



Wessex Cancer Alliance Oncology Pharmacy Workforce Review

September 2023

Project background



The oncology pharmacy workforce is integral to national, regional, and local plans including personalisation of medicine, transformation of NHS pharmacy aseptic services across England and the move to providing Systemic Anti-Cancer Therapy (SACT) closer to home.

Wessex Cancer Alliance (WCA) met with the Wessex oncology pharmacy workforce and HEE representatives to explore any challenges facing the existing pharmacy workforce. Across the 6 Trusts there were challenges with recruitment and retention of skilled pharmacists, technicians, and support workers – most Trusts had several vacancies that were difficult to fill and although the teams continued to deliver their services, the workforce was surviving rather than thriving and potentially not equipped to support future developments.

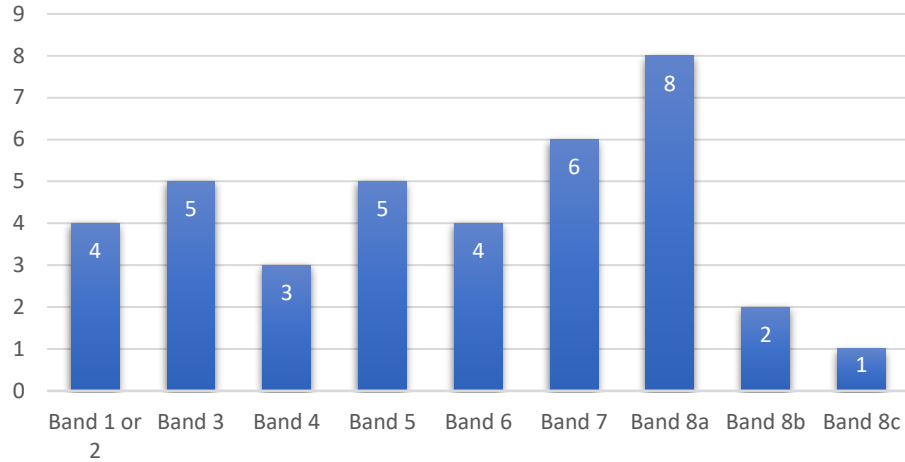
The oncology pharmacy workforce review was designed to offer the WCA an opportunity to hear from a large number of staff across the six trusts.



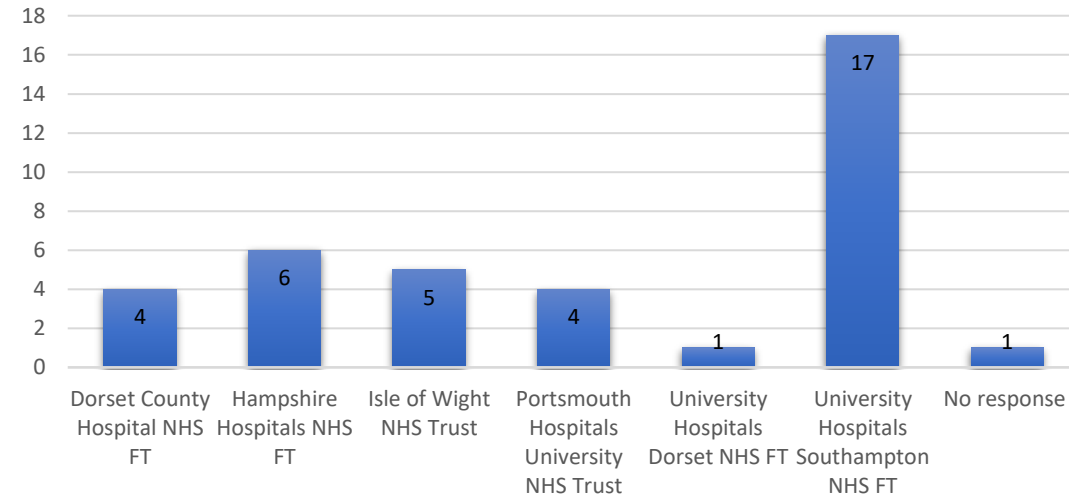
Breakdown of Staff who responded:

No. of overall survey responses received : 38

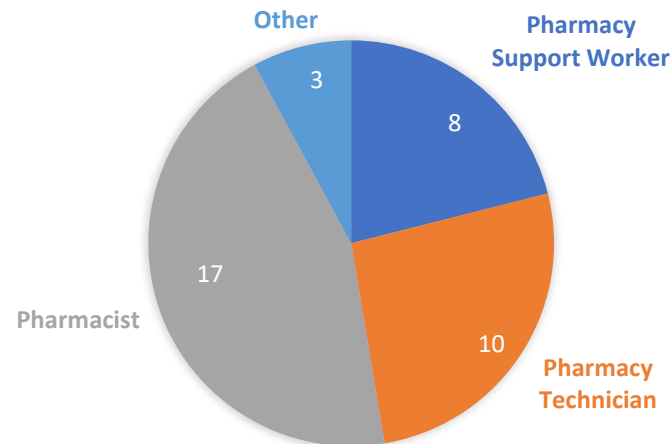
Banding



Trust



JOB ROLE



The Survey was sent out for distribution to all oncology pharmacy staff across the six Trusts of WCA in December 2022/January 2023

The Survey helped to examine the available staff resource, staff experience of work and personal career development.



Q1: Overall, how would you rate the staffing levels in your oncology pharmacy?

No. of responses received : 36



2.66 Average Rating

Q2: Please explain the rating given in Q1?

Insights:

33 out of the 36 staff who responded to this question stated that the reason for their rating was due to the lack of staff they have in their oncology pharmacy.

The main job roles that the pharmacies need are Pharmacists and Technician Support.

Pharmacies struggle to cover those staff that are on annual leave, sickness or study leave.

Q3: Overall, how would you describe your experience of work in relation to the following?



Describe your experience of work	Very Good	Good	Neutral	Poor	Very Poor	
Working pattern (do the hours and days suit you?)	9	17	7	4	1	
Work environment (within oncology pharmacy)	9	16	9	3	1	
Work atmosphere (how colleagues treat each other)	17	15	5	1	0	
Workload (realistic, manageable, achievable)	2	6	13	13	4	
Recognition for the work you do	9	8	12	6	3	
Opportunity to make suggestions for improvement	12	12	9	4	1	
Ability to speak to someone senior if you're worried about something	17	10	7	2	2	
Ability to do your job to a standard you're pleased with	7	6	17	3	5	
Overall job satisfaction	6	13	10	7	2	

Q4: If you scored very good or very poor for any of the answers above, please tell us why:

'Very Good' insights:

10 out of the 26 staff who responded with 'very good' are very happy with their team and feel they work well together.

5 out of the 26 staff who responded with 'very good' mentioned they have great management and feel they can approach them when needed.

'Very Poor' insights:

7 out of the 26 staff who responded with 'very poor' feel they are not working to the standards they should be and feel they are not doing their job to the best of their ability currently due to staffing levels, workload pressures and no management staff for advice.



Q5: In Oncology Pharmacy, what works well and why does it work well?

No. of responses received : 33

Insights:

26 out of the 33 staff that responded stated that they worked well with their teams on a daily basis, with good communication amongst screening pharmacists and technical staff.

8 out of the 33 staff stated that their teams follow clear guidelines and a structure to ensure they manage their workloads and reach their goals.

Q6: In Oncology Pharmacy, what works less well? Why is this?

No. of responses received : 35

Insights:

11 out of the 35 staff that responded stated that there is massive staff shortage across oncology pharmacies, meaning a higher workload for staff, working over hours and not taking their breaks due to trying to cover. This impacts the staff morale.

5 out of the 35 staff stated there is a lack of training for staff as well as a lack of mixed skills amongst them. This is due to there being a lack of oncology specific training and no time for staff to attend courses due to high workloads.

Q7: What are the barriers to you being able to do your job effectively?



No. of responses received : 34

Insights:

- High workload pressures
- Staffing levels low
- Little skill mix between staff
- Lack of oncology training

Feedback:

'We work 48 hours in advance, the reason for this rule is so that if there are any medication change's we have sufficient time to reorder from our fast-track manufacturer. Having late blood results and medication not prescribed on time prevents us working effectively.'

'Prescribing- waiting for treatments to be prescribed to be able to make them on time. Late prescribing means rushing through work which increases risk of error and lowers staff morale due to having lunch late/leaving late.'

'Time, staff turnover, poor support for new systems i.e. compounding systems. Ever growing amount of compassionate use/named patient schemes that are not funded nor approved but take up a huge amount of resource.'

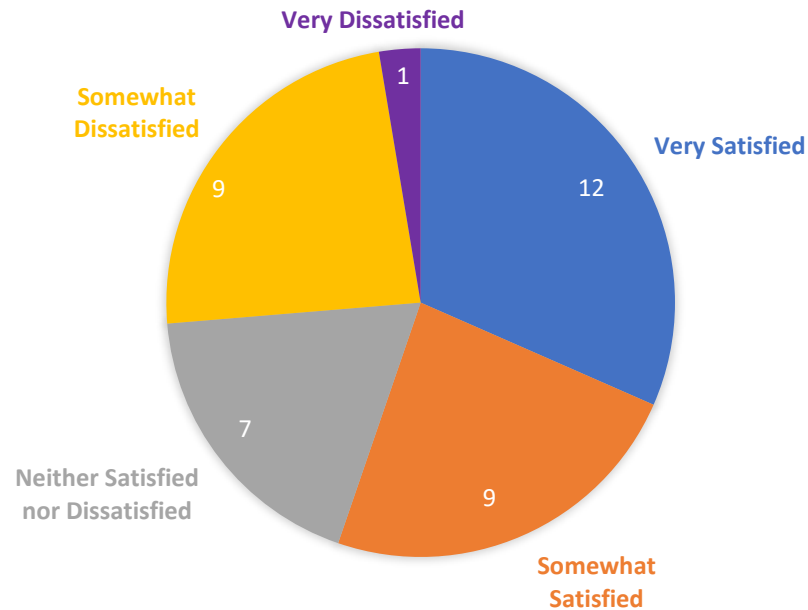
'What seems like a lack of comprehension of the work undertaken in technical services from the management team. there is no backfill from anywhere else in the pharmacy dept for technical staff as we are specially trained, however when we have rotational staff, they are sometimes pulled from technical to elsewhere leaving us short.'



Q8: How satisfied are you with the training you received/are receiving for your present job within oncology pharmacy?

No. of responses received : 38

SATISFACTION WITH TRAINING FOR JOB



Q9: If you have scored dissatisfied what could be done to improve the training?

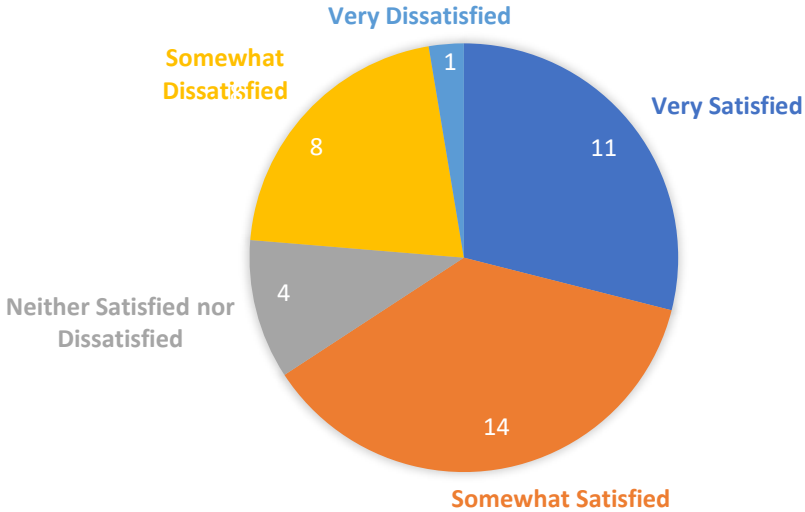
- Training programme, including the chemotherapy protocols.
- The SMT course needs to have additional time in work hours to complete work as there is ALOT in your own time.
- I think that the induction to the department and the main pharmacy had no structure and was an improvised schedule daily.
- My clinical training was provided mostly over email which was very challenging. In person training for screening should be essential.
- I have very little time to complete any training. I have had fantastic mentoring but unable to go on course that would support my role.
- Lack of guidance from lead clinical pharmacists. Time taken to complete the SACT training was prolonged due to staff absences and lack of priority.
- I wish I could do my technician training but if we do not have more staff to cover me I won't be able to do so although I am somewhat already doing the job of a technician.



Q10: How satisfied are you with your personal and career development?

No. of responses received : 38

SATISFACTION WITH PERSONAL AND CAREER DEVELOPMENT



Q11: How frequently do you and your line manager discuss the following aspects of development?

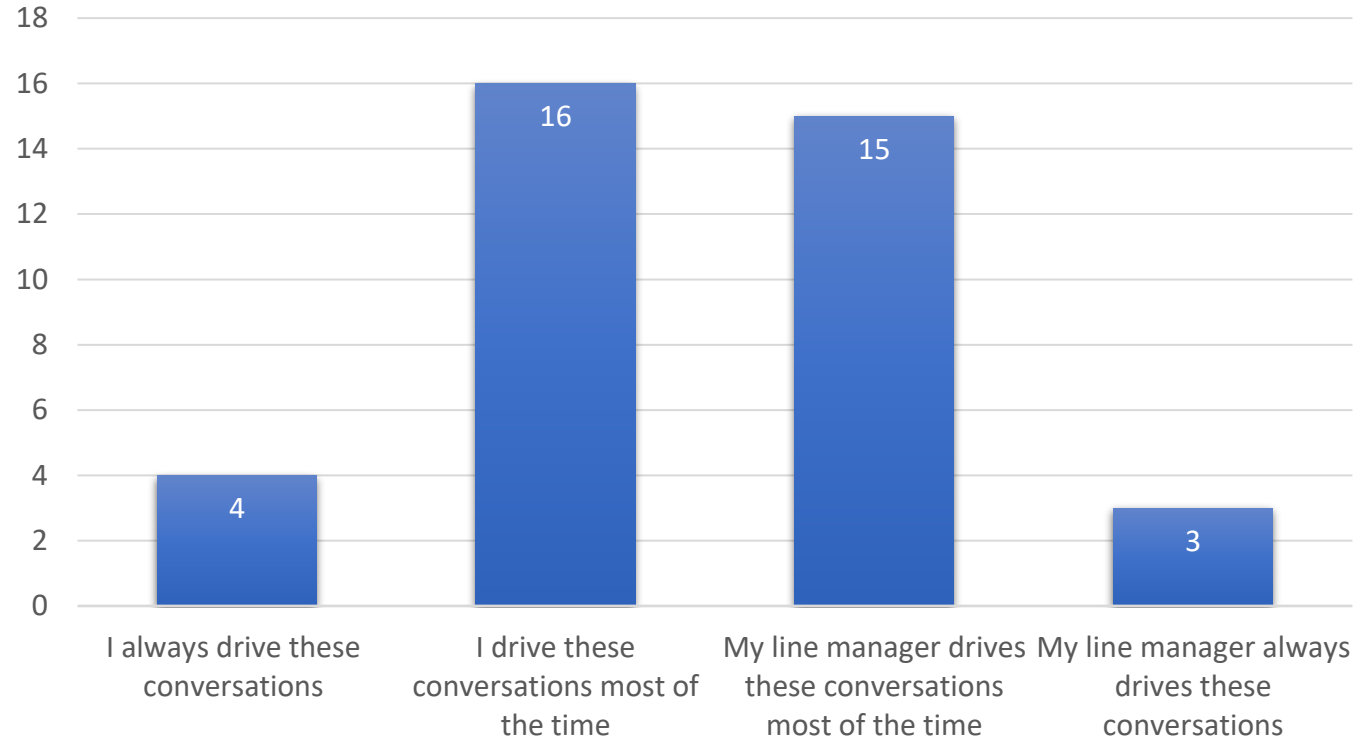
Discussion with Line Manager	Every 1-2 weeks	Every month	Every 2-3 months	Every 6 months	Every year	Less than once per year
Learning, reflections & development opportunities	1	2	8	7	15	5
Annual objectives	1	1	3	5	19	7
Career progression	0	1	4	6	18	9

Q12: Who drives these conversations about your development?

No. of responses received : 38



Who drives these conversations?





Q13: Professional Awareness - For each statement listed below, indicate the degree to which you agree or disagree

No. of responses received : 38

Professional Awareness	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
I know how to research career options relevant to my profession and skills	7	20	8	3	0
I take an interest in hot-topics for my profession	7	21	4	4	2
I know what is changing in my profession and how this may impact my career	6	19	7	5	1

Q14: Professional Development – For each statement listed below, indicate the degree to which you agree or disagree



No. of responses received : 38

Professional Development	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
I am aware of the strengths I bring to my work	12	23	3	0	0
I am proactive in seeking feedback	7	20	9	2	0
I understand my areas for professional growth	10	19	7	1	0
I am supported to fill gaps in my professional skills, knowledge and experience	4	16	14	4	2
The appraisal process facilitates meaningful, individualised development discussions	6	9	12	9	2
I have sufficient opportunities to keep my professional knowledge current	4	11	16	4	3
I have sufficient opportunities to develop existing skills	5	13	9	9	2
I have sufficient opportunities to learn new skills	6	12	7	10	3
I have regular access to regular structured learning activities	3	7	11	11	5
It is easy to apply training I receive to my work	3	13	14	6	2
My learning is supported by more senior or experienced colleagues	7	13	9	3	5
I routinely coach/mentor less senior or experienced colleagues	8	19	5	5	1
I am encouraged to share my learning with my team and/or department and/or Trust	7	16	10	4	1



Q15: Career Development – For each statement listed below, indicate the degree to which you agree or disagree

No. of responses received : 38

Career Development	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
I am encouraged to take the initiative in determining my own career development	9	14	13	2	0
My career path is clear and regularly discussed with my manager	5	8	13	10	2
I am supported to become ready to take the next step in my career (if desired)	7	10	13	5	3
I have long term career goals	10	12	10	4	1
I am able to balance my career goals and personal priorities	5	13	16	3	1



Q16: What could be done to enhance the overall professional and career development on offer to staff in oncology pharmacy?

No. of responses received : 22

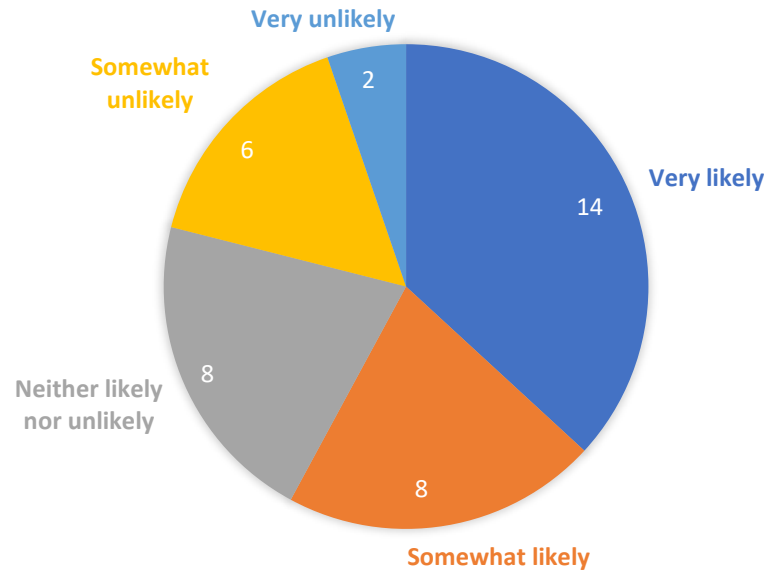
Responses:

- Setting time aside to allow staff to train.
- Dedicated posts - not taking staff from other departments.
- Local events for learning and networking open to the whole team.
- Discussion of opportunities or hearing about senior members career paths.
- Training modules with certifications and awareness of the courses undertaken.
- Have more educational lunch time presentations, opportunities to attend BOPA conferences etc.
- Better access to courses such as science manufacturing technician, pre in process checking course
- A higher level of leadership allowing for progression past 8a for general pharmacist workforce and specialising
- Ensure there are enough staff to carry out the day-to-day tasks in order to utilise the training/development available.
- Offering pharmacy technician training at a decent wage. Being an apprentice does not mean one should be paid peanuts.
- Have a set career pathway for band 5 technicians. At the moment once you become a band 5 development stops and there is no further progress without leaving the department.
- I think the staff need to feel valued to start with, and they need to feel invested in and have opportunities offered to them. They also need to be supported to be able to progress, not be expected to pay for their own training courses/transport to get there.
- Make development courses/roles more accessible. Many of the members in the team would not go for a job of a higher band/role because the courses and responsibility that comes with it is too much in comparison of what is expected from other members of the team.

Q17: How likely are you to recommend Oncology pharmacy as a place to progress a career?

No. of responses received : 38

HOW LIKELY ARE YOU TO RECOMMEND?



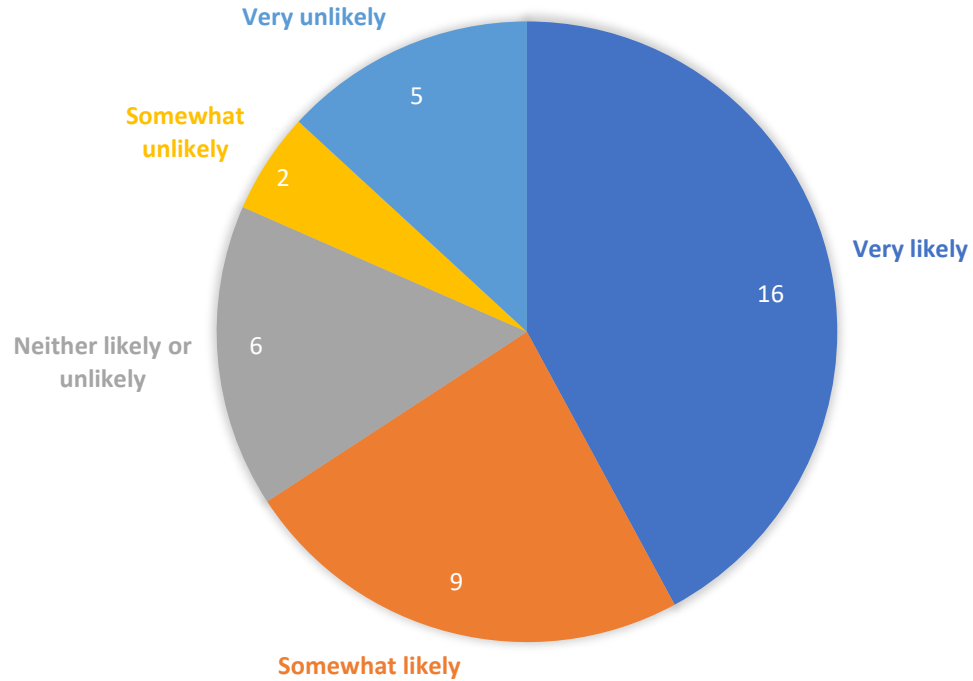
Q18: If you have scored unlikely what would prevent you from recommending oncology pharmacy as a place to progress a career?

- Lack of staff, not friendly atmosphere.
- There isn't a clear pathway for career development.
- Access to education and staffing levels sufficient to facilitate training needs
- Likely to progress due to lack of staff - easily able to fill more higher banded posts.
- There is little to no career development past senior level technician in smaller trusts.
- Currently the staffing situation is so bad that I would not recommend anyone to go into any pharmacy field at all.
- It's only good if you're a Band 2. They have the best route of progression. Everyone else dies a professional death in oncology.
- The pay is low for what the job entails, in comparison to what could be earned working in a supermarket for example.

Q19: How likely are you to remain working in oncology pharmacy?

No. of responses received : 38

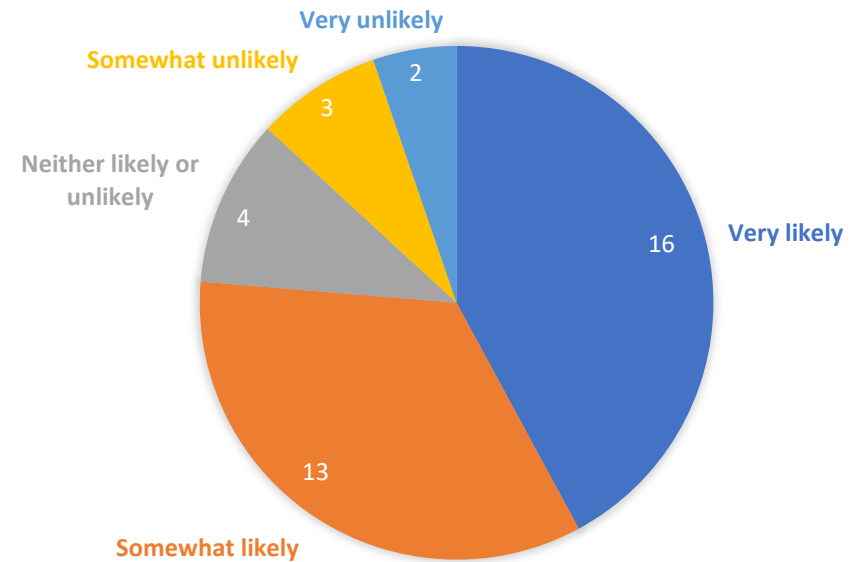
HOW LIKELY ARE YOU TO REMAIN IN ONCOLOGY PHARMACY?



Q20: How likely are you to remain working in the same Trust?

No. of responses received : 38

HOW LIKELY ARE YOU TO REMAIN IN THE SAME TRUST?

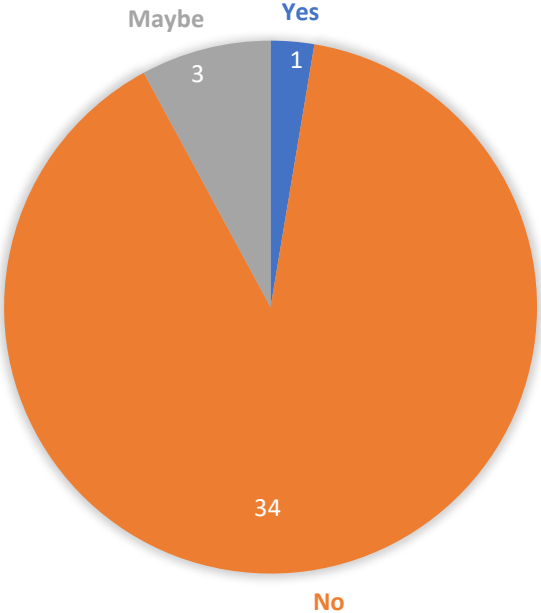


Q21: Are you likely to be retiring from oncology pharmacy in the next 12-24 months?



No. of responses received : 38

ARE YOU LIKELY TO RETIRE FROM ONCOLOGY PHARMACY IN THE NEXT 12-24 MONTHS?



Outputs following the workforce review



Training was one theme identified and it was requested we look at;

- A table showing various training resources/courses available to all pharmacy staff groups
- Career pathways – these were produced for both clinical and aseptic oncology pharmacy staff
- Re-establish a Network pharmacy group

Late prescribing was another issue and with data collected from March and April 2022 and 2023 for HIOW trusts, using ARIA electronic prescribing system, we were able to evaluate the extent of late and non-scheduled prescribing of SACT on WCA oncology pharmacy workforce. A poster of the findings was produced for BOPA conference 2023

There was a need for training of accountable/deputy accountable pharmacists. It was suggested we look at the feasibility of a regional training programme. This may now be taken forward by Pharmacy Workforce Development South (PWDS).