress. At the 2018 Congress we will be presenting two topics:

- Diabetes and kidney disease - Speaker is Dawn Goodall from the Hammersmith Hospital
- Therenalpatientinthecommunity - Speaker is Lucy Galloway, who was Renal Pharmacist at Barts and the London Trust, now working in primary care.



## Pharmacy in Palliative and End of Life Care

The Association of Supportive and Palliative Care Pharmacy (formerly Palliative Care Pharmacist Network) is a national group to promote and support the work of pharmacists and pharmacy technicians in supportive and palliative care.



The website can be accessed freely on <https://www.aspcp.uk> but registration (also free) is needed for access to the members' only section which includes a useful Q&A forum.

Details of the group's structure, committee and activities can be found here with sections on sharing knowledge and expertise; developing knowledge and educational events; professional networking and peer support;

L - R: Gwen Klepping, Consultant Pharmacist in Palliative and End of Life Care, Oxford University Hospitals NHS Foundation Trust

Margaret Gibbs, Specialist Senior Pharmacist, St Christopher's Hospice, Sydenham, London

professional development in conjunction with the Royal Pharmaceutical Society Faculty and the publication of the Expert Professional Practice Curriculum in Palliative Care (adults); influencing National strategies and consultations e.g. NICE, NHS England, Department of Health; supporting and encouraging research to establish best practice; collaboration and promotion to all settings where patients are supported with palliative and end of life care.

Come and see us present at CPC 2018



3 easy ways to register

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 020 7013 4671

 [e.seymour@closerstillmedia.com](mailto:e.seymour@closerstillmedia.com)

Register by 2nd February using your unique code to waive the £499+VAT entrance fee. Unable to locate your code? Visit [pharmacycongress.co.uk/request-a-code](http://pharmacycongress.co.uk/request-a-code)

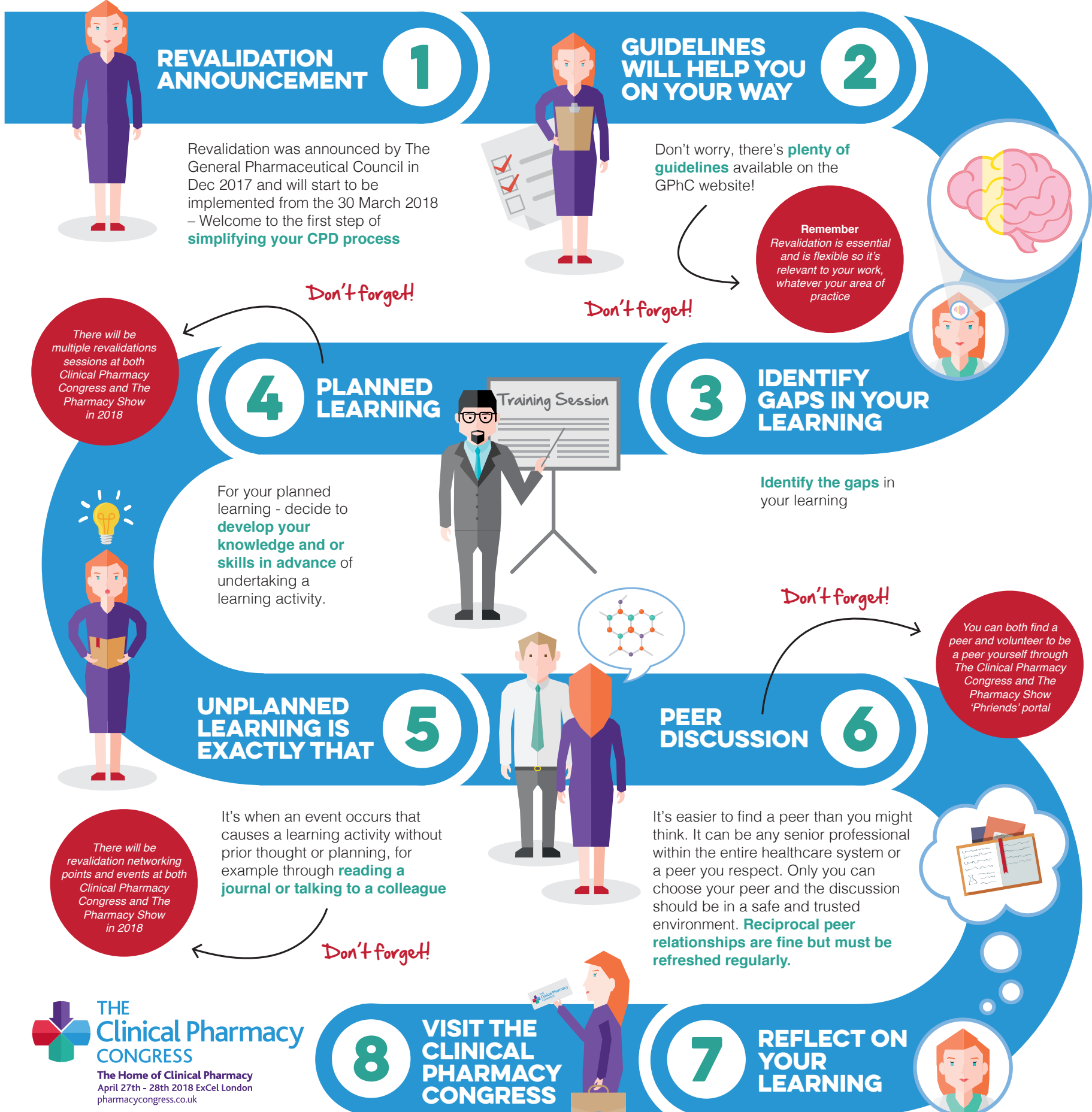


# REVALIDATION IS COMING

• Your bite sized guide to starting the journey for positive change •

Revalidation is a process which will help you to keep your professional skills and knowledge up to date. It will help you to show how you provide the safe and effective care patients and the public expect, as set out in the standards for pharmacy professionals.

The trust people have in pharmacy professionals is strong. It is based mostly on the knowledge, attitudes and behaviours of individual pharmacists and pharmacy technicians and the relationships they have with the people using their services. Revalidation for pharmacy professionals is our proposal for what a future framework of assurance should look like. It builds upon our existing framework for continuing professional development (CPD) and adds extra components to further assure the public that their trust in pharmacy professionals is well placed.



**THE Clinical Pharmacy CONGRESS**  
The Home of Clinical Pharmacy  
April 27th - 28th 2018 ExCel London  
pharmacycongress.co.uk

Visit **The Clinical Pharmacy Congress** and **The Pharmacy Show** in 2018 where there will be plenty of revalidation sessions and support

**P.S. A LITTLE REMINDER ON WHAT YOU NEED TO DO AND SUBMIT TO THE GPHC**  
In the first year that you submit revalidation records, you will need to carry out, record and submit four CPD records.  
In the second year that you submit revalidation records, and in all following years, you will need to carry out, record and submit four CPD records, a peer discussion record and a reflective account record. **Happy learning!**



# Conference Programme: Friday 27th April

	<b>KEYNOTE THEATRE</b> Sponsored by	<b>LEADERSHIP THEATRE</b> In partnership with	<b>CLINICAL THEATRE</b> In partnership with	<b>MEDICINES OPTIMISATION WORKSHOPS</b>	<b>CLINICAL LEADERSHIP THEATRE</b> In partnership with
8.30 – 9.00	Congress opens and exhibition floor time				
9.00 – 9.45	<b>Breakfast Symposium</b> * Delivered by	<b>Session TBC</b> NHS Leadership Academy 	<b>Breakfast Symposium</b> * Delivered by	<b>Breakfast Symposium</b> * Delivered by	<b>Palliative Care</b> Gwen Klepping, Consultant Pharmacist in Palliative and End of Life Care, Oxford University Hospitals NHS Foundation Trust and Margaret Gibbs, Specialist Senior Pharmacist, St Christopher's Hospice, Sydenham, London 
9.45 – 10.15	Exhibition floor time				
10.15 – 11.00	<b>Hypoglycaemia</b> Philip Newland-Jones, Consultant Pharmacist Diabetes and Endocrinology, University Hospitals Southampton NHS Foundation Trust 	<b>Overview of NHS Digital</b> Richard Ashcroft, Programme Director, Digital Medicines, NHS Digital 	<b>Sepsis</b> Dr Catherine McKenzie, Clinical Academic Reader in Critical Care Therapeutics, Kings College London	<b>Asthma inhalors</b> Professor Anna Murphy, Consultant Respiratory Pharmacist, University Hospitals of Leicester NHS Trust 	<b>Gastroenterology</b> Uchu Meade, Gastroenterology Pharmacist & Pharmacy Manager, St Mark's Hospital 
11.00 – 11.30	Exhibition floor time				
11.30 – 12.30	<b>The Best of Clinical Pharmacy Awards 2018 followed by the Keynote Address on Medicines Safety</b> delivered by Keith Ridge, Chief Pharmaceutical Officer, NHS England. 				
12.30 – 14.15	Exhibition floor time	Exhibition floor time	Exhibition floor time	Exhibition floor time	Exhibition floor time
	<b>13:00 - 13:45 Lunch Symposium</b> * Delivered by	<b>13:00 - 13:45 Lunch Symposium: Parkinsons</b> * Delivered by	<b>12:45-13:30 Lunch Symposium</b> * Delivered by	<b>12:45-13:30 Lunch Symposium</b> * Delivered by	<b>13:00 - 13:45 Lunch Symposium</b> * Delivered by
	Exhibition floor time	Exhibition floor time	Exhibition floor time	Exhibition floor time	Exhibition floor time
14.15 – 15.00	<b>Medicines Safety – a panel session</b> Chaired by Dr Bruce Warner, Deputy Chief Pharmaceutical Officer, NHS England with Darren Ashcroft, Professor of Pharmacoepidemiology, University of Manchester, Gillian Cavell, Clinical Senior Lecturer, King's College Hospital, Ravi Sharma, Programme Clinical Lead (Clinical Pharmacy) - Primary Care Workforce and Infrastructure Team, NHS England, Janice Perkins, Chair, Community Pharmacy Patient Safety Group and Pharmacy Superintendent, Well and Add Keith Ridge, Chief Pharmaceutical Officer, NHS England	<b>Revalidation for Pharmacy Professionals: providing assurance and improving quality</b> Mark Voce, Director of Education and Standards, Interim General Pharmaceutical Council 	<b>An update on Antimicrobial Resistance Strategy</b> Philip Howard, National AMR / HCAI Project Lead, NHS Improvement 	<b>Dermatology</b> Delivered by	<b>Diabetes and kidney disease</b> Dawn Goodall, Renal Pharmacist and Transplant Outcomes Lead and Jo Reed, Renal Diabetes Specialist Nurse both Imperial College Healthcare NHS Trust 
15.00 – 15.30	Exhibition floor time				
15.30 – 16.15	<b>Overview and update from the HEE Pharmacy Deans</b> Liz Fidler, Deputy Dean, (London and the South East), Chris Cutts (North), Trevor Beswick (South), Roz Cheeseman (Midlands and East), Health Education England 	<b>Leading transformational change in service provision</b> 	<b>Suicide disclosure</b> Dan White, Senior Clinical Pharmacist, BABCP CBT Psychotherapist, Oxford Health NHS Foundation Trust 	<b>The changing landscape of cancer; towards multi-speciality management</b> Islam Elkonaissi, Lead Lung Cancer and Clinical Commissioning Support Pharmacist, The Royal Marsden NHS Foundation Trust and Mark Evans, Deputy Chief Pharmacist, Imperial College Healthcare NHS Trust 	<b>Improving outcomes in Rheumatology</b> Emily Rose-Parfitt, Rheumatology Specialist Pharmacist, North Bristol NHS Trust 
16.15 – 16.30	Exhibition floor time				
16.30 – 17.15	<b>Regional Medicines Optimisation Committee: a strategic option</b> Richard Seal, Regional Medicines Optimisation Committee Pharmacy Lead, NHS Improvement, Professor David Webb, Regional Medicines Optimisation Committee Pharmacy lead, NHS England, Steve Brown, Regional Pharmacist NHS England / NHS Improvement, South of England NHS Improvement and Michele Cossey, Regional Medicines Optimisation Committee Pharmacy lead, NHS England 	<b>Major Incidents and Schwartz Rounds</b> Dr Anna Janssen, Clinical Psychologist, Guy's and St Thomas' NHS Foundation Trust 	<b>Polypharmacy</b> Lelly Oboh, Consultant Pharmacist, Care of Older People, Guys and St Thomas NHS Trust Community Health Services 	<b>Vanguard Care Homes Medicines Optimisation work at East &amp; North Herts CCG</b> Pauline Walton, AD & Head of Pharmacy & Medicines Optimisation and Maxine Davis, CCG pharmacist both NHS East and North Hertfordshire Clinical Commissioning Group	<b>#KnowYourDrops – revolutionising medicines optimisation in ophthalmology</b> Sarah Thomas, Lead Pharmacist Satellite Services and Contracts and Fiona Chiu, Associate Chief Pharmacist, Moorfields Eye Hospital 
17.15 – 17.30	Exhibition floor time				
17.30 – 18.15	<b>New NICE guidance on VTE Prevention</b> Rebecca Chanda, Senior Pharmacist Anticoagulation and Secretary, GSTFT Thrombosis and Thromboprophylaxis Committee and Katherine Stirling, Consultant Pharmacist, Anticoagulation and Thrombosis, Leeds Teaching Hospitals NHS Trust 	<b>Making standards of care better for all</b> 	<b>Session TBC</b>	<b>Whats new in Lipids and FH</b> Helen Williams, Consultant Pharmacist for Cardiovascular Disease, South London, Clinical Associate for CV Disease, Southwark CCG and Clinical Network Lead for CV Disease, Lambeth CCG 	<b>HIV</b> Lucy Hedley, Senior Clinical Pharmacist - HIV & Infectious Diseases, University College London Hospitals 
18.15	Congress closes				

# Conference Programme: Saturday 28th April

	<b>KEYNOTE THEATRE</b> Sponsored by	<b>LEADERSHIP THEATRE</b> In partnership with	<b>CLINICAL THEATRE</b> In Partnership with	<b>MEDICINES OPTIMISATION WORKSHOPS</b>	<b>CLINICAL LEADERSHIP THEATRE</b> In partnership with
9.30	Congress opens and exhibition floor time				
9:45 - 10:30	Breakfast Symposium *	The UK Quality Collaborative Karen Harrowing, Quality Systems & Pharmacy Consulting	Breakfast Symposium * Delivered by	Breakfast Symposium: Respiratory * Delivered by	Multiple Sclerosis - an update Joela Matthews, Lead Pharmacist: Neurosciences, Barts Health NHS Trust and UKCPA Neuroscience Group Education Lead 
10.30 - 11.00	Exhibition floor time				
11.00 - 11.45	COPD Toby Capstick, Advanced Clinical Pharmacist - Respiratory Medicine, Leeds Teaching Hospitals NHS Trust 	Ensure you're revalidation ready in the coming months 	Cardiovascular outcome trials (CVOTs) in Diabetes - impact on clinical practice? Michelle Lam Advanced Clinical Pharmacist - Diabetes & Endocrinology, Leeds Teaching Hospitals NHS Trust 	Cardiology conundrums – an interactive session – Paul Wright, Lead Cardiac Pharmacist, Barts Health NHS Trust 	Mental Health Session 
11.45 - 13.15	Exhibition floor time	Exhibition floor time	Exhibition floor time	Exhibition floor time	Exhibition floor time
	12:00 - 12:45 Lunch Symposium * Delivered by	12:00 - 12:45 Lunch Symposium * Women in Pharmacy Leadership Sponsored by	12:15 - 13:00 Lunch Symposium * Delivered by	12:15 - 13:00 Lunch Symposium * Delivered by	12:00 - 12:45 Lunch Symposium : Diabetes * Delivered by
	Exhibition floor time	Exhibition floor time	Exhibition floor time	Exhibition floor time	Exhibition floor time
13.15 - 14.00	Roadmap2: a national strategy Mark Koziol, Chief Executive, PDA 	Session TBC Khola Khan, CPhO Clinical Fellow, Hospital Pharmacy & Medicines Optimisation Team, Operational Productivity Directorate, NHS Improvement 	Evolution of pharmacy professionals in Pain Management and where to go next Dilesh Khandhia, Clinical Pharmacy Manager, North Bristol NHS Trust and Yousaf Ahmad, Chief Pharmacist - Head of Pharmacy Services, Care UK 	The renal patient in the community Lucy Galloway, Principal Pharmacist, NHS Croydon Clinical Commissioning Group 	Genomics and targeted cancer treatment Emma Groves, Clinical Pharmacist – Cancer services, The Newcastle upon Tyne Hospitals 
14.00 - 14.30	Exhibition floor time				
14.30 - 15.15	Anti thrombotics - now and on the horizon Sotiris Antoniou, Consultant Pharmacist, Barts Health NHS Trust 	Session TBC NHS Leadership Academy 	Headaches - how the MABs will help? Joela Matthews, Lead Pharmacist: Neurosciences, Barts Health NHS Trust and UKCPA Neuroscience Group Education Lead 	Hepatology Anja St. Clair Jones, Consultant Pharmacist Gastroenterology, Brighton and Sussex University Hospitals NHS Trust 	Children are not small adults. What about adolescents? Octavio Aragon Cueva, Lead Paediatric Rheumatology Pharmacist and Paediatric Teacher Practitioner Alder Hey Children's NHS Foundation Trust and Liverpool John Moores University 
15.15 - 15.30	Exhibition floor time				
15.30 - 16.15	Managing Aphasia and Dysphagia post stroke Paresh Parmar, Lead Pharmacist, stroke and care of the elderly, London North West University Healthcare NHS Trust	Integrated care and integrated working 	Urgent & emergency care: the journey Ravi Singh Cholia, Pharmacist Advanced Clinical Practitioner Barking, Havering & Redbridge University Hospitals NHS Trust & Health Education England	Infection Emma Cramp, Advanced Specialist Antimicrobial Pharmacist, University Hospitals of Leicester 	Self administration of medicines Ramandeep Kaur, Advanced Specialist Pharmacist ePMA and Hannah Flint, Senior Nurse for Medicines Management, both University Hospitals of Leicester NHS Trust
16.15 - 16.30	Exhibition floor time				
16.30	Congress closes				

Free Lunch   Hot Drink and Pastry

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Programme correct at time of print

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# Conference Programme

STRATEGY AND POLICY FORUM		Sponsored by
		
<b>Friday 27th April</b>		
9:00 - 10:00	Breakfast Symposium  * Overview of the eProcurement strategy and Scan4Safety	Supported by  
10:15 - 10:45	Implementation of Biosimilars: The Specialised Services experience Suzy Heafield, Commercial Pharmacy Lead, NHS England	
11:00 - 11:30	Collaboration across STPs to reduce variation Rahul Singal, Associate Director of Pharmacy - Operational Productivity, King's College Hospital NHS Foundation Trust and Gareth Adams, Programme Manager, HPTP Collaborative in Manchester	
12:45 - 13:30	Lunch Symposium  *	
13:45 - 14:15	New Pharmacy Integration and System Leadership Anne Joshua, Head of Pharmacy Strategy, NHS England	
14:45 - 15:15	The Model Hospital Andrew Davies, National Professional Lead for Hospital Pharmacy, NHS Improvement	
15:30 - 16:00	Medicines regulation- what next? Kieron Jones, Pharmacist Specialist, Care Quality Commission	
16:15 - 16:45	New Cancer Drugs Fund: how NHS England and NICE can work together to secure the desired outcomes for CDF Professor Peter Clark, Chair Cancer Drug Fund, Chair NHS England Chemotherapy Clinical Reference Group and Consultant Medical Oncologist	
17:00 - 17:30	Update on Specialised Commissioning Malcolm Qualie, Pharmacy Lead, Specialised Commissioning, NHS England	
17:45 - 18:15	Regional Medicines Optimisation Committees Dr Justine Scanlon, Specialist Pharmacy Service, Lead, Specialist Pharmacy Service	
<b>Saturday 28th April</b>		
09:45 - 10:15	Consultation on pharmacist independent prescribers (PIP) Duncan Rudkin, Chief Executive and Registrar, General Pharmaceutical Council	
10:30 - 11:00	Improving Care for Care Home Residents: The NHS England Pharmacy Integration Programme Wasim Baqir, NHS Care Homes Pharmacy Lead, NHS England	
11:15 - 11:45	Mental health and learning disabilities national strategy Peter Pratt, Head of Mental Health and Learning Disabilities Medicines Strategy NHS England	
12:00 - 12:30	NHS 111 and urgent and emergency care Paula Russell, NHS 111 Pharmacy Lead, NHS England	
12:45 - 13:15	Update on the General Practice Pharmacy Workforce programme Ravi Sharma, Programme Clinical Lead (Clinical Pharmacy) & Primary Care Workforce and Infrastructure Team (National Team), NHS England	
13:45 - 14:15	Jas Khambh, Pharmacy Adviser to NHS Right Care, NHS England	
14:30 - 15:00	Is your practice safe? A chief pharmacists guide to practicing as an effective practitioner David Miller, Chief Pharmacist, City Hospitals Sunderland NHS Foundation Trust	
15:30 - 16:00	Pre-reg recruitment update Gail Fleming Pharmacy Dean, London and the South East, HEE	

TECHNOLOGY FORUM		In partnership with
		
<b>Friday 27th April</b>		
9:00 - 9:45	Breakfast Symposium  *	Delivered by 
10:00 - 10:45	Medicines Data for Secondary Uses Fintan Grant, Senior Implementation Manager and Steve Marks, Programme Manager, both NHS Digital	
11:00 - 11:30	Session Kevin Noble, Managing Partner - PharmOutcomes	
12:45 - 13:30	Lunch Symposium  *	
14:00 - 14:45	ERD – electronic repeat dispensing Luvjit Kandula, Chief Officer, Leicester, Leicestershire and Rutland LPC, Chair, PCPA Community Pharmacy Group, Chief Officer, Leicestershire and Rutland Local Pharmaceutical Committee, Specialist Advisor APPG Diabetes and Vice Chair, PCPA Community Pharmacy Group	
15:15 - 16:00	The Yorkshire Experience of the Big Bang Theory of EPR Implementation. Penny Daynes, Lead EPR Pharmacist and James Harris, EPR Analyst both Calderdale and Huddersfield NHS Foundation Trust	
16:30 - 17:15	3D Printing Dr. Alvaro Goyanes, Director of Development, FabRx Ltd	
17:30 - 18:15	EPS – where are we and what's next? Candice Moore, Programme Head and Rich Cole, Programme Manager, both NHS Digital	
<b>Saturday 28th April</b>		
09:45 - 10:30	Breakfast Symposium  *	
10:45 - 11:05	Medicines Learning Portal Dr Simon Wills, Head of Southampton Medicines Advice Service, University Hospital Southampton NHS Foundation Trust	
11:15 - 12:00	Transferring information Tahmina Rokib, CPhO Clinical Fellow, NHS Digital	
12:15 - 13:00	Lunch Symposium  *	Delivered by 
13:15 - 14:00	Pharmacists working across care settings (equipping them with the tools they need - NHSD products including Mail, SCR, Prescription Tracker, DoS, Skype etc.) Harpreet Shergill, Senior Project Manager, NHS Digital	
14:30 - 15:15	Session TBC	
15:30 - 16:15	Session TBC	

 Free Lunch  Hot Drink and Pastry

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CLINICAL PHARMACEUTICS THEATRE		Sponsored by
		
<b>Friday 27th April</b>		
9:00 - 9:45	Homecare medicines and outsourced outpatients Jackie Eastwood, Outsourced Medicines Supply Services Lead, NHS London Procurement Partnership	
10:00 - 10:45	Pharmacy Technical Services - is this the career for me? Kate Preston, Pharmacy Production Training Coordinator, Royal Free London NHS Foundation Trust	
11:00 - 11:30	Cost-effective dispensing routes Robert Duncombe, Director of Pharmacy The Christie NHS Foundation Trust	
12:45 - 13:30	Lunch Symposium : Using big data to learn from best practice, improve patient outcomes and improve efficiency  * Brian Smith, Chief Pharmacist, Supplier and Client Services, UK, IQVIA	
14:00 - 14:45	Update on UKMi resources to support your clinical practice Vanessa Chapman, Director, Trent Medicines Information Centre & the UK Drugs in Lactation Advisory Service, University Hospitals of Leicester NHS Trust	 
15:00 - 15:30	Management of medicine shortages Jane Kelly, Principal Pharmacist, Commercial Medicines Unit, NHS England and Sarah McAleer, Principal Pharmacist, Department of Health	
15:45 - 16:15	Falsified Medicines Directive	
16:30 - 17:15	Is Pharmacy a key stakeholder in the delivery of Advanced Therapy medicinal products in the NHS? Anne Black, Regional Quality Assurance Specialist Pharmacist, North East and North Cumbria Newcastle upon Tyne Hospitals NHS Foundation Trust	
17:30 - 18:15	How safe are the injectable medicines in your hospital? Professor Alison Beaney, Consultant Quality Assurance Pharmacist, North Tees & Hartlepool NHS Foundation Trust	
<b>Saturday 28th April</b>		
09:45 - 10:30	Breakfast Symposium  *	
10:45 - 11:30	Pharmacy Technicians role in Medicines Administration Julie Powell, Pharmacy Technician, Mid Cheshire Hospitals Foundation Trust	
11:45 - 12:15	Investigational medicinal products (IMPs) TBC, Guy's and St Thomas' NHS Foundation Trust	Delivered by 
12:30 - 13:15	Lunch Symposium  *	
13:30 - 14:15	Medicines Management Assistant programme in Lancashire Adam Scott, Pharmacy Stores and Distribution Team Leader, Lancashire Teaching Hospitals NHS Foundation Trust	
14:30 - 15:15	Radiopharmacy Dr Neil G Hartman, Head of Radiopharmacy / Nuclear Medicine, Barts Health NHS Trust	
15:30 - 16:15	3D printing - the future of personalised medicines in specials manufacturing Dr. Alvaro Goyanes Goyanes, Director of Development, FabRx Ltd	
<b>POSTER ZONE</b>		
<b>Friday 27th April</b>		
9:15 - 11:15		
14:30 - 16:30		
<b>Saturday 28th April</b>		
10:00 - 12:00		
14:00 - 16:00		

# Conference Programme

GENERAL PRACTICE PHARMACY	
Sponsored by 	
Friday 27th April	
9:00 - 9:45	Breakfast Symposium  *
10:00 - 10:30	Developing Specialist roles for Primary Care Pharmacists 
11:00 - 11:30	Session 
12:45 - 13:30	Lunch Symposium  *
13:45 - 14:15	General Practice Pharmacy - Doing it right! 
14:45 - 15:15	Joint specialist clinics in GP practice (utilising skill mix within the multidisciplinary team to provide effective, one-stop holistic patient care)  Nicky O'Brien, Senior Clinical Pharmacist, Phase 1 NHSE Pilot (GPPTP), Church Street Medical Practice, Tewkesbury
15:30 - 16:00	General Practice Pharmacy or integrated primary care? 
16:15 - 16:45	GP Pharmacy Assessment Pathway Helen Middleton, Deputy Lead, General practice pharmacist training pathway (London and South East), CPPE 
17:00 - 17:30	So you want to be a General Practice Pharmacist? How to keep patients safe and protect your professional registration. 
17:45 - 18:15	The multi-disciplinary general practice team; integration across primary care  Dr Graham Stretch, Lead Pharmacist, Ealing GP Federation and Chief Pharmacist, Argyle Health Group and Helen Pinney, Lead Pharmacy Technician, Pharmacy Care Solutions 
Saturday 28th April	
09:45 - 10:15	Prescription Ordering Direct (POD) schemes; cost savings, patient safety and more besides 
10:45 - 11:30	Session 
11:45 - 12:15	Pharmacy workforce and overview of clinical pharmacists in GP  Gail Fleming, Pharmacy Dean, London and the South East, HEE and Ceinwen Mannall, National Lead, Clinical Pharmacists in General Practice, CPPE 
12:30 - 13:15	Lunch Symposium  *
13:30 - 14:00	Magic Porridge Pot  Steve Williams, Senior Clinical Pharmacist and Non Medical Prescribing representative on the NHS Regional Medicines Optimisation Committee (South), Westbourne Medical Centre
14:15 - 14:45	New to general practice - what your local NHS expects from you 
15:00 - 15:30	GP clinical pharmacists patient facing role  Nick Butler, Lead Pharmacist - General Practice Education (Midlands) and Sneha Varia, Pharmacy Professional Development Specialist both CPPE
15:45 - 16:15	Session

CHANGING CAREERS	
Friday 27th April	
10:00 - 10:20	Information Technology Wen Zhang, Pharmacy Information Technology Systems Manager, Royal Free London NHS Foundation Trust
10:30 - 10:50	Regulatory roles  Colette Mccree, Self-Medication Specialist and Unit Lead, MHRA
11:00 - 11:20	General practice pharmacy, South West LPN
14:00 - 14:20	Working in digital health  Tahmina Rokib, Chief Pharmaceutical Officer's, Clinical Fellow, NHS Digital
14:30 - 14:50	Emergency Services Louise Maunick, Trust Pharmacist London Ambulance Service NHS Trust
15:00 - 15:20	Emergency Department Tom Harris, Pharmacist Advanced Practitioner Emergency Department, Sunderland Royal Infirmary
15:30 - 15:50	General practice pharmacy Nicky O'Brien, Senior Clinical Pharmacist, Phase 1 NHSE Pilot (GPPTP), Church Street Medical Practice, Tewkesbury
16:00 - 16:20	General practice pharmacy technicians  Helen Pinney, Lead Pharmacy Technician - Pharmacy Care Solutions and Vice Chair PCPA Pharmacy Technicians Group
16:30 - 16:50	Professional Leadership  Robbie Turner, Director for England, Royal Pharmaceutical Society
17:00 - 17:20	Non-clinical hospital work Kate Preston, Pharmacy Production Training Coordinator, Royal Free London NHS Foundation Trust
17:30 - 17:50	Mental Health  Juliet Shepherd, Lead Pharmacist Medicines Optimisation Senior Clinical Pharmacist for Herefordshire, 2gether NHS Foundation Trust and Chair, College of Mental Health Pharmacy
Saturday 28th April	
10:00 - 10:20	NHS graduate management scheme  Aditya Aggarwal, Pharmacist, Policy & Strategy Graduate, NHS England
10:30 - 10:50	Humanitarian sector  Owen Wood, Humanitarian Pharmacy Adviser, Save the Children UK
11:00 - 11:20	Non-clinical hospital work Aamer Safdar, Principal Pharmacist & Lead for Education and Development and Clinical Lecturer, Guy's and St Thomas' NHS Foundation Trust
11:30 - 11:50	General practice pharmacy Steve Williams, Senior Clinical Pharmacist and Non Medical Prescribing representative on the NHS Regional Medicines Optimisation Committee (South), Westbourne Medical Centre and The Adam Practice
13:30 - 13:50	General practice pharmacy technician Helen Belben, General practice pharmacy technician
14:00 - 14:20	Chief Pharmaceutical Officer's, Clinical Fellow Programme  Stephen Doherty, CPhO Clinical Fellow, Health Education England
14:30 - 14:50	Foundation Pharmacy programme Alastair Green, Clinical Pharmacist, Northumbria Healthcare NHS Foundation Trust and Brockwell Medical Group
15:00 - 15:20	Secure environments  Cathy Cooke, Pharmacy Manager, Emerson's Green NHS Treatment Centre, Care UK
15:30 - 15:50	(Social) Media Thorrn Govind, Locum pharmacist

PRACTICAL SKILLS ZONE	
Friday 27th April	
Anaphylaxis Delivered by: Jo Blain, Michael Leech and Michael Collins 9:30, 12:00, 14:30 and 16:00	
Opioid overdose Delivered by: Michael Collins and Jo Blain 10:00, 12:30, 15:00 and 16:30	
Asthma Delivered by: Adam Radford and Michael Leech 10:30, 11:00, 13:00, 15:30 and 17:00	
Saturday 28th April	
Anaphylaxis Delivered by: Jo Blain, Michael Leech and Michael Collins 10:00, 12:00 and 14:30	
Opioid overdose Delivered by: Michael Collins and Jo Blain 10:30, 12:30 and 15:00	
Asthma Delivered by: Adam Radford and Michael Leech 11:00, 13:00 and 15:30	
PCPA GP PHARMACY LIVE!	
Friday 27th April	
10:00 - 10:30 Interview skills Hosted by Ravi Sharma, Programme Clinical Lead (Clinical Pharmacy) & Primary Care Workforce and Infrastructure Team(National Team), NHS England	
11:00 - 11:30 Practical Clinical skills: Respiratory	
14:15 - 14:45 Practical Clinical skills: Pain	
15:15 - 15:45 Practical Clinical skills: Diabetes	
16:15 - 16:45 Practical Clinical skills: Cardiovascular	
Saturday 28th April	
10:30 - 11:30 Interview skills Hosted by Ravi Sharma, Programme Clinical Lead (Clinical Pharmacy) & Primary Care Workforce and Infrastructure Team(National Team), NHS England	
11:30 - 12:00 Practical Clinical skills: Respiratory	
13:15 - 13:45 Practical Clinical skills: Pain	
14:15 - 14:45 Practical Clinical skills: Diabetes	
15:15 - 15:45 Practical Clinical skills: Cardiovascular	



# Our speakers are at the

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**Amer Safdar**  
Principal Pharmacist & Lead for Education and Development and Clinical Lecturer, **Guy's & St Thomas**



**Dr Bruce Warner**  
Deputy Chief Pharmaceutical Officer, **NHS England**



**Helen Williams**  
Consultant Pharmacist for Cardiovascular Disease, South London, Clinical Associate for CV Disease, **Southwark CCG** and Clinical Network Lead for CV Disease, **Lambeth CCG**



**Andrew Davies**  
National Professional Lead for Hospital Pharmacy, **(NHSI)**



**Chris Cutts**  
Pharmacy Dean, **Health Education England (North)**



**Jane Kelly**  
Principal Pharmacist, **Commercial Medicines Unit, NHS England**



**Professor Anna Murphy**  
Consultant Respiratory Pharmacist, **University Hospitals of Leicester NHS Trust**



**Duncan Rudkin**  
Chief Executive & Registrar, **General Pharmaceutical Council**



**Dr Justine Scanlan**  
Specialist Pharmacy Service, **Lead Specialist Pharmacy Service**



**Paresh Parmar**  
Lead Care of Older People and Stroke Pharmacist, **Northwick Park Hospital**



**Anne Joshua**  
Head of Pharmacy Strategy, **NHS England**



**Dr. Graham Stretch**  
Senior Clinical Pharmacist, **Ealing GP Federation**



**Lelly Oboh**  
Consultant Pharmacist, Care of Older People, **Guys & St Thomas NHS Trust and NHS Specialist Pharmacy Services**



**Lucy Hedley**  
Senior Clinical Pharmacist - HIV & Infectious Diseases, **University College London Hospitals**



**Malcolm Qualie**  
Pharmacy Lead, **Specialised Commissioning, NHS England**



## Conference topics and specialist areas include:

- 3D printing
- Acute coronary syndrome
- Antimicrobial resistance
- Asthma
- Atrial fibrillation
- Care homes
- Chief pharmacist development
- COPD
- Diabetes
- Electronic prescribing
- Emergency and urgent care
- eProcurement
- Falsified Medicines Directive (FMD)
- Gastroenterology
- GS1
- Headache
- Heart failure
- Hepatitis
- HIV
- Homecare
- HoPMOp
- HPTP
- Infection control
- Inhalers
- Integrated care
- Learning disabilities
- Liver

# At the heart of the Congress

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**Mohammed Hussain**  
Programme Head for Integrated Pharmacy, NHS Digital



**Philip Newland-Jones**  
Consultant Pharmacist Diabetes and Endocrinology, University Hospitals Southampton NHS Foundation Trust



**Roz Cheeseman**  
Pharmacy Dean, Health Education England (Middle and East)



**Professor Nina Barnett**  
Consultant Pharmacist, Care of Older People, London North West Healthcare NHS Trust & NHS Specialist Pharmacy Service



**Ravi Sharma**  
Programme Clinical Lead (Clinical Pharmacy) - Primary Care Workforce and Infrastructure Team, NHS England



**Sotiris Antoniou**  
Consultant Pharmacist, Barts Health NHS Trust



**Joela Matthews**  
Lead Pharmacist: Neurosciences and Acute Medicine, Barts Health



**Osama Ammar**  
Head of Continuing Fitness to Practise, General Pharmaceutical Council



**Robert Duncombe**  
Director of Pharmacy, The Christie NHS Foundation Trust



**Stephen Doherty**  
Chief Pharmaceutical Officer's Clinical Fellow, Health Education England



**Mark Koziol**  
Chairman, Pharmacists' Defence Association



**Keith Ridge**  
Chief Pharmaceutical Officer, NHS England



**Peter Pratt**  
Head of Mental Health and Learning Disabilities Medicines Strategy, NHS England



**Paul Wright**  
Lead Cardiac Pharmacist, Barts Heart Centre, Barts Health



**Dr. Wasim Baqir**  
NHS Care Homes Pharmacy Lead, NHS England

- Making sense of evidence - critical appraisal
- Management of medicine shortages
- Medicines safety
- Mental health
- New models of care
- Older people care
- Oncology
- Ophthalmology
- Paediatrics
- Pain
- Parkinsons
- Personalised medicines
- Renal
- Revalidation
- Scan4Safety
- Sepsis
- Seven day services
- Stroke
- Suicide
- Supervision
- Vangards

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# #KnowYourDrops for Medicines Optimisation in Ophthalmology

Patient compliance in ophthalmology is often overlooked despite NICE recommending to provide compliance support, and up to 50% patients with long-term conditions being non-compliant, including those with glaucoma.

Support for eye drop techniques and compliance aids is often poorly considered/overlooked by the profession compared with inhalers, for example, however it is essential. With many patients having poor dexterity or vision, aiming eye drops correctly at the correct angle or squeezing containers can be challenging. Additionally, some patients perceive asking for support as wasting clinical time; others feel embarrassed to admit they cannot administer drops correctly or easily; and others do not realise they have poor technique. Overall, this results in poor clinical outcomes or leads to financial losses with excessive dispensing due to patients using several drops at a time to administer one drop accurately. Furthermore, polypharmacy can potentially be avoided if techniques are correct in the first instance.

In August 2016, the Moorfields Eye Hospital Pharmacy team recognised these issues and actively responded to them to improve care and Quality of Life (QoL). Through pharmacist-led patient engagement the team identified gaps in their care model and that patients would like more education about eye drop techniques and a channel to openly discuss their difficulties in using their ophthalmic preparations. They

also identified that staff knowledge and skills was lacking in this area, both within the pharmacy team and amongst other healthcare professionals involved in the patient pathway. The team therefore launched the #KnowYourDrops campaign to raise awareness of compliance amongst patients and HCPs, offer greater support, and to improve quality and safety.

The team piloted a pharmacist-led consultation clinic alongside clinicians and nurses, and received overwhelmingly positive feedback from patients/carers and staff. Subsequently the team engaged with stakeholders to replicate the pilot across all Moorfields sites across London, and #KnowYourDrops eye drop compliance clinics are now embedded into the Trust, with awareness raised across the Trust to better consider and support patients and carers with eye drop techniques and compliance.

The #KnowYourDrops team, constantly engage with patients to improve care, and have used a wide variety of communication resources such as social media, infographics and video channels to raise awareness and provide better access to help and support.

Overall 100% of patients/carers have



reported that #knowyourdrops has improved ability and confidence administering eye drops. The initiative has resulted in improved patient experience and clinical outcomes, reduced appointment frequencies and polypharmacy, improved QoL with reduced need to rely on carers, and avoidance of surgery.

The #KnowYourDrops are passionate about spreading their initiative to further improve compliance worldwide and replicate this model across other organisations to improve quality and safety for all patients using ophthalmic

medicines. Not only does this contribute to the NHS QIPP programme, it also supports the national agenda to help prevent avoidable sight loss.

Come and learn why supporting patients with eye drop compliance is so important, and how this has been achieved at Moorfields Eye Hospital through the #KnowYourDrops campaign to replicate through your practice in the Clinical Leadership Theatre on Friday at 4:30pm.



Register by 2nd February using your unique code to waive the £499+VAT entrance fee. Enrol at: [pharmacycongress.co.uk/np](http://pharmacycongress.co.uk/np) • 020 7013 4671 • Unable to locate your code? Visit [pharmacycongress.co.uk/request-a-code](http://pharmacycongress.co.uk/request-a-code)

## What can BOPA do for you?

The British Oncology Pharmacy Association (BOPA) has recently celebrated its 21st year. BOPA exists to promote excellence in the pharmaceutical care of patients with cancer, thereby improving their quality of life. BOPA is a practice interest group representing pharmacy staff (pharmacists and technicians) working in cancer. Traditionally this would mean specialist secondary care pharmacists but the impact of cancer is much greater and pharmacy staff in every branch of the profession will have dealings with patients with cancer. Recent figures from the Cancer Research UK website show that 1 in 2 people will face a diagnosis of cancer.



BOPA as an organisation has recognised that improving the knowledge and skills of all pharmacy staff in managing patients with cancer, not just in understanding

complex chemotherapy but in symptom management and how cancer fits in with co-morbidities is vitally important.

The BOPA website has had e-learning models for early detection of cancer aimed at community pharmacy staff for some time, but we recognise that times are changing and BOPA has an ambitious plan to modernise its education to suit the modern digital world. Ask yourself if you have a new unfamiliar task to do in your personal life, how do you find out how to do it? You could read an instruction manual, phone a friend etc., but many of us now just 'google it' and watch a short you tube video on our smart phones. BOPA is planning to update its educational strategy to make the best use of digital platforms developments, including bite-sized learning using YouTube and Vimeo channels. Our plan is to develop partnerships with existing digital providers, and modernise e-learning to be more agile and cost-effective.

A key aim of our new strategy is to reduce duplication of training efforts, working with RPS to provide standardised training solutions and also for BOPA

to expand its guidelines and professional standards documentation. BOPA members working in secondary care spend lots of time training the next generation of pharmacists in the basics of oncology pharmacy so they can cover chemotherapy verification, BOPA aims to standardise this and have off the shelf training package to reduce time and effort. This will help Chief Pharmacists reduce their departments training burden.

Of course there is still a place for learning in person, we all value conferences and from listening, learning and networking with colleagues, which is why BOPA is very happy to support and be part of CPC. The next BOPA annual symposium is being held in Birmingham on 12th to 14th October 2018; we also run study days throughout the year. See <http://www.bopawebsite.org/content/annual-symposium-2018>. One development we are excited about is being able to offer up to 10 BOPA members the chance to attend the keynote ASCO cancer conference in Chicago, USA next June, via our new bursary scheme. The successful Bursary applicants will report back their learning's from the conference to their fellow BOPA members, using live video streams, social media. So if you ever had an ambition to attend the world's preeminent Cancer Congress, join BOPA and apply for the Bursary scheme!

In 2018 the BOPA committee will be working hard to strengthen cross-sector working and links with community pharmacy, championing the growth of non-medical providers, influencing national policy for

chemotherapy services, and collaborating globally with other national and international pharmacy organisations. See you in April at CPC.

Hear from BOPA committee members Islam Elkonaissi, Lead Lung Cancer and Clinical Commissioning Support Pharmacist, The Royal Marsden NHS Foundation Trust and Mark Evans, Deputy Chief Pharmacist, Imperial College Healthcare NHS Trust talking about The changing landscape of cancer on Friday in the Medicines Optimisation Workshops at 3:30pm and in the Clinical Leadership Theatre on Saturday at 1:15pm Emma Groves, Senior Clinical Pharmacist - Cancer services, The Newcastle upon Tyne Hospitals will discuss Genomics - personalised healthcare in the 21st Century.





# Acknowledge and Celebrate Your Success at CPC 2018

## The Best of Clinical Pharmacy Awards 2018

Come together as a community to celebrate your achievements.

Have you or your team made improvements to the services your department provides? Celebrate these achievements by entering into The Best of Clinical Pharmacy Awards 2018.

Categories include:

- Excellence in Clinical Leadership
- Excellence in Hospital Pharmacy Practice
- Excellence in Clinical Community Pharmacy Practice

- Excellence in General Practice

Pharmacy Sponsored by:



- Excellence in use of Technology in

Pharmacy Practice Sponsored by:



**Deadline 2nd February 2018!**

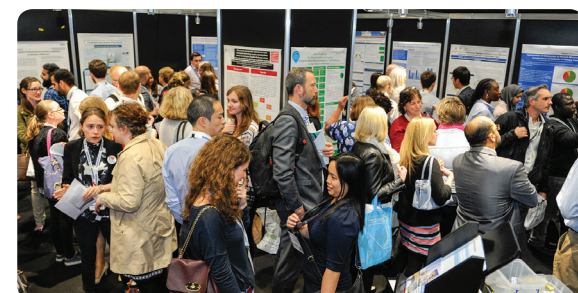
Visit [www.pharmacycongress.co.uk/awards](http://www.pharmacycongress.co.uk/awards) for more information and to submit your application.

## Poster Zone 2018



The Poster Zone is a chance for you to share your great achievements and best practice with thousands of clinical pharmacy professionals.

Located on the exhibition floor, this area is extremely popular with attendees, all eager to see the innovative projects their peers have been working on to improve patient outcomes.



**Deadline 2nd February 2018!**

Visit [www.pharmacycongress.co.uk/poster-zone](http://www.pharmacycongress.co.uk/poster-zone) for more information and to submit your abstract.

To find out if you qualify for an education grant to attend CPC please call 020 7013 4671 or email [e.seymour@closerstillmedia.com](mailto:e.seymour@closerstillmedia.com)

## #PCPAride

Get ready! On 4th May 2018, three members of the Primary Care Pharmacy Association (PCPA) committee will push their limits of physical fitness and endurance but also test their close-knit friendship. Graham Stretch, Robin Conibere and Helen Kilminster are committee members of the Practice Pharmacy Group for PCPA. Their epic challenge will involve them departing from Royal Pharmaceutical Society Headquarters, near Tower Bridge, London; on a TRIPLET tandem and cycling to Paris.

A triplet tandem is exactly that, a single bike, operated by three riders. To say all three riders are at their peak of physical fitness, is an overstatement but they all are training extremely hard. The 200 miles will be tracked live with all their trials and tribulations. Despite all odds, MIAB have kindly agreed to sponsor the triplet tandem ride.

All donations will be split equally between Macmillan Cancer Support and Pharmacist Support. As pharmacists themselves, Macmillan Cancer Support has continuously been invaluable for the care of their patients and their families and carers. Pharmacist Support provides pharmacy professionals a variety of supporting services at any stage of career. Please follow on Twitter #PCPAride @pcpa\_org. To view the promotional video and to kind donate please visit 'bit.ly/PCPAcharity'.



## 2017 Has Been a Busy Year for APTUK

**The Association of Pharmacy Technicians United Kingdom (APTUK) and The Royal Pharmaceutical Society (RPS) made an exciting announcement that they will jointly develop a 'road map' for collaborative working in a number of key areas over the next five years.**

The professional leadership bodies will work together to guide and lead both pharmacists and pharmacy technicians to a consensus on roles and responsibilities within an effective and efficient pharmacy team which can only enhance the delivery of quality and safe pharmacy services to patients and the public. Collaboratively we will start with developing support for revalidation that can be rolled out to all registered pharmacy professionals to enable them to meet the requirements of the General Pharmaceutical Council ahead of the changes scheduled for 2018.

17th October was international Pharmacy Technician Day when we celebrated the role of pharmacy technicians in 'raising the bar for patient safety'. We were delighted by the success of the social media campaign which showcased the amazing work of our members alongside our American colleagues at PCTB.

In November we announced that the Association of Pharmacy Technicians UK (APTUK) and Day Lewis were working together to support and promote the professional development of community pharmacy technicians.

The pharmacy technician role is integral to delivering high quality patient centred pharmacy services now and in the future. In recognising this Day Lewis are delivering on one of their core values 'To reward, recognise and empower, by investing in professional membership for their Pharmacy Technician staff.

APTUK President, Tess Fenn, said, "We are delighted to be working with Day Lewis in supporting professional excellence in pharmacy technician professionals, ultimately for the benefit of patients and medicines optimisation. We are very pleased to be welcoming Day Lewis community pharmacy technicians to APTUK and the richness this will bring to our membership as we learn and work together."

December saw the introduction of APTUK associate posts; to give members the opportunity to work alongside

National Offices on specific pieces of work to help support our professional leadership activities. APTUK will support associates development into a national role providing experience in a range of activities specific to their field.

APTUK are the only UK professional leadership body specifically representing pharmacy technicians. We are proud to be a partner of The Clinical Pharmacy Congress and encourage as many pharmacy technicians as possible to take the opportunity to come along, enhance your knowledge in the educational sessions and network with other pharmacy professionals. APTUK National Officers will be representing the Association at the event and we always enjoy this opportunity to meet members and other pharmacy technicians so please do ensure you come along and see us in the affiliates lounge and find out more about the work the professional body does on behalf of its members, the benefits of membership and our annual professional conference in Glasgow this year.

There are a plethora of pharmacy technicians speaking at CPC 2018 including:

Julie Powell, Pharmacy Technician, Mid Cheshire Hospitals Foundation Trust (Medicines administration), Adam Scott, Pharmacy Stores and Distribution Team Leader, Lancashire Teaching Hospitals NHS Foundation Trust (Medicines Management Assistant programme in Lancashire) Kate Preston, Pharmacy Production Training Coordinator, Royal Free London NHS Foundation Trust (Recruiting pre-regs into technical pharmacy services) and Helen Pinney, Lead Pharmacy Technician, Pharmacy Care Solutions (Multi disciplinary general practice team). Many of these will also feature in the Changing Careers Forum should you be keen on their careers pathways.



# SEE THE LATEST INNOVATION IN CLINICAL SUPPLIERS AT THE CONGRESS THIS APRIL

Exhibitor	Stand
AbbVie	E20
Abloy UK	E18
Accord Healthcare	E50
Alium Unlicensed Medicines	L40
Amgen	F15
Analytics Engines	A52
APTUK	J10 Affiliates Lounge
B. Braun Medical UK	C50
Barts Health Pharm	H65
BD	H50
BD Medical	F32
Belmatt Healthcare Training	A31
Berendsen Cleanroom Services	E15
Biogen	B10
Boehringer Ingelheim	F10
BOPA	J10 Affiliates Lounge
Bristol Myers Squibb Pfizer Alliance	F60
C + D Data	D8
Carter Bond Solicitors	F25
Chiesi	G31
CIG Healthcare Partnership	J60
CitySprint Health	E40
Civica	G45
Clement Clarke International	L41
Clinigen Group	E10
CoAcS	B65
Concordia International	E48
Connect 2 Cleanrooms	B28
Daiichi-Sankyo UK	C30
Distinctive Medical	L57
Dr Reddys Laboratories	A50
Durbin	L18
DX Group	D60
Fontus Health	G66
Fresenius Kabi	D30
General Pharmaceutical Council	D62
Gilead Sciences	G35
Glenmark Pharmaceuticals	F40
GSK Pharmaceuticals	F45
GSTT Pharmaceuticals	B29
Guild of Healthcare Pharmacy (GPH)	G1
Haier Biomedical UK	J20
Hameln pharmaceuticals	D50
Health Education England	H18
HealthNet Homecare	C1
Helapet	B40
Huddersfield Pharmacy Manufacturing	D17
iBin Innovations	G15
Intrapharm Laboratories	B30
JTF wireless	A30
JVM Europe	G50
Keele University	Education Hub B
Kent Pharmaceuticals Limited	D15
Key Life Financial Services	F25A
Kora Healthcare	A45
Labcold	G10

Lec Medical	E30
Leo Pharma	D65
LloydsPharmacy Clinical Homecare	J40
Luton and Dunstable University Hospital	H15
Mawdsleys	B50
Medisca UK	F35
Micronclean	C51
Mint Solutions	G65
Mistura Informatics	G17
Mylan	E45
Napp Pharmaceuticals	F20
New Icon	D20
NHS Digital	J45
NHS England	E35
Norgine Pharmaceuticals	G40
Nova Laboratories	D10
Omnicell	F50
Orion Pharma	L30
Oxford Pharmacy Store	G16
Panasonic Biomedical	G51
Pfizer UK	H30
Pharmacists' Defence Association (PDA)	H10
PharmOutcomes	L56
PIA Commercial	G19
Piramal Critical Care	F64
Portsmouth Hospitals NHS Trust	B38
Primary Care Pharmacy Association	L37
Profile Pharma	G20
PSUK	F30
Qdem Pharmaceuticals Limited	H60
Queen's University Belfast	G3
Rees Scientific	D28
RIG Healthcare	A51
Robert Gordon University	Education Hub C
Rokshaw Pharmaceuticals	F27
Rosemont Pharmaceuticals	J28
Royal Free Specials	B66
Rx Info	A25
Sandoz	G55
Shoreline Medical Refrigeration	L38
SMPU	J30
Soar Beyond	G28
South West LPN	J18
Stockport Pharmaceuticals	B60
T + R Derma	J35
Teva UK	D55
Torbay Pharmaceuticals	B35
Tutela Temperature Monitoring Systems	L50
UK Medicines Information	J10 Affiliates Lounge
UKCPA	J1
University of Colorado Skaggs School of Pharmacy	Education Hub D
University of Manchester (CPPE)	Education Hub A
Wockhardt UK	B48
Your World Recruitment	D61



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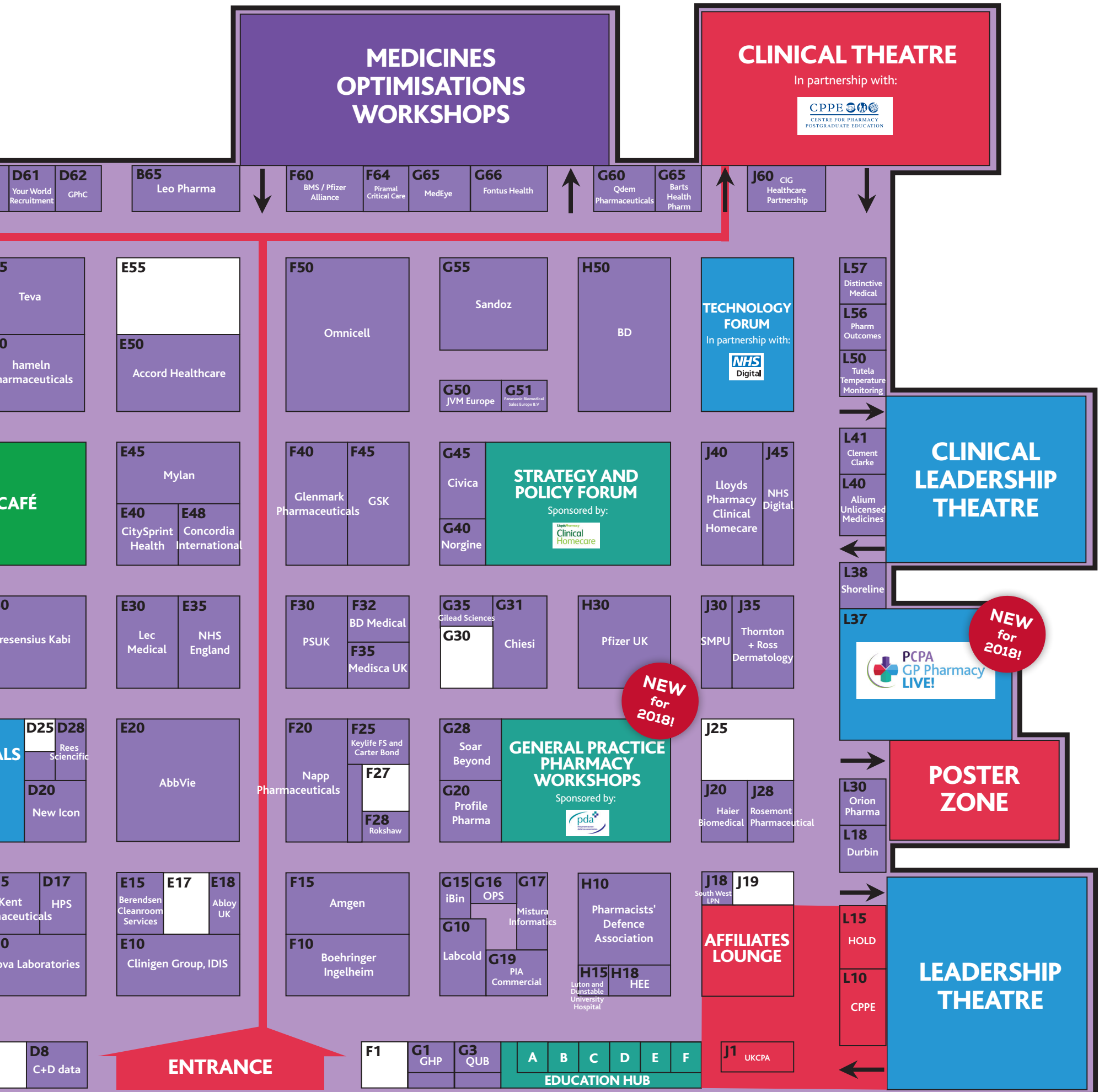
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# CLINICAL PHARMACY AND SOURCE NEW APRIL.

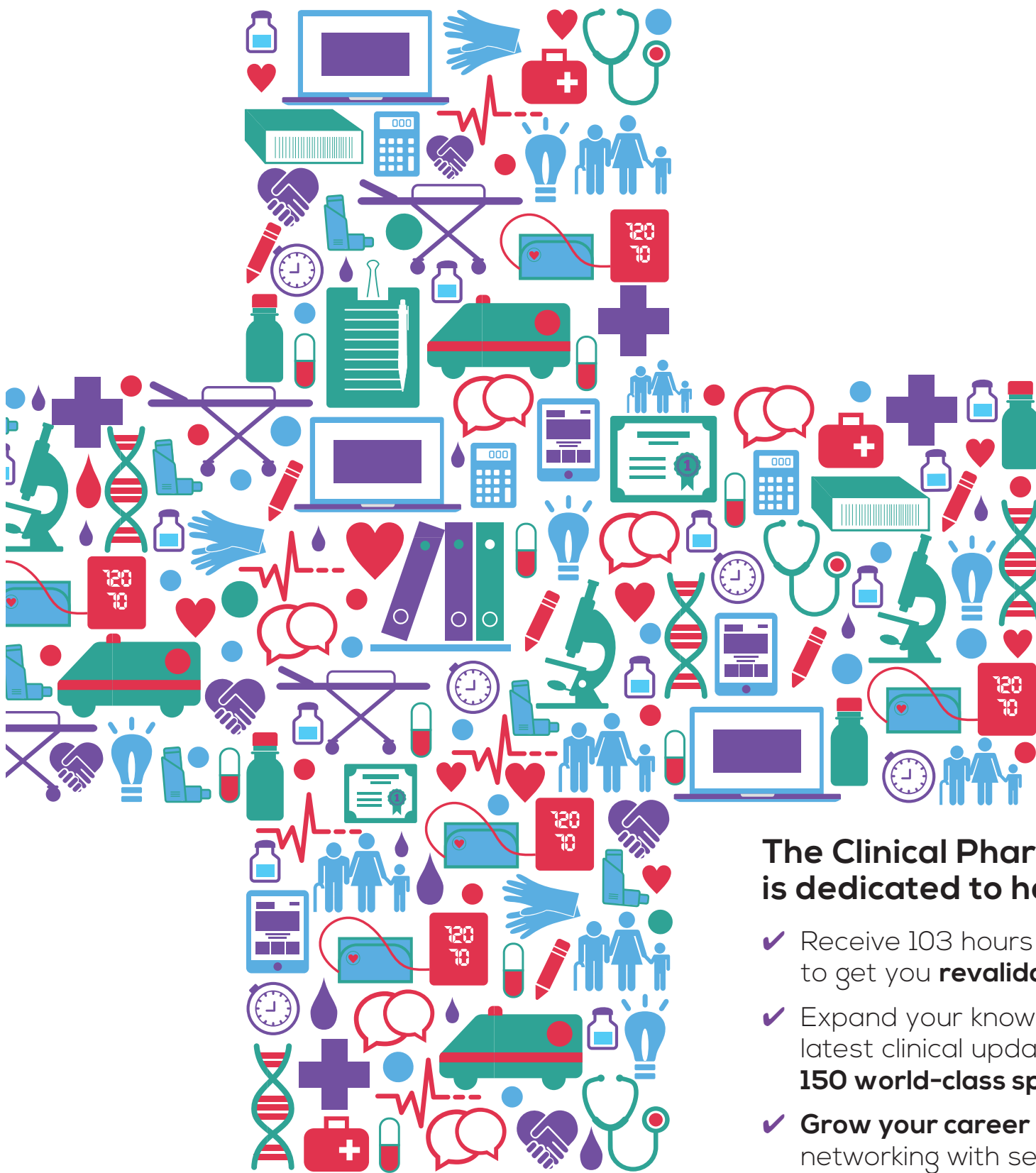




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