# Qualification specification

**NCFE CACHE Level 3 Diploma in the Principles and Practice for Pharmacy Technicians**
**QN: 603/5447/1**
**WITHDRAWN**

# Contents

## Summary of changes

**This section summarises the changes to this qualification specification.**

| Version | Publication Date | Summary of amendments |
|---|---|---|
| v1.2 | July 2023 | Information regarding UCAS added to About this qualification, Qualification Summary. |

# Section 1

## About this qualification

## Introduction

This Qualification Specification contains details of all the units and assessments required to complete this qualification.

To ensure that you are using the most up-to-date version of this Qualification Specification, please check the version number and date in the page footer against that of the Qualification Specification on the NCFE website.

If you advertise this qualification using a different or shortened name, you must ensure that learners are aware that their final certificate will state the full regulated qualification title.



---

## Support Handbook

This qualification specification must be used alongside the mandatory support handbook which can be found on the NCFE website. This contains additional supporting information to help with planning, delivery and assessment.

This Qualification Specification contains all of the qualification-specific information you will need that is not covered in the Support Handbook.

---

| Qualification summary | |
|---|---|
| **Qualification title** | NCFE CACHE Level 3 Diploma in the Principles and Practice for Pharmacy Technicians |
| **Qualification number (QN)** | 603/5447/1 |
| **Aim reference** | 60354471 |
| **Total Qualification Time (TQT)** | 1320 |
| **Guided Learning Hours (GLH)** | 785 |
| **Credit value** | 132 |
| **UCAS** | This qualification has been allocated UCAS points. Please refer to the UCAS website for further details of the points allocation and the most up-to-date information. |
| **Minimum age** | 16 |
| **Qualification purpose** | This qualification has been designed to confirm occupational competence for Pharmacy Technicians working in a variety of pharmacy settings, including (but not exclusively): registered pharmacies, community services, the Prison Service, GP practices, dispensing doctors' practices, care homes and clinical commissioning groups, hospitals, mental health, defence and in the pharmaceutical industry.<br><br>This qualification meets the requirements of the pharmacy regulator (the General Pharmaceutical Council (GPhC)) and meets employer need in England and Wales. On completion of this qualification learners will be able to register with the GPhC as a Pharmacy Technician.<br><br>This qualification also meets the Skills for Health Qualification Design Criteria.<br><br>Centres should be aware that for this Level 3 qualification learners will be required to meet the demands of the following Level 4 units:<br><br>• Unit 7 Undertake medicines reconciliation and supply<br>• Unit 8 Assemble and check dispensed medicines and products. |

| Qualification summary | |
|---|---|
| **Aims and objectives** | This qualification aims to qualify learners to undertake the role of a Pharmacy Technician. Pharmacy Technicians manage the supply of medicines and devices in a pharmacy, and assist Pharmacists with advisory services.<br><br>The qualification will focus on the study of the supplying and assembling of medicines and providing information to patients and other healthcare professionals within a pharmacy setting.<br><br>The objective of this qualification is to allow the learner to register with the GPhC and move into employment as a Pharmacy Technician. |
| **General Pharmaceutical Council (GPhC)** | This qualification maps to the GPhC's outcomes and standards and has been recommended for approval by GPhCas a recognised route to employment as a Pharmacy Technician.<br><br>Please note: applicants have 5 years to register as a Pharmacy Technician from the date they commence an approved course, or 2 years to register from the date of completion, whichever is sooner. |
| **Work/industry placement experience** | This qualification requires learners to be working in a pharmacy environment or to have secured a placement as a pre-registration trainee Pharmacy Technician, supervised by a designated educational supervisor who is a registered pharmacy professional.<br><br>For training purposes a pharmacy environment is any location where pharmacy services take place.<br><br>Community pharmacies are registered and inspected by the GPhC. However, some pharmacies, such as hospital pharmacies, are registered and inspected by the Care Quality Commission (CQC). Placements must be with a pharmacy registered with either the GPhC or the CQC.<br><br>Each pre-registration trainee Pharmacy Technician must be supported as a trainee in the workplace and centres must ensure that trainees interact regularly with their educational supervisor.<br><br>Applicants should have secured a placement as a trainee in a pharmacy environment and registered for a course recognised or accredited by the GPhC within **three** months of commencing their contracted role as a trainee. This will be checked at External Quality Assurance visits.<br><br>Trainees must have the opportunity to work in a multi-disciplinary team with other health or care professionals and trainees during their training. This may include relationships with other local health or care professionals in local GP practices or clinics, various wards in hospitals or district nurses. Trainees may work for a period of time in another setting or be regularly working and communicating with other health or care professionals at a distance. |

| Qualification summary | |
|---|---|
| | Centres will need to check with employers that this is taking place and arrangements for this must be included in the trainee's learning agreements.<br><br>Please note: where trainees are selected by the employer rather than the centre you must check the following:<br><br>1. All those involved in selection must apply the selection criteria consistently, in an unbiased way and in line with relevant legislation. They should be trained to do this and training should include equality, diversity and inclusion.<br>2. The employer must carry out the relevant health, academic, good character and general fitness to practise checks (as defined on p 10).<br><br>Any employers who are unable to provide evidence of this must be deemed as unsuitable to provide work placements for this course.<br><br>You will be asked to show that a process is in place for checking this during EQA visits. |
| **Rules of combination** | This qualification consists of both skills units and knowledge units. Learners must achieve all 21 mandatory units. |
| **Grading** | The qualification is graded Pass/Fail. |
| **Assessment method** | Internally assessed and externally quality assured portfolio of evidence. |
| **Staffing requirements** | There are specific staffing requirements for this qualification outlined in the following GPhC documents:<br><br>• Guidance on Tutoring and Supervising Pharmacy Professionals in Training<br>• Tutor Suitability Policy.<br><br>Centres must have sufficient staff from relevant disciplines to deliver the course and support pre-registration trainee Pharmacy Technicians.<br><br>Pre-registration trainee Pharmacy Technicians must have access to registered pharmacy professionals (including a designated educational supervisor) who are able to act as role models and give professional support and guidance. The designated educational supervisor will be their point of contact in the workplace, provide feedback and mentoring and contribute to any reviews.<br><br>Please refer to the Assessment Principles on p.17 for requirements relating to Assessors and Internal Quality Assurers.<br><br>**Please note** – it is acceptable for Tutors who are not qualified Pharmacy professionals to deliver and assess the science-based knowledge units (units 10, 11 and 15). |

| Qualification summary | |
|---|---|
| | |
| **Apprenticeship frameworks/standards** | **England:**<br><br>This qualification does not feature in the Pharmacy Technician Apprenticeship Standard in England. Learners taking this qualification as part of an apprenticeship will need to take the qualification with integrated End Point Assessment, which will be launched shortly.<br><br>**Wales:**<br><br>This qualification will be included in the following Welsh Apprenticeship Framework: Health (Pharmacy Services).<br>Please visit acwcerts.co.uk/web/ for specific requirements relating to the Welsh Apprenticeship Framework. |
| **Progression** | Learners who achieve this qualification, and the requirements of the pharmacy regulator, will be able to apply for professional registration as a Pharmacy Technician. In the longer term, learners can progress to more senior or complex job roles in pharmacy or the healthcare sector. |
| **Regulation information** | This is a regulated qualification. The regulated number for this qualification is 603/5447/1. |
| **Funding** | This qualification may be eligible for funding. For further guidance on funding, please contact your local funding provider. |
| **Approval and Quality Assurance** | There are additional approval and quality assurance requirements for centres delivering this qualification. These can be viewed in the approvals area of our website or by speaking to your EQA. An approval visit is a mandatory requirement of this qualification.<br><br>All those involved in the delivery and internal or external quality assurance of this qualification must be aware of the **General Pharmaceutical Council's Standards for the Initial Education and Training of Pharmacy Professionals**. Our approval and quality assurance processes are mapped to these standards, and centres will be asked to evidence during approval and at External Quality Assurance visits that they are meeting them. Some templates are provided in the appendices to support centres to achieve this. If the templates are not used the information will need to be evidenced elsewhere.<br><br>Please note that this qualification is not eligible for direct claims status (DCS), please speak to your EQA for more information. |

## Entry guidance

This qualification is designed for learners who are working or are on placement in a pharmacy environment and are looking to enter employment as a Pharmacy Technician.

Entry is at the discretion of the centre. However, learners should be aged 16 or above to undertake this qualification.

Registration is at the discretion of the centre, in accordance with equality legislation, and should be made on the Portal.

Centres must ensure that learners are fit to practise **at the point of selection**. Selection processes must be open, clear and unbiased, and be delivered by trained selectors who can keep to relevant legislation to identify applicants with the right attributes to train as a healthcare professional.

Learners must be able to meet the following criteria:

- specified English language requirements (GCSE English at Grade C/Level 4, Scottish National 5 or above, or equivalent English language evidence)
- specified numeracy requirements (GCSE Maths at Grade C/Level 4, Scottish National 5 or above, or equivalent evidence of numeracy)
- the ability to demonstrate knowledge and understanding of science suitable for entry to the course, for example, GCSE Science at Grade C/Level 4, or Scottish National 5 or equivalent
- other academic requirements or experience equivalent to national Level 2 or above
- good character checks (see Appendix A)
- appropriate health checks (see Appendix B).

Good character checks should include consideration of any cautions or convictions, any investigations or fitness to practise proceedings with other regulatory bodies and an issues connected to their academic or training career.

Centres are responsible for ensuring that this qualification is appropriate for the age and ability of learners. They need to make sure that learners can fulfil the requirements of the learning outcomes and comply with the relevant literacy, numeracy and health and safety aspects of this qualification.

Learners registered on this qualification should not undertake another qualification at the same level with the same or a similar title, as duplication of learning may affect funding eligibility.

Equality, diversity and inclusion at the point of selection must be taken seriously. Centres must have systems and policies in place for capturing equality and diversity data to make sure policies and procedures are fair and do not discriminate against trainees or applicants. This data must be used in designing and delivering this course. Centres will be asked to provide evidence of this at EQA visits.

**Achieving this qualification**

To be awarded this qualification learners are required to successfully achieve 132 credits from the 21 mandatory units.

This qualification can be delivered in a classroom, via distance learning or a combination of both. The training is likely to take 2 years and includes work-based experience under the direction of a registered Pharmacist or Pharmacy Technician. The trainee must be directly accountable to them for at least 14 hours per week.

Please refer to the list of units over the page or the unit summaries in Section 2 for further information.

To achieve this qualification, learners must successfully demonstrate their achievement of all learning outcomes of the units as detailed in this Qualification Specification.

This course **must** be taught in line with the principles outlined in the following mandatory GPhC documents:

- Standards for Pharmacy Professionals
- Tutor Suitability Policy
- Guidance on Tutoring and Supervising Pharmacy Professionals in Training
- Initial Education and Training of Pharmacy Technicians: Evidence Framework
- Standards for the Initial Education and Training of Pharmacy Technicians.

You will be asked to show evidence to your External Quality Assurer that **you and the employers you work with** are implementing the principles outlined in these documents.

**Fitness to practise and patient safety**

All centres delivering this qualification must have a fitness to practise policy and procedure.

Centres must ensure that when drafting their policy, they refer to the GPhC's Guidance on Student Fitness to Practise Procedures in Pharmacy Schools and Raising Concerns about Pharmacy Education and Training.

The policy should be concerned with both learner and delivery staff fitness to practise in a clinical, professional environment, and their ability to be part of the provision of direct patient care. It should conform to professional standards and codes of practice and be consistent with the behaviour expected by the profession and the employer. The centre process should include both informal and formal proceedings plus a robust investigatory mechanism.

Centres must inform learners, as part of their admissions and/or enrolment procedures, that unprofessional behaviour or serious health problems during their training may result in fitness to practise proceedings, which could affect their ability to complete the course and their ability to register with the GPhC. Pre-registration trainee Pharmacy Technicians must be made aware of the GPhC's Guide to Raising Concerns about Pharmacy Education and Training, and all procedures for raising concerns about any aspects of their learning or training environment must be included in the trainee's learning agreement.

- **All fitness to practise concerns must be reported to NCFE within one week of being identified.**

- **Serious issues must be reported to NCFE within 36 hours of being identified.**

A serious issue is defined as an incident having occurred which has had an impact on a registrant's fitness to practise.

It is a requirement of the Pharmacy Order 2010 that course providers assist the GPhC in its work by providing information on request.

**Patient safety**

Patient safety is of the utmost importance. Pre-registration trainee Pharmacy Technicians must only carry out tasks in which they are competent, or are learning under supervision to be competent in, so that patient safety is not compromised.

Centres will be asked to provide evidence during External Quality Assurance visits that:

- patient safety is central to their assessment strategy
- unsafe practice is not passed
- trainees only carry out tasks for which they are competent
- trainees are adequately supervised.

As assessment regulation for this qualification must prioritise patient safety, condonation, compensation, trailing, multiple-resit opportunities and other remedial measures should be extremely limited.

**Units**

To make cross-referencing assessment and quality assurance easier, we've used a sequential numbering system in this document for each unit.

The regulated unit number is indicated in brackets for each unit (eg M/100/7116) within Section 2.

The content of the qualification should be delivered in a way that best supports learning, but we recommend that **knowledge** units are delivered in this order:

**Unit 1**: Principles of person-centred approaches for Pharmacy Technicians (must be achieved before units 7 and 8 are started)
**Unit 2**: Principles of health and safety for Pharmacy Technicians (must be achieved before units 7 and 8 are started)
**Unit 10**: Chemical principles for Pharmacy Technicians
**Unit 11**: Biological principles for Pharmacy Technicians
**Unit 16**: Actions and uses of medicines (must be achieved before units 7 and 8 are started)
**Unit 15**: Microbiology for Pharmacy Technicians.

The remaining knowledge units can be completed in any order.

**Skills units**

These units should be completed as the workplace deems most appropriate for the individual learner. However, certain points **must** be observed:

**Unit 7**: Units 1, 2 and 16 must be achieved before unit 7 is started
**Unit 8**: Units 1, 2 and 16 must be achieved before unit 8 is started
**Unit 9**: Units 1, 2 and 16 must be achieved before unit 9 is started.

**You will be asked to provide evidence of sign off of units 1, 2 and 16 prior to commencement of units 7, 8 and 9 at EQA visits.**

Knowledge only units are indicated by a star. If a unit is not marked with a star, it is a skills unit or contains a mix of knowledge and skills.

**Mandatory units**

| | Unit number | Regulated unit number | Unit title | Level | Credit | GLH | Notes |
|---|---|---|---|---|---|---|---|
| ☆ | Unit 01 | F/617/9282 | Principles of person-centred approaches for Pharmacy Technicians | 3 | 5 | 30 | |
| ☆ | Unit 02 | J/617/9283 | Principles of health and safety for Pharmacy Technicians | 3 | 2 | 10 | |
| | Unit 03 | L/617/9284 | Personal development for Pharmacy Technicians | 3 | 5 | 25 | Observation required |
| ☆ | Unit 04 | R/617/9285 | Principles of health promotion and wellbeing in pharmacy services | 3 | 5 | 35 | |
| | Unit 05 | Y/617/9286 | Contribute to service improvement in the delivery of pharmacy services | 3 | 6 | 30 | Observation required |
| ☆ | Unit 06 | K/617/9289 | Principles for the management of pharmaceutical stock | 3 | 8 | 65 | |
| | Unit 07 | T/617/9294 | Undertake medicines reconciliation and supply | 4 | 12 | 60 | Observation required<br>**Assessment tasks provided** |
| | Unit 08 | A/617/9295 | Assemble and check dispensed medicines and products | 4 | 8 | 30 | Observation required<br>**Assessment tasks provided** |
| | Unit 09 | F/617/9332 | Receive, validate and issue prescriptions | 3 | 10 | 40 | Observation required |

| | Unit number | Regulated unit number | Unit title | Level | Credit | GLH | Notes |
|---|---|---|---|---|---|---|---|
| ☆ | Unit 10 | J/617/9333 | Chemical principles for Pharmacy Technicians | 3 | 3 | 20 | |
| ☆ | Unit 11 | L/617/9334 | Biological principles for Pharmacy Technicians | 3 | 4 | 25 | |
| ☆ | Unit 12 | R/617/9335 | Medicinal and non-medicinal treatments for gastrointestinal and nutritional conditions | 3 | 5 | 35 | |
| ☆ | Unit 13 | Y/617/9336 | Medicinal treatments for cardio-respiratory conditions | 3 | 6 | 40 | |
| ☆ | Unit 14 | D/617/9337 | Medicinal and non-medicinal treatments for malignant diseases and musculoskeletal conditions | 3 | 6 | 40 | |
| ☆ | Unit 15 | H/617/9338 | Microbiology for Pharmacy Technicians | 3 | 5 | 30 | |
| ☆ | Unit 16 | K/617/9339 | Actions and uses of medicines | 3 | 9 | 60 | |
| ☆ | Unit 17 | D/617/9340 | Medicinal and non-medicinal treatments for central nervous system conditions | 3 | 6 | 30 | |
| ☆ | Unit 18 | K/617/9342 | Medicinal methods for the prevention, protection from and treatments of infections | 3 | 6 | 40 | |
| ☆ | Unit 19 | M/617/9343 | Medicinal treatments for endocrine, gynaecological and genitourinary conditions | 3 | 6 | 40 | |

| | Unit number | Regulated unit number | Unit title | Level | Credit | GLH | Notes |
|---|---|---|---|---|---|---|---|
| ☆ | Unit 20 | T/617/9344 | Medicinal treatments for sensory organ conditions | 3 | 5 | 30 | |
| ☆ | Unit 21 | F/617/9380 | Principles of safe manufacture of quality medicines in the pharmaceutical environment | 3 | 10 | 70 | |

**How the qualification is assessed**

Assessment is the process of measuring a learner's skill, knowledge and understanding against the standards set in a qualification.

This qualification is internally assessed and externally quality assured.

The assessment consists of:

- an internally assessed portfolio of evidence which is assessed by centre staff and externally quality assured by NCFE.

As this qualification is a competence-based qualification it must be assessed in line with the Assessment Principles for the Level 3 Diploma in the Principles and Practice for Pharmacy Technicians below.

Learners who aren't successful can resubmit work within the registration period; however, a charge may apply.

All the evidence generated by the learner will be assessed against the standards expected of a Level 3 learner for each learning outcome.

Unless stated otherwise in this qualification specification, all learners taking this qualification must be assessed in English and all assessment evidence presented for external quality assurance must be in English.

## Assessment principles

### 1. Introduction

This qualification is nationally recognised by Ofqual/Qualification Wales. The qualification is based on National Occupational Standards and is recognised by the statutory regulator, the General Pharmaceutical Council (GPhC), as meeting the Initial Education and Training Standards for Pharmacy Technicians (October 2017).

This qualification has been designed to confirm occupational competence for Pharmacy Technicians working in a pharmacy setting. The qualification meets the requirements of the pharmacy regulator and meets employer need in England and Wales. On completion of the qualification and subject to regulatory requirements, it will enable the learner to register with the GPhC as a Pharmacy Technician.

This qualification also meets the Skills for Health Qualification Design Criteria.

### 2. Assessment requirements/strategy

This qualification must be assessed in line with the NCFE qualification assessment strategy as well as in line with Skills for Health Assessment Principles for Occupational Competence (v4 November 2017).

This qualification consists of both skills units and knowledge units. All units are mandatory. This qualification will be graded Pass or Fail.

Learners are permitted to use one piece of evidence to demonstrate knowledge, skills and understanding across different assessment criteria and/or different units. This qualification should incorporate holistic assessment for the units where appropriate.

#### 2.1 Skills-based units

The primary method of assessment for the skills-based units is observation in the workplace by the Assessor. Across all of the qualification's skills-based units there must be at least three observations which cover the required skills. Evidence should be generated over a period of time to show consistent performance. Remote observation is not permitted.

Each skills-based assessment criterion should be met at least three times. One of the pieces of evidence must be an observation and the other two should complement this, for example a reflective statement, expert witness testimony or professional discussion.

Expert witness testimony may be used where it is difficult for an Assessor to observe aspects of practice. Expert witness testimony is NOT a substitute for the requirement of a minimum of three observations by the Assessor across the qualification, and a minimum of one observation by the Assessor per skills based assessment criterion.

If at any time during assessment the Assessor observes unsafe practice, the assessment will be stopped immediately.

Where the assessment activity involves individuals using pharmacy services, consent should be sought from the individual/patient that they are happy for the Assessor to be present and this should be recorded by the Assessor.

Learners will be expected to achieve all learning outcomes and assessment criteria. Where learners are not able to achieve the skills-based learning outcomes in their usual place of employment (eg a custodial

setting), the training provider and employer must ensure that the learner is given opportunities to achieve the learning outcomes in a work placement or another suitable setting. This may include simulation. Prior to starting the qualification, an assessment of the learner's employment setting should be carried out by the training provider and employer to identify such gaps. Simulation must take place in the work environment. It must be devised by the Assessor and agreed by the Internal Quality Assurer beforehand.

There are additional evidence requirements for some of the skills units (listed in the 'assessment guidance' section at the end of each unit) which must be met.

### 2.2 Knowledge-based units

For knowledge-based units, evidence will be assessed using internally set, internally marked written assessment tasks. NCFE will provide sample assessment tasks and assessment guidance to centres. The assessment tasks will be internally quality assured, then subject to externally quality assurance sampling by NCFE.

Centres must also carry out regular standardisation activities as part of the ongoing quality assurance of assessment decisions within the assessment tasks used for knowledge-based units, and assessment tasks should be refreshed every 12 months. Assessment tasks which are written by centres should be subject to internal quality assurance before being handed to learners. Each assessment task written by centres should undergo internal quality assurance before handing to each cohort to ensure that they still meet current legislation and guidance

### 2.3 Re-takes for knowledge-based units

Learners will be given a maximum of four weeks to complete each assessment task. If the learner does not pass the assessment task on the first attempt, they will be given a maximum of two further opportunities to re-take the assessment criteria that they failed on the first attempt. Re-takes should be submitted within two weeks (for each re-take).

Should a learner fail on the third occasion, the EQA must be informed and the outcome will be agreed jointly by the EQA, employer and centre jointly, keeping patient safety at the forefront of the discussion.

Centres should use recording documentation to record assessment task re-take results and feedback.

### 2.4 Additional assessment methods

In addition to the evidence requirements set out in each unit, a range of assessment methods have been identified for the qualification units which may include evidence generated using the following:

- question and answer sessions based on the learner's workplace activities
- learner's own personal statements/reflections
- professional discussion.

The additional assessment methods above should NOT be used instead of or in place of the stated assessment methodology in each unit.

The additional assessment methods provide the opportunity for different learning styles and individual needs of learners to be taken into account. If centres are proposing to use an assessment method that is not included within the recommended list, centres should contact the External Quality Assurer with full details of the proposed method, which will need formal approval from NCFE before it can be used.

## 3. Roles and responsibilities in the assessment process

### 3.1 Assessors

Assessors must:

- be a registered Pharmacist or a registered Pharmacy Technician who is occupationally competent in the area of practice to which the unit being assessed applies
- hold or be working towards the appropriate Assessor qualification. Assessors holding legacy qualifications must be able to demonstrate that they are assessing to current standards
- have credible experience which is clearly demonstrable through continuing learning and development.

### 3.2 Internal Quality Assurers

Internal Quality Assurers (IQA) must:

- be a registered Pharmacist or a registered Pharmacy Technician
- understand the nature and context of the Assessors' work and that of their learners due to the critical nature of the work and the legal and other implications of the assessment process
- have a working knowledge of pharmacy and/or GP dispensing settings, the regulation, legislation and codes of practice for the service (where applicable) at the time any assessment is taking place
- occupy a position that gives them authority and resources to co-ordinate the work of Assessors, provide authoritative advice, call meetings as appropriate, visit and observe assessments and carry out all the other internal quality assurance roles
- hold or be working towards an appropriate Internal Quality Assurance qualification. IQAs holding legacy qualifications must be able to demonstrate that they are working to current standards
- have undertaken the appropriate Assessor qualification identified by the regulator and practised as an Assessor prior to undertaking the IQA role.

It is recognised that IQAs are expected to verify the assessment process and not reassess the evidence provided.

### 3.3 Expert witnesses

The use of expert witness testimony is encouraged as a contribution to the provision of performance evidence presented for assessment. The role of the expert witness is to submit evidence to the Assessor as to the competence of the learner in meeting the unit. This evidence must directly relate to learner's performance in the workplace which has been seen by the expert witness.

The expert witness must be either:

- a registered Pharmacist or a registered Pharmacy Technician who is occupationally competent and knowledgeable in the area of practice to which the unit being assessed applies.

The expert witness must have:

- a working knowledge of units on which their expertise is based
- credible experience which is clearly demonstrable through continuing learning and development.

Centres are responsible for ensuring that all expert witnesses are familiar with the standards for those units for which they are to provide expert witness testimony. They must also understand the centre's recording requirements and will need guidance on the skills required to provide evidence for the units. It is not necessary for expert witnesses to hold an assessor qualification because the qualified Assessor makes all assessment decisions about the acceptability of evidence regardless of source. This would include expert witness testimony.

### 3.4 Co-ordinating and Lead Assessors

In order that the requirements for occupational competence of Assessors and expert witnesses can be met while allowing flexibility of delivery, learners may have more than one Assessor or expert witness involved in the assessment process.

Where more than one Assessor is involved in the qualification there must be a named Assessor who is responsible for the overall co-ordination of the assessment for each learner. This person will be responsible for integrating, planning and directing the assessment for the whole qualification. Where more than one Assessor is involved in a unit, there must be a named Assessor who is responsible for the overall co-ordination of the assessment for that unit. The Lead Assessor must ensure that the best use is made of all available evidence and will make the final judgement of competence in each unit where other Assessors have been involved. It is expected that all Assessors will work closely with Internal Quality Assurers to ensure standardised practice and judgements within the assessment process.

### 3.5 External Quality Assurers

External Quality Assurers (EQAs) must:

- be a registered Pharmacist or a registered Pharmacy Technician
- have working knowledge of pharmacy and/or GP dispensing settings, the regulation, legislation and codes of practice for the service (where applicable) at the time any assessment is taking place
- hold, or be working towards, the appropriate external verifier qualification as identified by the qualifications regulators. EQAs holding legacy qualifications must be able to demonstrate that they are assessing to current standards
- have credible experience which is clearly demonstrable through continuing learning and development.

EQAs who are not yet qualified against the appropriate competences but have the necessary occupational competence and experience can be supported by a qualified EQA who does not necessarily have the occupational expertise or experience.

EQAs will monitor the centre's processes and practice to ensure they meet the NCFE, qualification and regulatory requirements. The EQA will also provide support to centre staff and give advice and guidance to facilitate improvements.

**Progression to higher-level studies**

This qualification aims to provide learners with a number of progression options, including higher-level studies at university or FE colleges. The skills required to progress to higher academic studies are different from those required at Levels 1 and 2. Level 3 qualifications enable the development of these skills. Although there is no single definition of higher-level learning skills, they include:

- checking and testing information
- supporting points with evidence
- self-directed study
- self-motivation
- thinking for yourself
- analysing and synthesising information/materials
- critical thinking and problem solving
- working collaboratively
- reflecting upon learning and identifying improvements.

Level 3 criteria can require learners to **analyse**, **draw conclusions**, **interpret** or **justify**, which are all examples of higher-level skills. This means that evidence provided for the portfolio will also demonstrate the development and use of higher-level learning skills.

If you need any further information, please refer to the CACHE website.

**Internal assessment**

We have created some sample tasks for the internal assessment of units. You can contextualise these tasks to suit the needs of your learners to help them build up their portfolio of evidence. The tasks have been designed to cover some skills based learning outcomes across units and provide opportunities for stretch and challenge. For further information about contextualising the tasks, please contact the Curriculum team.

We have created two internal assessment tasks for this qualification. They can be downloaded from the member's area of our website and they cover the following units:

- Unit 07 Undertake medicines reconciliation and supply
- Unit 08 Assemble and check dispensed medicines and products.

**The assessment tasks are not mandatory but the skills assessments are a mandatory requirement of the course.**

Each learner must create a portfolio of evidence generated from appropriate assessment tasks which demonstrates achievement of all the learning outcomes associated with each unit. The assessment tasks should allow the learner to respond to a real-life situation that they may face when in employment. On completion of each unit, learners must declare that the work produced is their own and the Assessor must countersign this.

Internally assessed work should be completed by the learner in accordance with the Qualification Specification. A representative number of assessment hours should be timetabled into the scheme of work. Internal assessment hours must be administered outside of scheduled teaching and learning hours and should be supervised and assessed by the Tutor. Assessment activities can be integrated throughout, although kept separate from the teaching of the unit, and do not have to take place directly at the end of the unit.

If a centre chooses to create their own internal assessment tasks, the tasks must:

- be accessible and lead to objective assessment judgements
- be subject to internal quality assurance processes
- permit and encourage authentic activities where the learner's own work can be clearly judged
- refer to Course File Documents on the NCFE website.

**Supervision of learners and your role as an Assessor**

Guidance on how to administer the internal assessment and the support you provide to learners can be found on the NCFE website.

**Not Yet Achieved grade**

A result that does not achieve a Pass grade will be graded as Not Yet Achieved. Learners may have the opportunity to resit, as re. the rules defined within the assessment principles.

# Section 2

## Unit content and assessment guidance

**Unit content and assessment guidance**

This section provides details of the structure and content of this qualification.

The types of evidence listed are for guidance purposes only. Within learners' portfolios, other types of evidence are acceptable if all learning outcomes are covered and if the evidence generated can be internally and externally quality assured. For approval of methods of internal assessment other than portfolio building, please contact our Quality Assurance team.

The explanation of terms explains how the terms used in the unit content are applied to this qualification. This document can be found in Section 3.

For further information or guidance about this qualification, please contact our Customer Support team.

## Unit 01 Principles of person-centred approaches for Pharmacy Technicians (F/617/9282)

| | |
|---|---|
| **Unit summary** | The aim of this unit is to enable learners to develop knowledge and understanding of person-centred approaches, including communication, in pharmacy services. It also includes the role and responsibilities of the Pharmacy Technician in relation to safeguarding. |
| **Credit value** | 5 |
| **Guided Learning Hours** | 30 |
| **Total Unit Time** | 50 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand effective communication within pharmacy services | 1.1 Describe the **main purpose of communication** with individuals in pharmacy services | | |
| | 1.2 Summarise **responsibilities** of a Pharmacy Technician in relation to communication in pharmacy services | | |
| | 1.3 Assess the importance of effective communication across organisations | | |
| | 1.4 Describe the **basic principles of motivational interviewing** | | |
| | 1.5 Explain **techniques for managing challenging situations** | | |
| | 1.6 Describe **techniques for creating a suitable environment** for open and confidential discussion with the individual or third party | | |
| | 1.7 Explain the **challenges to communication** encountered within a Pharmacy Technician role | | |
| | 1.8 Describe the **support and services** available to enable individuals to communicate effectively | | |
| 2. Understand person-centred approaches in pharmacy services | 2.1 Describe the principles of **person-centred care** | | |
| | 2.2 Summarise **responsibilities** of a Pharmacy Technician in relation to person-centred approaches | | |
| | 2.3 Explain why **person-centred values** should influence all aspects of | | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| | healthcare within and between a range of pharmacy services | | |
| 3. Understand the role and responsibilities of the Pharmacy Technician in relation to safeguarding individuals | 3.1 Define **safeguarding** | | |
| | 3.2 Explain how **duty of care** contributes to the safeguarding of individuals | | |
| | 3.3 Explain how to **recognise safeguarding concerns** | | |
| | 3.4 Explain the process for disclosing or referring concerns about safeguarding | | |
| | 3.5 Explain the **role and responsibilities** of the Pharmacy Technician in relation to safeguarding individuals | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health's Assessment Principles.<br><br>Pharmacy services may include:<br><br>• hospital settings<br>• community<br>• GP Practices<br>• prisons.<br><br>An individual refers to someone requiring care or support; it will usually mean the person or people supported by the learner. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Main purpose of communication:** gaining consent; involving others; involving other professionals; supporting others; enabling others; listening and understanding; giving information to individuals and other professionals; advising on pharmacy-related matters; obtaining information from individuals and other professionals; adapting information for individuals and other professionals |
| | **Responsibilities:** legal; organisational; professional |
| | **Basic principles of motivational interviewing:** open questions; affirmation; reflection; summary |
| | **Techniques for managing challenging situations:** build rapport and empathy; change the environment; defuse the emotion; explore options available; agree next steps; inform relevant others and/or other professionals |
| | **Techniques for creating a suitable environment:** quiet area away from distractions and other people; encourage open and honest discussion; promote confidentiality; respect |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| | privacy |
| | **Challenges to communication:** verbal vs non-verbal; social factors; cultural factors; religious beliefs; environment; disabilities; learning difficulties |
| | **Support and services:** translation services; third sector organisations; support groups; training |
| LO2 | **Person-centred care:** respecting diversity; respect for values, preferences and needs; listening to the individual; providing information and education; involvement of individual, carers and key people in decisions about their care |
| | **Responsibilities:** legal; organisational; professional |
| | **Person-centred values:** confidentiality; individuality; rights; choice; privacy; independence; dignity; respect; partnership; care; compassion; courage; communication; competence |
| LO3 | **Safeguarding:** Working Together to Safeguard Children 2018; current Care Act Statutory Guidance; whistleblowing |
| | **Duty of care:** the duty to report any acts or omissions that could be detrimental to individuals, yourself, colleagues or your employer |
| | **Recognise safeguarding concerns:** signs and symptoms; behaviours |
| | **Role and responsibilities:** trained to an appropriate level; familiar with local and national policies and procedures; aware of who to contact in the health service, social services or the police in the event of a safeguarding concern; familiar with the GPhC Standards for Pharmacy Professionals |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 01
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 02 Principles of health and safety for Pharmacy Technicians (J/617/9283)

| | |
|---|---|
| **Unit summary** | The aim of this unit is to provide an in-depth understanding of health and safety requirements in relation to the Pharmacy Technician role. The learning from this unit should be utilised to underpin other learning for Pharmacy Technicians, and skills will be assessed throughout other units within this qualification.<br><br>Learners should be made aware that Emergency First Aid and First Aid at Work is not assessed through this unit. A standalone qualification should be undertaken if this is a required element of the learner's role. |
| **Credit value** | 2 |
| **Guided Learning Hours** | 10 |
| **Total Unit Time** | 20 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand the responsibilities relating to health and safety in the workplace | 1.1 Outline the **legislation** relating to health and safety in pharmacy services | | |
| | 1.2 Evaluate the **standards** and **procedures** relating to health and safety in pharmacy services | | |
| | 1.3 Analyse the main health and safety responsibilities for:<br>• Pharmacy Technician<br>• employer<br>• **others** in the workplace. | | |
| | 1.4 Reflect on own compliance with health and safety procedures | | |
| 2. Understand health and safety risk management | 2.1 Summarise the **principles of risk management** | | |
| | 2.2 Summarise the **components of a risk management system** | | |
| | 2.3 Explain the use of health and safety risk assessments in relation to **workplace practices** | | |
| 3. Understand procedures for responding to | 3.1 Describe the procedures for dealing with **accidents and emergencies** in own workplace | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| accidents and emergencies | 3.2 Analyse the responsibilities of a Pharmacy Technician in responding to accidents and emergencies | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles.<br><br>For AC3.2 learners must comment on requirements for first aid training. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Legislation:** Health and Safety at Work Act 1974; manual handling; disposal of pharmaceutical waste; Control of Substances Hazardous to Health 2002 (COSHH); workplace injury; workplace ill health; Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR); safe working environment; safeguarding; Deprivation of Liberty; Provision for first aid at work |
| | **Standards:** GPhC Professional Standards |
| | **Procedures** should reference the standard operating procedures relevant to own role. Procedures should also cover how to access information and support relating to health and safety, incident reporting and disposal of pharmaceutical waste |
| | **Others:** individuals; customers; colleagues; visitors |
| LO2 | **Principles of risk management:** Health and Safety Executive principles of risk management www.hse.gov.uk/risk/principles.htm |
| | **Components of a risk management system**: risk assessment; risk avoidance; risk transfer, mitigation or prevention; risk retention |
| | **Workplace practices:** Quality; stock management; dispensing; disposal of pharmaceutical waste; handling hazardous substances; public areas; working with individuals; work tasks; work stations |
| LO3 | **Accidents and emergencies** should cover spillages of pharmaceutical products/waste; medical conditions/emergencies; sudden illness; slips, trips, falls; minor injury etc |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 02
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 03 Personal development for Pharmacy Technicians (L/617/9284)

| | |
|---|---|
| **Unit summary** | The aim of this unit is to ensure that the Pharmacy Technician has a full understanding of the expectations of the role and is able to reflect on own practice and performance, including identifying opportunities for development. This unit also covers developing a personal development plan. |
| **Credit value** | 5 |
| **Guided learning hours** | 25 |
| **Total Unit Time** | 50 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand how the role of the Pharmacy Technician is governed | 1.1 Explain the impact of **statutory regulation** in pharmacy services | | |
| | 1.2 Discuss how **legislation** and **standards** govern the role of the Pharmacy Technician | | |
| 2. Understand professionalism within the role of a Pharmacy Technician | 2.1 Explain the importance of the **professional standards** for Pharmacy Technicians | | |
| | 2.2 Explain the importance of working within own scope of practice | | |
| | 2.3 Explain **ethical dilemmas** that may present to a Pharmacy Technician within own scope of practice | | |
| | 2.4 Explain the purpose of **revalidation** for Pharmacy Technicians | | |
| 3. Understand how to reflect on own practice | 3.1 Assess the importance of **elements of reflective practice** in continuously improving the quality of service provided | | |
| | 3.2 Explain different **models of reflection** | | |
| 4. Be able to evaluate own performance | 4.1 Apply a model of reflection to evaluate own performance | | |
| | 4.2 Use **feedback** to evaluate own performance | | |
| 5. Be able to recognise behaviour that does not | 5.1 Recognise own **poor performance** and **respond appropriately** | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| meet the required professional standard | 5.2 Recognise **poor performance** of others and take **appropriate action** | | |
| | 5.3 Explain the whistleblowing procedure in line with regulatory guidelines | | |
| 6. Be able to develop a personal development plan | 6.1 Assess the importance of **continuing professional development (CPD)** for Pharmacy Technicians | | |
| | 6.2 Review and prioritise own **development needs** | | |
| | 6.3 Work with others to develop a **personal development plan** | | |
| 7. Be able to contribute to the development of others | 7.1 Identify learning needs of **others** | | |
| | 7.2 Support individuals with developing their own personal development | | |
| | 7.3 Review own **contribution** to the development of others | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles.<br><br>Evidence of personal development and reflection should be collected across the duration of the qualification. Personal development plans should be developed as part of the overall appraisal process. For learning outcome 5, simulation may be permitted if the learner is unable to generate evidence through normal work activity.<br><br>There is an expectation that reflection and personal development is ongoing during the whole learning programme. It should include evidence that a personal development plan is in place and reviewed as part of different placements. Reflection should include a variety of methods including feedback from colleagues. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Statutory regulation**: premises; individual pharmacy professionals; data protection; confidentiality; duty of candour |
| | **Legislation:** Medicines Act 1968, Human Medicines Regulations 2012: falsified medicines legislation; Medicines and Healthcare products Regulatory Agency (MHRA); European Medicines Agency (EMA); licensed status (unlicensed medicines, licensed medicines, such as Manufacturer's Licence (ML, MIA), Manufacturer's Specials Licence (MS), Section 10/Part 10 exemption requirements); environmental and waste regulations |
| | **Standards**: organisational policies and procedures; classification, labelling and packaging of substances and mixtures; safe and secure handling of medicines |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO2 | **Professional standards:** General Pharmaceutical Council - Standards for Pharmacy Professionals |
| | **Ethical dilemmas:** breaches of confidentiality; problems with professional appearance; whistleblowing; problems with unprofessional behaviour; limits of competence; protecting dignity; providing false information |
| | **Revalidation:** General Pharmaceutical Council - Revalidation Framework |
| LO3 | **Elements of reflective practice**: focus on person-centred care; time management; decision making; professional judgement; team working; communication |
| | **Models of reflection**: Borton (1970); Kolb and Fry (1975); Argyris and Schon (1978); Gibbs (1988); Johns (1995); Brookfield (1998) |
| LO4 | **Feedback** could be from: colleagues; line manager; service users |
| LO5 | **Poor performance:** putting individuals at risk; working outside of own scope of competence; unprofessional behaviour; providing incorrect advice; not meeting the required standard of a pharmacy professional |
| | **Responding appropriately**: admitting fault; acting openly and honestly when things go wrong; raising concerns with the appropriate person/agency even when not easy to do so; whistleblowing |
| | **Appropriate action**: raising concerns with the appropriate person/agency; addressing poor performance with the individual involved; whistleblowing |
| LO6 | **Continuing professional development (CPD)** refers to the process of tracking and documenting the skills, knowledge and experience gained both formally and informally in the workplace, beyond any initial training. It is a record of what is experienced, learnt and then applied |
| | **Development needs**: learning needs; interests; development opportunities |
| | A **personal development plan** may have a different name but will record information including agreed objectives for development, proposed activities to meet objectives, timescales for review, etc |
| LO7 | **Others**: team members; other colleagues |
| | **Contribution**: demonstration of leadership skills; applying professional practice; providing constructive feedback; empowering others; providing opportunities; encouraging others to learn from mistakes; coaching or mentoring |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 03
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 04 Principles of health promotion and wellbeing in pharmacy services (R/617/9285)

| | |
|---|---|
| **Unit summary** | The aim of this unit is to enable learners to develop knowledge and understanding of the factors that influence individuals' health and wellbeing, the concept of public health in relation to pharmacy services, the role of the Pharmacy Technician in the promotion of public health and how theories of behaviour change can be applied to health promotion. |
| **Credit value** | 5 |
| **Guided Learning Hours** | 35 |
| **Total Unit Time** | 50 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| 1. Understand factors that influence health and wellbeing | 1.1 Explain the relationship between **lifestyle** and health and wellbeing | | |
| | 1.2 Analyse **factors** which impact on health and wellbeing | | |
| | 1.3 Explain the **impact** of health and wellbeing on society | | |
| 2. Understand the relationship between public health and pharmacy services | 2.1 Explain the **functions** of public health organisations | | |
| | 2.2 Explain the role of health promotion in relation to public health | | |
| | 2.3 Explain the role of pharmacy services in supporting public health | | |
| | 2.4 Explain the role of pharmacy services in current health promotion policies, campaigns and **interventions** | | |
| 3. Understand how principles of behaviour change can be applied to health promotion | 3.1 Describe **principles** of effective behaviour change | | |
| | 3.2 Explain **factors** that influence behaviour change | | |
| | 3.3 Describe **barriers** to behaviour change | | |
| | 3.4 Explain how **health promotion approaches** can affect behaviour change | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 4. Understand the role of the Pharmacy Technician in the promotion of public health | 4.1 Summarise the **role of the Pharmacy Technician** in relation to health promotion activities | | |
| | 4.2 Explain how the Pharmacy Technician can access **support** to develop own knowledge to promote public health initiatives and services to individuals | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles.<br><br>An individual refers to someone requiring care or support; it will usually mean the person or people supported by the learner. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Lifestyle:** diet; exercise; smoking; substance use; recreation; risky behaviour |
| | **Factors:** individual and wider determinants; biological; chemical; physical; social; psychosocial |
| | **Impact:** management of disease; services and resources; economics; dependency; inequalities |
| LO2 | **Functions:** health protection; health improvement; health promotion |
| | **Interventions:** four service domains – optimising the use of medicines, supporting people to self-care, supporting people to live healthier lives, supporting people to live independently; Making Every Contact Count (MECC); multi-disciplinary team working, partnership and co-production; public health interventions: antibiotic resistance, alcohol, cancer, cardiac health, diabetes, flu, healthy eating and obesity, deprivation and poverty; mental health and wellbeing, oral health, physical activity, respiratory management, self-care, sexual health, smoking, substance misuse, etc |
| L03 | **Principles:** goals and planning; feedback and monitoring; social support |
| | **Factors:** individual; social; environmental |
| | **Barriers:** individual; social; environmental |
| | **Health promotion approaches:** medical; educational; empowerment; evidence-based |
| LO4 | **Role of the Pharmacy Technician:** raise awareness; provide information and advice; support behaviour change; signpost to public health services; referral to other services/healthcare professionals |
| | **Support:** formal and informal sources of support |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 04
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 05 Contribute to service improvement in the delivery of pharmacy services (Y/617/9286)

| | |
|---|---|
| **Unit summary** | This unit covers the knowledge and skills required to improve the delivery of pharmacy services. It covers how audit and quality improvement systems are part of service improvement. This unit also covers the knowledge and skills required to deliver pharmacy services for the benefit of individuals. The management of complaints is included within this unit. |
| **Credit value** | 6 |
| **Guided Learning Hours** | 30 |
| **Total Unit Time** | 60 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand the principles of audit in pharmacy services | 1.1 Explain the **principles** that underpin:<br>• external audit<br>• internal audit. | | |
| | 1.2 Describe the role of **organisations** responsible for external audit | | |
| | 1.3 Explain how audit contributes to service improvement | | |
| 2. Understand the principles of quality improvement in pharmacy services | 2.1 Explain the **principles** that underpin quality improvement strategies | | |
| | 2.2 Explain how quality improvement contributes to service improvement | | |
| 3. Understand how partnership working contributes to improving the delivery of pharmacy services | 3.1 Explain the importance of working with other **organisations** in pharmacy services | | |
| | 3.2 Describe the benefits of effective communication across organisations | | |
| 4. Be able to deliver pharmacy services for the benefit of individuals | 4.1 Use **appropriate communication techniques** to **obtain relevant information** | | |
| | 4.2 Identify the needs of the individual | | |
| | 4.3 Provide information clearly and in a way that the individual can understand | | |
| | 4.4 Advise the individual about **relevant products and services** to meet their needs | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| | 4.5 Explain the advantages and disadvantages of each option for the individual and the organisation | | |
| | 4.6 Agree the best option with the individual and for the organisation | | |
| | 4.7 Refer any issues outside of own scope of competence to the relevant person | | |
| | 4.8 Explain the information that should be recorded in accordance with organisational policies and standards | | |
| 5. Be able to respond to complaints | 5.1 Explain the organisational policy relating to the handling of complaints | | |
| | 5.2 Respond effectively to resolve complaints within scope of own competence | | |
| | 5.3 Refer any issues outside of the limits of own competence to the relevant person in accordance with **standard operating procedures (SOPs)** | | |
| | 5.4 Explain the steps to take when conflict escalates beyond the scope of own competence | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy.<br><br>Learning outcomes 4 and 5 must be assessed in a real work environment by the Assessor. For learning outcomes 4 and 5, simulation may be permitted if the learner is unable to generate evidence through normal work activity.<br><br>An individual refers to someone requiring care or support; it will usually mean the person or people supported by the learner. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Principles**: process; recording; error reporting; reasons for audit; implications and outcomes of audit; roles and responsibilities in the audit process |
| | **Organisations**: Medicines and Healthcare products Regulatory Agency (MHRA); Care Quality Commission (CQC), General Pharmaceutical Council (GPhC) |
| LO2 | **Principles**: data and measurements; timelines; process mapping; evaluation; process and |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| | system redesign; standardisation; demand, capacity and workflow; involving and engaging others |
| LO3 | **Organisations** may include: suppliers; commercial organisations; NHS Trusts; Health Boards; care homes; community pharmacies; GPs; prisons |
| LO4 | **Appropriate communication techniques:** verbal; non-verbal; listening; questioning; showing empathy and sensitivity; adapting to the verbal and non-verbal forms of communication offered by the individual; checking own understanding of individual's needs or concerns |
| | **Obtain relevant information:** needs/concerns; medicines history; personal circumstances |
| | **Relevant products and services:** over-the-counter medicines advice; smoking cessation; prescribed medicines advice, electronic prescription service, etc |
| LO5 | **Standard operating procedures (SOPs)**: skills and responsibilities; scope of role; interventions and referrals; handover |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 05
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 06 Principles for the management of pharmaceutical stock (K/617/9289)

| | |
|---|---|
| **Unit summary** | This unit covers knowledge of pharmaceutical stock control requirements, including ordering and receiving stock from the correct supplier and dealing with complex orders such as seasonal variations. It also covers the safe storage of stock and stock checking. |
| **Credit value** | 8 |
| **Guided Learning Hours** | 65 |
| **Total Unit Time** | 80 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| 1. Understand governance requirements relating to the management of pharmaceutical stock | 1.1 Describe **legislation** and **regulatory governance** that applies to the **management** of pharmaceutical stock | | |
| | 1.2 Summarise a range of **procurement considerations** that apply to the ordering of pharmaceutical stock | | |
| | 1.3 Explain the importance of following **standard operating procedures (SOPs**) for the management of pharmaceutical stock | | |
| 2. Understand the considerations for ordering pharmaceutical stock | 2.1 Describe the order requirements for **pharmaceutical stock** | | |
| | 2.2 Discuss the influence of **seasonal factors** when ordering pharmaceutical stock | | |
| | 2.3 Explain the importance of **special order requirements** when ordering pharmaceutical stock | | |
| | 2.4 Summarise how **orders are placed** in accordance with standard operating procedures (SOPs) | | |
| | 2.5 Explain the difference between generic and branded medicines | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 3. Understand how to complete the procurement process for pharmaceutical stock | 3.1 Explain the **process** for procuring pharmaceutical stock | | |
| | 3.2 Explain the **possible implications** of outstanding orders | | |
| | 3.3 Evaluate the **options** for dealing with outstanding orders | | |
| | 3.4 Explain the importance of notifying the **appropriate person(s)** of changes in pharmaceutical stock availability | | |
| 4. Understand how to receive pharmaceutical stock | 4.1 Explain the process of confirming receipt of deliveries in accordance with **standard operating procedures** | | |
| | 4.2 Discuss how to deal with **discrepancies** with received pharmaceutical stock | | |
| | 4.3 Explain how **drug recall** procedures are implemented | | |
| | 4.4 Explain the **impact on individuals' care** if orders are not received | | |
| | 4.5 Explain the importance of notifying the **appropriate person** of any problems regarding the receipt of pharmaceutical stock | | |
| 5. Understand how to store pharmaceutical stock | 5.1 Explain the importance of placing received stock in correct storage taking into account:<br>• **storage requirements**<br>• **stock rotation procedures** | | |
| | 5.2 Explain the importance of maintaining the cold chain | | |
| | 5.3 Explain how to ensure that storage conditions are fit for purpose | | |
| | 5.4 Discuss the **consequences** of storage conditions not being maintained | | |
| | 5.5 Explain how to dispose of outdated, damaged or decontaminated stock in line with standard operating procedures | | |
| 6. Understand how to carry out pharmaceutical stock management | 6.1 Explain the importance of good **stock management** | | |
| | 6.2 Evaluate ways of managing overstocking | | |
| | 6.3 Explain the purpose of **stock checks** and what they should include | | |
| | 6.4 Explain the **action** to be taken in respect of expired and damaged stock | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE assessment strategy.<br><br>An individual refers to someone requiring care or support; it will usually mean the person or people supported by the learner. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Legislation** may include that which is relevant to: supplying medicines; ordering licensed, unlicensed and clinical trials medication; data protection; equality and diversity; health and safety |
| | **Regulatory governance**: General Pharmaceutical Council - Professional Standards; current National Institute for Health and Care Excellence (NICE) guidance |
| | **Management** includes: ordering; receiving; maintaining |
| | **Procurement considerations:** licence requirement, eg Wholesale Distribution Authorisation (WDA) or Wholesale Dealers Licence (WDL); Falsified Medicines Directive; appropriate transmissible spongiform encephalopathies (TSEs) certificates for unlicensed drugs; genuine customers; unlicensed medicine requirements; parallel imports quality control, eg certificates of conformity/analysis; financial considerations; controlled drug requirements; automated drugs cabinets; local or regional pharmaceutical contracts; commercial medicines units; Investigational Medicinal Products (IMPs) |
| | **Standard operating procedures (SOPs):** risk management, incident management and error reporting systems, safe storage of medicines, handling of cytotoxic or controlled drugs, automated ordering, use of technology, use of personal protective equipment (PPE) |
| LO2 | **Pharmaceutical stock:** containing the correct: item(s), form, strength, amount required, doses; the impact of the formulation on the route of administration |
| | **Seasonal factors:** the importance of taking account of seasonal variations when ordering pharmaceutical stock; the importance of ensuring that stock is available based on the needs of individuals; the impact stock availability may have on the care of individuals |
| | **Special order requirements:** knowing the differences between licensed, unlicensed, specials, controlled drugs, imported and clinical trials medicines; the importance of the Procurement and Quality Assurance process when ordering this stock |
| | **Orders are placed:** know how to place an order with the appropriate supplier following standard operating procedures; understand the necessary checks for ordering and appropriate person to approve orders; know the sources and suppliers of stock; understand processes for:<br>• ordering with the correct supplier/location<br>• using the documentation/method required in accordance with standard operating procedure;<br>understand the difference between branded and generic medicines and the importance of brand specific requests. |
| LO3 | **Process:** local policy and procedures including how to order unlicensed medication; electronic ordering systems; written orders; contract parameters |
| | **Possible implications:** impact stock availability has on the care of individuals |
| | **Options**: action to be taken if stock is unavailable; action required to ensure that the care of individuals is not affected; monitoring progress of outstanding orders |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| | **Appropriate person(s):** line manager; Pharmacist; individual; Pharmacy Technician or supervisor |
| LO4 | **Standard operating procedures (SOPs):** current local guidelines that apply to the receipt of pharmaceutical stock including documentation requiring completion upon receipt of orders |
| | **Discrepancies:** the action to be taken if there are any discrepancies with received stock, including:<br>• stock is not on the original order<br>• stock is not the complete order<br>• stock is short-dated or expired<br>• stock has the wrong batch number<br>• stock is damaged, contaminated or suspected to be counterfeit<br>• stock has not been stored correctly during transportation<br>• quarantine procedures. |
| | **Drug recall:** local and national recall procedures, how and why these are initiated and followed; understanding the supply chain – product alternatives; certificates of analysis and conformity |
| | **Impact on individuals' care:** understand the importance of how receiving the correct form and quantity of stock can affect the care of individuals; identify the different forms of medicines and why it is important to stock appropriate quantities of the correct form and strength |
| | **Appropriate person:** identify the appropriate person to notify of the availability of the stock where the goods received are for a special or an outstanding order or not available, eg manager, colleagues, the individual |
| LO5 | **Storage requirements:** location; transport and secure storage arrangements; maintenance of cold chain, cytotoxic/radiopharmaceutical materials; clinical trials; controlled drugs; volatile; flammable; routine; ambient |
| | **Stock rotation procedures:** understand the importance of stock rotation and the safe storage of stock; reasons for ensuring stock rotation occurs to reduce wastage |
| | **Consequences**: waste; cost; availability; care of the individual |
| LO6 | **Stock management:** the quantity of stock, taking account of stock usage and seasonal variations; the input and retrieval of stock data to ensure levels are appropriate:<br>• stock rotation<br>• checking expiry dates of stock<br>• identifying damaged, contaminated or deteriorated stock;<br>understand reasons for ensuring stock rotation occurs to reduce wastage; understand how automation is used to control stock; know the importance of recording, storing and retrieving stock information in accordance with organisational procedures. |
| | **Stock checks:** know the purpose of carrying out stock checks at regular intervals following agreed guidelines to ensure stocks remain:<br>• stored appropriately and in a suitable condition<br>• in sufficient quantity<br>• consistent with computerised records where appropriate;<br>the importance of taking appropriate action if stock is unavailable; the consequences of over stocking |
| | **Action** to be taken if stock: |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| | • is short-dated or expired<br>• is damaged or contaminated<br>• has a batch number for which drug alerts/recalls have been issued<br>• has been returned to the pharmacy. |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 06
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 07 Undertake medicines reconciliation and supply (T/617/9294)

The following units must be achieved before undertaking this unit:

- Unit 01 Principles of person-centred approaches for Pharmacy Technicians
- Unit 02 Principles of health and safety for Pharmacy Technicians
- Unit 16 Actions and uses of medicines.

| | |
|---|---|
| **Unit summary** | This unit covers the skills that a Pharmacy Technician will need to take and reconcile a medication history. Underpinning knowledge about medicines and their action and use are covered by other units in this qualification. This unit also includes the identification of discrepancies and issues that may arise as part of the process and dealing with these in an appropriate manner. Additionally, the unit also covers assessing the suitability of an individual's own medicines for use. It includes determining whether the medicines are suitable and re-ordering medicines and products to ensure the individual maintains a sufficient supply. |
| **Credit value** | 12 |
| **Guided Learning Hours** | 60 |
| **Total Unit Time** | 120 |
| **Level** | 4 |
| **Mandatory/optional** | Mandatory |
| **Assessment tasks** | **Please see the assessment task saved in the member's area of the website.** |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand governance requirements for retrieving and reconciling information about an individual's medicines | 1.1 Describe **legislation and standards** relating to retrieving and reconciling information about an individual's medicines | | |
| | 1.2 Describe **national guidelines** relating to retrieving and reconciling information about an individual's medicines | | |
| | 1.3 Describe how **other governance requirements** relate to retrieving and reconciling information about an individual's medicines | | |
| 2. Be able to take a medication history from individuals | 2.1 **Communicate** with **individuals** in a manner appropriate to their needs | | |
| | 2.2 Discuss the **purpose** of the consultation with the individual | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| | 2.3 Use appropriate **questioning techniques** to determine the individual's **medication history** | | |
| | 2.4 Establish the details of any **adverse drug reactions (ADR) or interactions** | | |
| | 2.5 Determine whether the medication remains **suitable** for the individual | | |
| | 2.6 Refer queries outside of own scope of competence to the **appropriate person** | | |
| 3. Be able to verify the accuracy of the individual's medication history | 3.1 Obtain information from a **range of available sources** to validate the accuracy of the medication history | | |
| | 3.2 Explain the **benefits** of the available sources used to validate the accuracy of the medication history | | |
| | 3.3 Explain the **limitations** of the available sources used to validate the accuracy of the medication history | | |
| | 3.4 **Verify** the accuracy of the medication history | | |
| 4. Be able to reconcile the verified medication history with the list of medicines currently prescribed | 4.1 Compare the verified medication history with the **list of medicines that are currently prescribed** for the individual | | |
| | 4.2 Refer discrepancies to the **appropriate person** in line with organisational requirements | | |
| | 4.3 Explain the **action to take** if the individual's medicines could not be reconciled | | |
| | 4.4 Explain the importance of **recording** the outcomes of the medicine reconciliation in line with governance requirements | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 5. Be able to assess individuals' own medicines or products for use | 5.1 Explain the **purpose of checking the individual's own medicines** or products for use | | |
| | 5.2 Identify any **issues** with the individual's medication or products | | |
| | 5.3 Assess any issues with the individual's medication or products | | |
| | 5.4 Discuss with the individual how to **optimise** their medication to achieve the best outcomes in line with standard operating procedures | | |
| | 5.5 Make decisions regarding the **appropriate handling** of unsuitable items in line with organisational procedures | | |
| | 5.6 Take action in line with organisational requirements if there are any issues beyond scope of competence | | |
| 6. Be able to order medicines and products for individuals to ensure sufficient supply | 6.1 Review the medicines that have been prescribed for the individual to identify the correct medicine/product to be ordered | | |
| | 6.2 Order the medicine/product in accordance with organisational procedures | | |
| | 6.3 Identify any **issues** relating to initial or repeat supply and take the necessary action | | |
| | 6.4 Refer any issues outside of own scope of competence to the **appropriate person** | | |
| | 6.5 Complete the relevant documentation in line with organisational requirements | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment.<br><br>An individual refers to someone requiring care or support; it will usually mean the person or people supported by the learner.<br><br>Learning outcomes 2, 3, 4, 5 and 6 must be assessed in a real work environment by the Assessor. Each skills-based assessment criterion should be met at least three times. One of the pieces of evidence should be an observation, which should include correctly collecting accurate information |

| **Delivery and assessment** |
|---|
| from a range of sources for a range of different individuals and the other two should complement this, for example a reflective statement, witness testimony or professional discussion.<br><br>For LO5, A formative competence assessment log must be completed which can be used in the overall portfolio for the qualification and should cover the checking of 100 items of an individual's own drugs (patient's own drugs) and appropriate decisions about the suitability of these items.<br><br>Individual's medicines, which could include:<br><br>• prescribed medicines<br>• controlled drugs<br>• compliance aids<br>• over-the-counter medicines<br>• herbal medicines, vitamins and food supplements<br>• homeopathic medicines.<br><br>Helpful resource: Consultation Skills for Pharmacy www.consultationskillsforpharmacy.com/ |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Legislation and standards:** health and safety; valid consent; information governance; data protection; General Pharmaceutical Council - Standards for Pharmacy Professionals |
| | **National guidelines:** Current National Institute for Health and Care Excellence (NICE) guidance; Royal Pharmaceutical Society (RPS) |
| | **Other governance requirements:** risk management, incident management and error reporting systems, Patient Medication Records (PMR) |
| LO2 | **Communicate:** using verbal and non-verbal communication techniques; confirming valid consent; capacity; disability, behaviours, recognising diversity, values and beliefs; identifying barriers to effective communication and how to overcome/address these; clarifying information that is not clear |
| | **Individuals:** patients; third parties; carers |
| | **Purpose:** safety of the individual; help individual with any medicines-related issues; identify any discrepancies; provide individual with opportunity to ask questions |
| | **Questioning techniques:** open and closed questions; funnel questions; probing questions |
| | A **medication history** should include determining the following: patient identity; allergy status; medicines that have been started recently; medicines that have stopped; medicines that have changed; medicines that are used regularly; medicines that are used occasionally; medicines that are swapped or shared between individuals or their family and friends; medicines that are bought from other sources; medicines prescribed by the hospital. Depending on your work setting you may also include: if the individual drinks alcohol, smokes or uses other substances; issues that may impact on the individual using their medicines; clinical trials medication; any omissions; psychological, occupational and social aspects and implications for individuals living with conditions. Consideration should also be given to the use of unlicensed medicines, imported medicines and other licensed high-risk medicines included in local policies and in safety alerts |
| | **Adverse drug reactions (ADR) or interactions**: an unwanted or harmful reaction experienced following the administration of a drug or combination of drugs under normal conditions of use and is suspected to be related to the drug. An ADR will usually require the |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| | drug to be discontinued or the dose reduced |
| | **Suitable:** any medication related side effects or contraindications experienced; concordance with medication |
| | **Appropriate person:** line manager; Pharmacist; supervisor |
| LO3 | **Range of available sources**: individual's own medication; individual, carer or key persons; patient medication record; medical notes; medication chart; repeat prescription; compliance aids; electronic medication records; other healthcare professionals; community chemist; Medicine Administration Record (MAR) charts; hospital records; clinical trials; Medicines Use Review (MUR) sheet |
| | **Benefits and limitations:** reliability; validity; currency; consistency; origin of the source |
| | **Verify**: in line with standard operating procedures |
| LO4 | **List of medicines that are currently prescribed:** in-patient drug chart; Medication Administration Record (MAR); discharge letter |
| | **Appropriate person:** line manager; Pharmacist; supervisor; Doctor; individual; multi-disciplinary team; Nurse |
| | **Action to take**: communicating outcome to relevant people |
| | **Recording:** details that should be recorded and the reasons why these are important and the format to be used; records must be accurate and legible for use and audit purposes |
| LO5 | **Purpose of checking individual's own medicines:** whether they are fit for purpose; whether they are suitable for use (eg have they been stored correctly, have the medicines expired, etc); whether they have an adequate initial and repeat supply; if route of administration and medication form is appropriate |
| | **Issues:** excessive use; under use; not using for intended purpose; discrepancies; implications; expiry dates; route of administration and medication form; suitability of medicines |
| | **Optimise**: supporting concordance; understanding; decision making; problem solving (eg manual dexterity issues); communicating changes to medication |
| | **Appropriate handling:** removal; destruction; quarantine; appropriate storage |
| LO6 | **Issues:** where stock is not available; dispensing errors and near misses |
| | **Appropriate person:** line manager; Pharmacist; Pharmacy Technician; supervisor |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 07
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

**Unit 08 Assemble and check dispensed medicines and products (A/617/9295)**

The following units must be achieved before undertaking this unit:

- Unit 01 Principles of person-centred approaches for Pharmacy Technicians
- Unit 02 Principles of health and safety for Pharmacy Technicians
- Unit 16 Actions and uses of medicines.

| | |
|---|---|
| **Unit summary** | The aim of this unit is to provide the learner with the technical skills and knowledge to assemble and check dispensed medicines and products. It covers the process required by the learner along with the necessary checks of their own and others' assembled medicines and products. It also covers the process for dealing with errors and requirements for recording and reporting. |
| **Credit value** | 8 |
| **Guided Learning Hours** | 30 |
| **Total Unit Time** | 80 |
| **Level** | 4 |
| **Mandatory/optional** | Mandatory |
| **Assessment tasks** | **Please see the assessment task saved in the member's area of our website.** |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand governance requirements for assembling and checking dispensed medicines and products | 1.1 Summarise **legislation** that applies to assembling and checking dispensed medicines and products | | |
| | 1.2 Summarise **standard operating procedures** relating to assembling and checking dispensed medicines and products | | |
| | 1.3 Explain the importance of following **standard operating procedures** when assembling and checking dispensed medicines and products | | |
| | 1.4 Describe when and why Patient Medication Records (PMRs) are used | | |
| | 1.5 Explain the current **guidelines** that apply when assembling and checking dispensed medicines and products | | |
| | 2.1 Describe the stages of the dispensing procedure | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 2. Understand processes for assembling dispensed items | 2.2 Describe the principles of a **clinical screen** | | |
| | 2.3 Explain how to confirm a clinical screen has been completed | | |
| | 2.4 Explain the **precautions** for assembling dispensed items | | |
| | 2.5 Describe factors that can cause deterioration of stock | | |
| | 2.6 Explain who can legally prescribe and the different **formats for prescriptions** | | |
| | 2.7 Explain the different types of prescription forms and the range of medicines and products which may be dispensed on each | | |
| | 2.8 Explain the importance of selecting the correct equipment for safe handling and use | | |
| | 2.9 Describe the processes for reconstitution | | |
| | 2.10 Explain the importance of storage conditions and expiry dates | | |
| | 2.11 Explain the importance of supplying **relevant items** | | |
| | 2.12 Explain the importance of recording, storing and retrieving information in accordance with organisational procedures | | |
| 3. Understand processes for packing and labelling prescribed items | 3.1 Explain the use of **different container types and closures** | | |
| | 3.2 Explain the **legal requirements** for labelling medicines and products and prescribing conventions | | |
| | 3.3 Explain the reasons for **annotating or endorsing** prescriptions | | |
| | 3.4 Explain records and documentation which need to be completed as part of the dispensing process | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 4. Understand processes for preventing and dealing with dispensing errors and near misses | 4.1 Describe the causes and consequences of near misses and dispensing errors | | |
| | 4.2 Explain how dispensing errors can be rectified | | |
| | 4.3 Explain the importance of error reporting and how this impacts on practice | | |
| | 4.4 Describe procedures for communicating and documenting dispensing errors and near misses | | |
| | 4.5 Explain **methods** for preventing dispensing errors | | |
| | 4.6 Explain how to use dispensing errors or near misses as an opportunity to reflect on future practice | | |
| 5. Be able to label and dispense prescribed items | 5.1 **Prepare self and area** for dispensing | | |
| | 5.2 Generate a label accurately including all additional and cautionary labels and warnings as necessary | | |
| | 5.3 Prepare the medicine or product using the correct equipment, processes and calculations | | |
| | 5.4 Confirm the **appropriateness** of the medicine or product in line with standard operating procedures | | |
| | 5.5 Confirm the **label** on the item matches the assembled product and the prescription or request requirements in line with standard operating procedures | | |
| | 5.6 Confirm the correct quantity has been assembled in line with the prescription requirements | | |
| | 5.7 Assemble prescribed items according to the correct instructions and reconstitute as required | | |
| | 5.8 Pack the medicine or product in the correct **packaging** | | |
| | 5.9 Take appropriate action where there are **inconsistencies** with the medicine or product | | |
| | 5.10 Select relevant medicine device or sundry items as necessary to accompany the medicine or product | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| | 5.11 Complete all necessary records and documentation | | |
| | 5.12 Perform an in-process **accuracy check** on dispensed medicines and products | | |
| | 5.13 Forward the prescription or request and assembled items for accuracy checking as identified in the standard operating procedures | | |
| 6. Be able to check the accuracy of others' dispensing of medicines and products against valid prescriptions | 6.1 Perform **accuracy checks of others'** dispensed medicines or products in line with standard operating procedures | | |
| | 6.2 Record any dispensing errors and near misses in the correct documentation format | | |
| | 6.3 Check the **packaging and labelling requirements** for medicines and products in line with standard operating procedures | | |
| | 6.4 Annotate prescriptions and other dispensary records in line with standard operating procedures | | |
| | 6.5 Apply knowledge of pharmaceutical calculations and calculating quantities of medicines | | |
| 7. Be able to resolve dispensing errors and near misses | 7.1 Identify any dispensing errors and near misses | | |
| | 7.2 Ensure dispensing errors and near misses are rectified and **communicate to the appropriate person** in accordance with standard operating procedures | | |
| | 7.3 **Record** dispensing errors and near misses in accordance with **standard operating procedures** | | |

**Assessment guidance**

| **Delivery and assessment** |
| --- |
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy.<br><br>Learning outcomes 5, 6 and 7 must be assessed in a real work environment by the Assessor.<br><br>Learning outcomes 1, 2, 3 and 4 must be achieved prior to learning outcomes 5, 6 and 7. There should be a minimum of three observations for each of the skills based assessment criteria. One observation must include the dispensing of medicines and the self-check, and two observations should include the check of others' dispensed medicines.<br><br>Learning outcomes 6 and 7:<br>Evidence must be provided to show that learners can correctly assemble prescribed items and that they are able to check prescribed items which have been assembled by others. It is not acceptable for learners to provide evidence of checking prescribed items which they have assembled themselves.<br><br>For learning outcomes 5, 6 and 7:<br>It is a mandatory requirement that learners produce a 500-item **error-free** dispensing and self-checking log. Each item must have a final accuracy check by a qualified, GPhC registered, accuracy checking Pharmacy Technician or Pharmacist.<br><br>Any dispensing errors made **do not** count towards the 500-item error free log, therefore additional items would need to be dispensed.<br><br>An additional 500 items (minimum) of others' dispensed items must be final accuracy checked.<br><br>The 500 item final accuracy checking log of others' dispensed items, can only be completed once the 500 item dispensing and self-checking log is successfully completed.<br>**Checking log:**<br>Once the dispensing log is complete, learners should begin to carry out practice accuracy checks of others' dispensed prescriptions, over a period of time and a range of products. Learners should photocopy pages of the checking log. The number of practice checks is to be determined by learners and their educational supervisor/Assessor.<br><br>Once the practice accuracy checks are complete and the learner is deemed ready, they will produce a **mandatory** 500-item checking log of others' dispensed items (see the assessment task saved in the member's area of our website).<br><br>Each item must have a secondary final-accuracy check by a qualified, GPhC registered, accuracy checking Pharmacy Technician or Pharmacist, who must countersign the item(s) checked. Any checking errors that learners make must be recorded and reflected upon using the error reflection sheet. Major or minor errors and their consequences are to be determined by the current National Framework. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Legislation** to include as a minimum: legal requirements relevant to assembling and checking dispensed medicines and products; the role of others in the organisation; health and safety and how it applies to the working environment |
| | **Standard operating procedures:** the importance of working within the limits of own competence and authority; when to seek agreement or permission from others and when to refer on to an appropriate person; understand how vicarious liability, negligence and duty of care relate to the work of a Pharmacy Technician |
| | **Guidelines:** the relevant national and local guidelines, policies and procedures that are available and how and when they should be accessed, for example, information governance |
| LO2 | **Clinical screen:** legal requirements; clinical appropriateness; compliant with formulary |
| | **Precautions**: personal hygiene; maintaining a clean environment; use of protective clothing; procedures to minimise risk |
| | **Formats for prescriptions**: paper-based; electronic |
| | **Relevant items**: prescribed items; Patient Information Leaflets (PILs); suitable devices and sundries |
| LO3 | **Different container types and closures:** glass bottles; plastic bottles; cartons; syringes; infusion bags; syringe drivers; dropper bottles; ampoules |
| | **Legal requirements:** Humans Medicines Regulations 2012 (Medicines Act 1968) |
| | **Annotating or endorsing:** legal requirements; payment; audit trail |
| LO4 | **Methods**: risk assessment and how it is used to grade dispensing errors |
| LO5 | **Prepare self and area**: confirming the prescription is legal, valid, appropriate to the individual and correctly written; use of protective clothing in line with dispensed medicine or product; maintaining a clean working environment and equipment during dispensing process; identifying sources of contamination and taking appropriate action |
| | **Appropriateness**: matching the medicine or product to the prescription or requisition including strength and form; checking that the medicine or product will remain in date for the course of the treatment; checking the medicine or product is fit for purpose |
| | **Label**: form; strength; dosage |
| | **Packaging:** correct packaging, eg child resistant containers, Monitored Dosage Systems (MDS), syringes, fluted bottles |
| | **Inconsistencies**: expiry date; insufficient stock; insufficient stock of specific strengths; to-follows; specific brand required |
| | **Accuracy check**: confirm the prescription has been clinically screened and endorsed by an appropriate person; check that the correct item has been dispensed in the correct form and correct strength; check that the correct quantity has been dispensed or arrangements made for further supply as indicated on the prescription; check that the label on each item matches the dispensed product and the prescription requirements including:<br><br>• individual's name<br>• drug name, form and strength<br>• quantity<br>• directions for use<br>• advisory and cautionary warnings<br>• expiry and storage instructions if applicable;<br><br>check that the assembled items are fit for purpose; check appropriate packaging has been used; check appropriate selection of medicine devices or sundry items to accompany the |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| | medicine or product; rectify any identified dispensing errors |
| LO6 | **Accuracy checks of others**: confirm the prescription has been clinically screened and endorsed by an appropriate person; check that the correct item has been dispensed in the correct form and correct strength; check that the correct quantity has been dispensed or arrangements made for further supply as indicated on the prescription; check that the label on each item matches the dispensed product and the prescription requirements, including:<br><br>• individual's name<br>• drug name, form and strength<br>• quantity<br>• directions for use<br>• advisory and cautionary warnings<br>• expiry and storage instructions if applicable;<br><br>check that the assembled items are fit for purpose; check appropriate packaging has been used; check appropriate selection of medicine devices or sundry items to accompany the medicine or product; rectify any identified dispensing errors |
| | **Packaging and labelling requirements**: prescribing conventions, abbreviations and medical terminology; the proprietary and generic names of medicines; the different form, strengths and doses of medicines |
| LO7 | **Communicate to the appropriate person**: informing dispensers of the dispensing error or near misses as necessary |
| | **Record** using the appropriate documentation and recording requirements in line with local policies and procedures |
| | **Standard operating procedures** including documentation, referrals, etc |
| All | Individual refers to someone requiring advice or support; it will usually mean the person or people supported by the learner. |
| All | Others may include:<br><br>• team members and colleagues<br>• other professionals<br>• individual people who require advice or support<br>• families, friends, advocates or others who are important to individual people. |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 08
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

**Unit 09 Receive, validate and issue prescriptions (F/617/9332)**

The following units must be achieved before undertaking this unit:

- Unit 01 Principles of person-centred approaches for Pharmacy Technicians
- Unit 02 Principles of health and safety for Pharmacy Technicians
- Unit 16 Actions and uses of medicines.

| | |
|---|---|
| **Unit summary** | The aim of this unit is to provide the learner with technical skills and knowledge needed to effectively validate and issue prescriptions that are presented at the pharmacy. It includes providing advice and information to individuals about their medications at the point of issuing the prescription. |
| **Credit value** | 10 |
| **Guided Learning Hours** | 40 |
| **Total Unit Time** | 100 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand governance requirements for receiving, validating and issuing prescriptions | 1.1 Describe **legislation** that relates to the following:<br>• receiving prescriptions<br>• validating prescriptions<br>• issuing prescriptions. | | |
| | 1.2 Explain the importance of following **standard operating procedures** when:<br>• receiving prescriptions<br>• validating prescriptions<br>• issuing prescriptions. | | |
| 2. Be able to receive prescriptions | 2.1 Explain the purpose of different types of prescriptions and when they are used | | |
| | 2.2 Check that the **individual's details** are complete | | |
| | 2.3 Check that the **patient declaration** has been completed in line with current legislation | | |
| | 2.4 Explain prescription charge requirements in line with national guidelines | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| | 2.5 Determine whether the individual has any **adverse drug reactions (ADR) or interactions** and take appropriate action | | |
| | 2.6 Confirm whether the individual has any **additional needs** or requirements to support optimal use of their medicines | | |
| | 2.7 Refer any identified issues to an appropriate healthcare professional | | |
| 3. Be able to validate prescriptions | 3.1 Describe how **reference sources** are used in validating prescriptions | | |
| | 3.2 Explain how to check for **forged prescriptions** | | |
| | 3.3 Explain the **appropriate action** to take if prescriptions are invalid or forged | | |
| | 3.4 Confirm the prescription meets **legal requirements** | | |
| | 3.5 **Assess prescriptions** to confirm items have been **prescribed as intended** for the individual | | |
| 4. Be able to issue prescribed items | 4.1 Explain the importance of ensuring the prescribed item is issued for the correct individual | | |
| | 4.2 Explain the importance of providing correct information to individuals | | |
| | 4.3 Describe the limits of the role of the Pharmacy Technician in relation to issuing prescribed items | | |
| | 4.4 Perform **checks and actions prior to issuing prescribed items** | | |
| | 4.5 Establish the details of any history of **adverse drug reactions (ADR) or interactions** and take the appropriate action where this is out of scope of own practice | | |
| | 4.6 Provide **advice and information** to the individual in a format which meets their needs | | |
| | 4.7 Provide all the necessary sundry items and information leaflets | | |
| | 4.8 Issue the medicine(s) and/or product(s) in accordance with standard operating procedures | | |
| | 4.9 Confirm the individual's understanding of any **advice and information** given | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| | 4.10 Identify when the individual needs further **advice and information** and refer to the appropriate person | | |
| | 4.11 Complete all relevant documentation relating to the validating and issuing of prescriptions in line with **legal and organisational requirements** | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy.<br><br>Learning outcomes 2, 3, and 4 must be assessed in a real work environment by the Assessor. For learning outcomes 2, 3 and 4, simulation may be permitted if the learner is unable to generate evidence through normal work activity.<br><br>AC1.1 The National Health Service (Charges for Drugs and Appliances) Regulations 2015, under powers conferred in the NHS Act 2006, makes provision for prescription charges and exemptions in England. Prescriptions are now free of charge in Scotland, Wales and Northern Ireland.<br><br>Individual refers to someone requiring advice or support; it will usually mean the person or people supported by the learner.<br><br>Others may include:<br><br>• team members and colleagues<br>• other professionals<br>• individual people who require advice or support<br>• families, friends, advocates or others who are important to individual people. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Legislation** to include as a minimum: legal requirements relevant to receiving, validating and issuing prescriptions; the role of others in the organisation; prescription charges and exemptions; confidentiality; information governance; the NHS Act 2006 |
| | **Standard operating procedures (SOPs):** the importance of working within the limits of own competence and authority, when to seek agreement or permission from others and when to refer on to an appropriate person |
| LO2 | **Individual's details:** name, address, date of birth |
| | **Patient declaration:** on the prescription form |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| | **Adverse drug reactions (ADR) or interactions**: an unwanted or harmful reaction experienced following the administration of a drug or combination of drugs under normal conditions of use and is suspected to be related to the drug. An ADR will usually require the drug to be discontinued or the dose reduced |
| | **Additional needs**: manual dexterity, disability, eg sight impairment, language barriers, swallowing difficulty |
| LO3 | **Reference sources:** British National Formulary (BNF); local formularies; drug tariff; standard operating procedures; NICE guidelines |
| | **Forged prescriptions:** colour of the prescription form; serial numbers; date of issue; address of prescriber; alterations or additions; signature |
| | **Appropriate action:** not dispensing the item; checking with the prescriber; calling the police; informing the relevant organisation (eg NHS England); recording the information |
| | **Legal requirements**: who can legally prescribe; types of form used by different prescribers; details required on a prescription |
| | **Assess prescriptions**: interpret prescribing conventions, abbreviations and medical terminology; interpret the use of common proprietary and generic names within your scope of practice |
| | **Prescribed as intended** to take into account: how medicines are administered, their use and the effect they have on basic human physiology; different strengths, forms, doses and quantities of medicines and why they are used; the actions and use of drugs including different drug interactions and contraindications |
| LO4 | **Checks and actions prior to issuing prescribed items**: confirming the individual's identity and that it correctly matches with the prescription; identifying if the individual has previously used the prescribed item; establishing whether the individual is taking any other medication, either prescribed or non-prescription, and take the appropriate action; determining whether the individual has any allergies and take appropriate action; confirming the prescribed item(s) or products match the prescription and are what the individual is expecting; referring the individual to an appropriate person if necessary, providing all the relevant information |
| | **Adverse drug reactions (ADR) or interactions**: an unwanted or harmful reaction experienced following the administration of a drug or combination of drugs under normal conditions of use and is suspected to be related to the drug. An ADR will usually require the drug to be discontinued or the dose reduced |
| | **Advice and information**: how medicines are administered, used and the effect they have on human physiology; actions and use of prescribed items including different interactions and contraindications; psychological, occupational and social aspects and implications for individuals living with conditions; discussing relevant information with the individual to ensure the prescribed items are used and stored correctly |
| | **Legal and organisational requirements**: current legislation relating to receiving and validating prescriptions; standard operating procedures; General Pharmaceutical Council (GPhC) standards and guidance |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 09
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 10 Chemical principles for Pharmacy Technicians (J/617/9333)

| | |
|---|---|
| **Unit summary** | The aim of this unit is to give Pharmacy Technicians the underpinning knowledge of the fundamental principles of chemistry for application to pharmaceutical concepts. |
| **Credit value** | 3 |
| **Guided Learning Hours** | 20 |
| **Total Unit Time** | 30 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

**Please note** – it is acceptable for Tutors who are not qualified Pharmacy professionals to deliver and assess the science-based knowledge units (units 10, 11 and 15), including this unit.

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| 1. Understand the principles behind the Periodic Table and bonding | 1.1 Explain the **atomic structure** of **elements** in the Periodic Table | | |
| | 1.2 Describe **inter**- and **intra**-molecular forces of attraction | | |
| | 1.3 Describe chemical bonding between atoms | | |
| | 1.4 Describe chemical bonding between molecules | | |
| 2. Understand the principles behind chemical reactions in pharmaceutics | 2.1 Describe how **chemical and physical factors** affect the rates of reactions | | |
| | 2.2 Explain how the principles of **pH** are applied to pharmaceuticals | | |
| | 2.3 Explain the concept of **chemical formulae** | | |
| | 2.4 Explain how the **chemical and physical properties** of different forms of pharmaceutical products affect formulation | | |
| 3. Understand the importance of water in pharmaceutical products | 3.1 Explain the molecular structure of **water** | | |
| | 3.2 Describe the **special characteristics** of water resulting from hydrogen bonding | | |
| | 3.3 Explain the biological **importance** of water | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| | 3.4 Explain why pharmaceutical products require different **types of water** in their manufacture | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Atomic structure**: protons, neutrons, electrons, basic arrangement of electrons around the nucleus, atomic number, mass number, isotopes |
| | **Elements:** the first 20, position in the Periodic Table, grouping, reaction trends |
| | **Inter:** Van der Waals forces, dipole-dipole forces, hydrogen bonding |
| | **Intra:** covalent, ionic |
| LO2 | **Chemical and physical factors**: changes in concentration, temperature, pressure, surface area, catalysts |
| | **pH**: pH scale, pharmaceutical examples of acids and bases, pH buffer |
| | **Chemical formulae:** structural formulae, displayed formulae, isomers, pharmaceutical formulae |
| | **Chemical and physical properties**: solubility; solute; solvent; saturated; super saturated; isotonicity; factors affecting rate of solution; characteristics of emulsions, characteristics of suspensions; solid dose forms; chemical and physical purity of raw materials; quality standards applied to materials; contamination of raw materials |
| LO3 | **Water:** molecular structure, interactions between molecules |
| | **Special characteristics:** high melting point, boiling point, density of ice compared to water |
| | **Importance:** biological solvent, transport medium, lubricant, moderation of temperature, metabolite |
| | **Types of water:** potable, distilled, de-ionised, purified, water for preparations, water for injections, sterile water, pyrogen free |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 10
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login

## Unit 11 Biological principles for Pharmacy Technicians (L/617/9334)

| | |
|---|---|
| **Unit summary** | The aim of this unit is for Pharmacy Technicians to develop knowledge and understanding of the structure and function of biological building blocks that are relevant to pharmacy. |
| **Credit value** | 4 |
| **Guided Learning Hours** | 25 |
| **Total Unit Time** | 40 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

**Please note** – it is acceptable for Tutors who are not qualified Pharmacy professionals to deliver and assess the science-based knowledge units (units 10, 11 and 15), including this unit.

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| 1. Understand the structure and function of carbohydrates and lipids | 1.1 Describe the **structure of carbohydrates** | | |
| | 1.2 Explain the **function of carbohydrates** | | |
| | 1.3 Describe the **structure of lipids** | | |
| | 1.4 Explain the **function of lipids** | | |
| 2. Understand the structure and function of proteins | 2.1 Describe the **structure of proteins** | | |
| | 2.2 Explain how proteins aid growth and repair | | |
| 3. Understand the structure and function of enzymes | 3.1 Describe the **structure of enzymes** | | |
| | 3.2 Explain the **function of enzymes** | | |
| | 3.3 Describe the **actions of enzymes and coenzymes** | | |
| 4. Understand the structure and function of the human genome | 4.1 Describe the **human genome** | | |
| | 4.2 Explain the **structure of DNA and RNA** | | |
| | 4.3 Explain the **function of nucleic acids** | | |
| | 4.4 Describe the **causes** and **effects** of base sequence mutations on genetic variation and the functions of cells and tissues | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Structure of carbohydrates:** forms of mono- di and polysaccharides (simple ring, straight chain) formation and breakdown of glycosidic bonds, anabolism and catabolism |
| | **Function of carbohydrates**: energy source, storage, role in digestive health, respiration |
| | **Structure of lipids:** saturated, unsaturated fatty acids, triglycerides, phospholipids |
| | **Function of lipids:** energy sources, structural tissue components, insulation, physical protection |
| LO2 | **Structure of proteins:** essential and non-essential amino acids, formation of peptide bonds, formation of dipeptides and polypeptide chains (primary structure), basic secondary, tertiary and quaternary |
| LO3 | **Structure of enzymes:** shape, active sites, simple lock and key, induced fit |
| | **Function of enzymes:** catalyst, inhibitor, activator |
| | **Actions of enzymes and coenzymes:** hypothesis of enzyme action, simple lock and key, properties of specificity, relevance of optimum conditions on rate of activity, causes and effects of denaturation |
| LO4 | **Human genome:** amount of base pairs, genes, chromosomes, types of deoxyribonucleic acid (DNA) |
| | **Structure of DNA and RNA:** DNA and ribonucleic acids (RNA), including complementary base pairing, arrangement of genetic material and gene transmission in eukaryotic and bacterial cells |
| | **Function of nucleic acids**: storage and transmission of genetic information, role of DNA and RNAs in protein synthesis through transcription and translation |
| | **Causes:** evolution, chemical, radiation |
| | **Effects:** of beneficial, neutral and harmful base sequence mutations, missense, nonsense, insertion, deletion, frameshift, duplication, repeat expansions |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 11
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 12 Medicinal and non-medicinal treatments for gastrointestinal and nutritional conditions (R/617/9335)

| | |
|---|---|
| **Unit summary** | The aim of this unit is for Pharmacy Technicians to develop knowledge and understanding of the gastrointestinal system and learn about the main medicines, supplements and treatments of related conditions. In addition, learners will understand how to advise individuals in the effective management and treatment of associated conditions. |
| **Credit value** | 5 |
| **Guided Learning Hours** | 35 |
| **Total Unit Time** | 50 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| 1. Understand the digestive system | 1.1 Describe the **structure of the digestive system** | | |
| | 1.2 Explain how the structure of the digestive system relates to its **function** | | |
| | 1.3 Explain how **enzymes** function within the digestive system | | |
| 2. Understand how medicines are used in the treatment of conditions of the gastrointestinal tract | 2.1 Describe different **conditions** affecting the gastrointestinal tract | | |
| | 2.2 Explain how **common medicines** are used in the treatment of gastrointestinal tract conditions | | |
| | 2.3 Explain the reasons why **common side effects** may occur with medicines used to treat gastrointestinal tract conditions | | |
| 3. Understand how medicines and supplements are used in the treatment of nutritional conditions | 3.1 Describe different **nutritional conditions** | | |
| | 3.2 **Compare** the **routes** used to provide artificial nutrition | | |
| | 3.3 Explain how **common medicines and supplements** are used for nutritional conditions | | |
| | 3.4 Explain the reasons why **common side effects** may occur with medicines used to treat nutritional conditions | | |
| 4. Understand the advice individuals need to manage their condition | 4.1 Explain the **information** that must be given to individuals about their **medicines** | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| | 4.2 Explain the information that must be given to individuals about the **management of their condition** | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy.<br><br>Learners are required to cover all the indicative content and:<br><br>• for AC2.1 learners must describe gastro-oesophageal reflux disease (GORD) and inflammatory bowel disease<br>• for AC3.1 learners must describe electrolyte deficiencies/imbalances, eating disorders, obesity and food intolerances, iron deficient anaemia and pernicious anaemia. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Structure of the digestive system:** mouth, pharynx, oesophagus, stomach, pancreas, liver, gall bladder, small intestine, large intestine, rectum, anus |
| | **Function of the digestive system**: the physiology and pathology relating to the elimination of waste products from the body |
| | **Enzymes**: break down and absorption into the body of nutrients |
| LO2 | **Conditions:** dyspepsia, peptic ulceration, diarrhoea, constipation, nausea and vomiting, haemorrhoids, gastro-oesophageal reflux disease (GORD), inflammatory bowel disease |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines and treatments, including agents and their actions, benefits and limitations, and contraindications for the conditions listed |
| | **Common side effects:** refer to current edition of British National Formulary (BNF) and other reliable sources for common side effects of medicines for the conditions listed |
| LO3 | **Nutritional conditions:** coeliac disease, metabolic conditions, vitamin, mineral and electrolyte deficiencies/imbalances, eating disorders, obesity, food intolerances, iron-deficiency anaemia, pernicious anaemia |
| | **Compare:** reasons for use, problems, methods, potential complications |
| | **Routes:** intravenous nutrition, central line and peripheral line, enteral nutrition including Percutaneous Endoscopic Gastrostomy (PEGs) |
| | **Common medicines and supplements:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines and supplements, including agents and their actions, benefits and limitations, and contraindications for the conditions listed |
| | **Common side effects:** refer to current edition of British National Formulary (BNF) and other reliable sources for common side effects of medicines for the conditions listed |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO4 | **Information:** dosage, frequency, storage, care, non-compliance, relevant contraindications and any other appropriate information (eg take medicine with food, diet) |
| | **Management of their condition:** treatment pathways, self-care, self-monitoring, signposting to information, resources and organisations, attendance at regular health checks, understanding actions of different prescribed medicines, changes to lifestyle |
| | **Condition**: gastrointestinal; nutritional<br>**Medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines and treatments, including agents and their actions, benefits and limitations, and contraindications for the conditions listed. |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 12
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 13 Medicinal treatments for cardio-respiratory conditions (Y/617/9336)

| | |
|---|---|
| **Unit summary** | The aim of this unit is for Pharmacy Technicians to develop knowledge and understanding of the cardiovascular and respiratory systems and learn about the main medicines used in the treatment of related conditions. In addition, Pharmacy Technicians will understand how to advise individuals in the effective management and treatment of associated conditions. |
| **Credit value** | 6 |
| **Guided Learning Hours** | 40 |
| **Total Unit Time** | 60 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand the respiratory and cardiovascular systems | 1.1 Explain how the **structure of the respiratory system** aids breathing and gaseous exchange | | |
| | 1.2 Describe the **structure of the cardiovascular system** | | |
| | 1.3 Explain how the structure of the cardiovascular system relates to its **function** | | |
| 2. Understand how medicines are used in the treatment of conditions of the respiratory system | 2.1 Describe **common conditions** affecting the respiratory system | | |
| | 2.2 Explain how **common medicines** are used in the treatment of respiratory conditions | | |
| | 2.3 Explain the reasons why **common side effects** may occur with medicines used to treat respiratory conditions | | |
| 3. Understand how medicines are used in the treatment of conditions of the cardiovascular system | 3.1 Describe **common conditions** affecting the cardiovascular system | | |
| | 3.2 Explain how **common medicines** are used in the treatment of the cardiovascular conditions | | |
| | 3.3 Explain the reasons why **common side effects** may occur with medicines used to treat cardiovascular conditions | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 4. Understand the advice individuals need to manage their condition | 4.1 Explain the **information** that must be given to individuals about their medicines and devices | | |
| | 4.2 Explain the information that must be given to individuals about the **management of their condition** | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Structure of the respiratory system**: nasal cavity, pharynx, larynx, trachea, bronchi, bronchioles, alveoli, capillary network |
| | **Structure of the cardiovascular system**: blood, heart, blood vessels (arteries, arterioles, capillaries, venules, veins) |
| | **Function of the cardiovascular system**: the physiology and pathology relating to transport and homeostasis |
| LO2 | **Common conditions:** asthma, chronic obstructive pulmonary disease (COPD), allergic conditions |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines and treatments, including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for common side effects of medicines for the conditions listed |
| LO3 | **Common conditions:** congestive heart failure**,** hypertension, cardiac arrhythmias, angina, myocardial infarction, embolism, hyperlipidaemia, cardiac arrest |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines and treatments, including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for common side effects of medicines for the conditions listed |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO4 | **Information:** dosage, frequency, storage, care, non-compliance, relevant contraindications, treatment pathways and any other appropriate information (eg take medicine with food), blood tests, lifestyle |
| | **Management of their condition:** treatment pathways, self-care, self-monitoring (eg blood pressure and peak flow), signposting to information, resources and organisations, attendance at regular health checks, understanding actions of different prescribed medicines, changes to lifestyle |
| | **Condition:** respiratory; cardiovascular |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 13
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 14 Medicinal and non-medicinal treatments for malignant diseases and musculoskeletal conditions (D/617/9337)

| | |
|---|---|
| **Unit summary** | The aim of this unit is for Pharmacy Technicians to develop knowledge and understanding of human cells and the musculoskeletal system and learn about the main medicines and treatments of malignant diseases and musculoskeletal conditions. In addition, learners will understand how to advise individuals in the effective management and treatment of associated conditions and learn about preventative measures for malignant diseases. |
| **Credit value** | 6 |
| **Guided Learning Hours** | 40 |
| **Total Unit Time** | 60 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand different types of human cells and tissue | 1.1 Describe the **structure of human cells** | | |
| | 1.2 Describe the cells in **human blood** | | |
| | 1.3 Describe the main types of **human tissue** | | |
| | 1.4 Explain the functions of the main types of **human tissue** | | |
| 2. Understand the musculoskeletal system | 2.1 Describe the structure of the **musculoskeletal system** | | |
| | 2.2 Explain how the structure of the musculoskeletal system relates to its **function** | | |
| 3. Understand how medicines and therapies are used in the treatment of malignant diseases | 3.1 Describe the behavioural differences between normal and malignant cells | | |
| | 3.2 Describe **common malignant diseases** | | |
| | 3.3 Explain how **common medicines** are used in the treatment of malignant diseases | | |
| | 3.4 Explain the reasons why **common side effects** may occur with medicines used to treat malignant diseases | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| | 3.5 Describe how **other therapies** are used in the treatment of malignant diseases | | |
| 4. Understand how medicines are used in the treatment of musculoskeletal conditions | 4.1 Describe **common conditions** affecting the musculoskeletal system | | |
| | 4.2 Explain how **common medicines** are used in the treatment of musculoskeletal conditions | | |
| | 4.3 Explain the reasons why **common side effects** may occur with medicines used to treat musculoskeletal conditions | | |
| 5. Understand the advice individuals need to manage their condition | 5.1 Describe the **preventative measures** that can be provided to individuals in identifying possible malignant diseases | | |
| | 5.2 Explain the **information** that must be given to individuals about their medicines | | |
| | 5.3 Explain the information that must be given to individuals about **management of their condition** | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and NCFE qualification assessment strategy.<br><br>Learners are required to cover all the indicative content and:<br><br>• for AC3.2 learners must describe leukaemia, lymphoma and myeloma and one from either breast cancer, melanoma, prostate cancer, testicular cancer, cervical cancer or bowel cancer<br>• for AC4.1 learners must describe arthritis (osteoarthritis and rheumatoid arthritis) and osteoporosis and one from either scoliosis, gout or soft tissue. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Structure of human cells:** cell membrane, nucleus, cytoplasm, mitochondria, rough and smooth endoplasmic reticulum, Golgi body, lysosomes |
| | **Human blood:** erythrocytes (red blood cells), leucocytes (white blood cells) |
| | **Human tissue:** epithelial, connective, muscle, nerve |
| LO2 | **Musculoskeletal system**: bones, muscles, cartilage, tendons, ligaments, membranes, joints |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| | **Function**: the physiology and pathology relating to movement, support, protection, blood cell production, storage of minerals (eg calcium) |
| LO3 | **Common malignant diseases:** breast cancer, leukaemia, melanoma, lymphoma, myeloma, prostate cancer, testicular cancer, cervical cancer, bowel cancer |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines and treatments, including agents and their actions, benefits and limitations and contraindications for the diseases listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for common side effects of medicines for the diseases listed |
| | **Other therapies:** targeted, tumour necrosis factor, gene therapy, radio-pharmaceuticals |
| LO4 | **Common conditions:** arthritis (eg osteoarthritis, rheumatoid arthritis), osteoporosis, scoliosis, gout, soft tissue conditions |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines and treatments, including agents and their actions, benefits and limitations, and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for common side effects of medicines for the conditions listed |
| LO5 | **Preventative measures:** screening programme, self-examination |
| | **Information:** dosage, frequency, storage, care, non-compliance, relevant contraindications and any other appropriate information (eg take medicine with food), precautions, blood tests |
| | **Management of their condition:** treatment pathways, self-care, self-monitoring, signposting to information, resources and organisations, attendance at regular health checks, understanding actions of different prescribed medicines, changes to lifestyle |
| | **Condition:** malignant disease; musculoskeletal |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 14
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 15 Microbiology for Pharmacy Technicians (H/617/9338)

| | |
|---|---|
| **Unit summary** | The aim of this unit is to give the underpinning knowledge of the fundamental principles of microbiology for application as a Pharmacy Technician. |
| **Credit value** | 5 |
| **Guided Learning Hours** | 30 |
| **Total Unit Time** | 50 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

**Please note** – it is acceptable for Tutors who are not qualified Pharmacy professionals to deliver and assess the science-based knowledge units (units 10, 11 and 15), including this unit.

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| 1. Understand the structure, function and classification of microorganisms | 1.1 Describe **methods** used to classify **microorganisms** | | |
| | 1.2 Explain how the **structure** of microorganisms relates to their function | | |
| 2. Understand factors affecting microbial growth | 2.1 Describe **growth and reproduction** of microorganisms | | |
| | 2.2 Explain the **chemical and physical factors** that affect the **growth** of microorganisms | | |
| | 2.3 Explain the use of different **growth media** | | |
| 3. Understand how the growth of microorganisms is monitored and controlled | 3.1 Explain methods of **monitoring** the **growth** of microorganisms | | |
| | 3.2 Explain methods of **controlling** the **growth** of microorganisms | | |
| 4. Understand transmission of infection | 4.1 Identify **infections** caused by pathogenic microorganisms | | |
| | 4.2 Explain the **process of transmission** of infections | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Methods**: binomial nomenclature; light and electron micrographs, morphology, Gram staining |
| | **Microorganisms:** bacteria, viruses, microscopic fungi, protozoa |
| | **Structure:** size, shape, cell arrangements, cellular structure including genetic material and ability to reproduce without a host |
| LO2 | **Growth and reproduction:** binary fission, asexual reproduction, budding, growth curves, nutrition |
| | **Physical factors affecting growth:** pH, temperature, osmotic and atmospheric pressure |
| | **Chemical factors affecting growth:** water, oxygen, carbon, nitrogen, phosphorous, other elements |
| | **Growth media:** liquid, semi-solid, selective/differential, enriched |
| LO3 | **Monitoring the growth:** environmental/people/product |
| | **Controlling the growth**: sampling; swabs, media plates, bacterial counts |
| LO4 | **Infections:** bacteria, viruses, microscopic fungi, protozoa |
| | **Process of transmission:** transmission cycle; airborne, direct contact, indirect contact |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 15
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 16 Actions and uses of medicines (K/617/9339)

| | |
|---|---|
| **Unit summary** | This unit provides learners with basic information and concepts to help them understand in general terms how medicines work. |
| **Credit value** | 9 |
| **Guided Learning Hours** | 60 |
| **Total Unit Time** | 90 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand the principles of how medicines work in the human body | 1.1 Describe the **modes of actions** of medicines on the human body | | |
| | 1.2 Explain the reasons for using different **routes** for the administration of medicines | | |
| | 1.3 Explain how medicines are **processed** by the body | | |
| | 1.4 Explain how the **approaches** to personalised medicines may support the management of an individual's health | | |
| 2. Understand the uses and limitations of medicines | 2.1 Describe the common dosage regimens for drug-drug and drug-food **interactions** | | |
| | 2.2 Evaluate how **individual factors** affect successful medicinal and treatment optimisation | | |
| | 2.3 Evaluate how **medicine factors** affect successful medicine optimisation | | |
| 3. Understand the use of standard pharmacy resources to research pharmaceutical queries | 3.1 Evaluate the **suitability** of different sources of pharmaceutical **information** for pharmaceutical queries | | |
| | 3.2 Explain the importance of **evidence-based practice** for pharmacy professionals | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Modes of action:** drug actions at receptor sites, agonists and antagonists, partial agonists, competition, reversibility, enzymes and ion channels with common examples, non-specific drug action, genetic mechanisms |
| | **Routes:**<br>Pharmacology – by which drugs are delivered to the body, including oral, rectal, injectable, transdermal, inhaled; advantages and disadvantages of each route<br>Pharmacodynamics – by which drugs travel through the body to the site of action; factors that influence the amount of drug that reaches the site of action and the final fate of therapeutic agents; influence of factors such as absorption, metabolism, excretion<br>Pharmacokinetics – clearance; volume of distribution; half-life; Lethal Dose 50% (LD50), bioavailability; protein binding; clearance by the liver and kidneys; how dosage regimens are designed; purpose of therapeutic drug monitoring |
| | **Processed:** absorption; distribution; metabolism & excretion |
| | **Approaches:** diagnoses, intervention, drug development, usage, issues |
| LO2 | **Interactions:** chemical incompatibilities, nutrition/drug incompatibilities, genetic factors causing incompatibilities, pharmacokinetics and pharmacodynamics, additive and antagonistic, concentration and reduction |
| | Common adverse interactions**:** St John's Wort, grapefruit juice, Seville oranges, limes, pomelos, green leafy vegetables, dairy products, fibre, liquorice, foods containing tyramine, monoamine oxidase inhibitors (MAOIs) |
| | **Individual factors:**<br>Demographic factors – age, gender, ethnicity, lifestyle<br>Social factors – lifestyle, employment, education, housing, income<br>Physiological factors – liver and renal impairment, allergies, altered body surface |
| | **Medicine factors:** side effects, route of administration, clinical trials, adverse drug reactions (ADRs) |
| LO3 | **Suitability:** current, authoritative, accurate |
| | **Information:** British National Formulary (BNF), other pharmaceutical texts, eg Martindale, British Pharmacopoeia, British Pharmaceutical Codex, Pharmaceutical Journal, other medical journals, online resources eg Micromedex, Medline, EBNF |
| | **Evidence-based practice:** definitions, benefits, practices, research methodologies (qualitative, quantitative) |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 16
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 17 Medicinal and non-medicinal treatments for central nervous system conditions (D617/9340)

| | |
|---|---|
| **Unit summary** | The aim of this unit is for Pharmacy Technicians to develop knowledge and understanding of the central nervous system and the medicines used in the treatment of related conditions. It also addresses how anaesthesia and pain are treated and managed. Finally, learners will learn the information that a Pharmacy Technician needs to understand to advise individuals about the effective management and treatment of associated conditions. |
| **Credit value** | 6 |
| **Guided Learning Hours** | 30 |
| **Total Unit Time** | 60 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| 1. Understand the central nervous system | 1.1 Describe the **structure** of the central nervous system | | |
| | 1.2 Explain how the structure of the central nervous system relates to its **function** | | |
| 2. Understand how medicines are used in the treatment of conditions of the central nervous system | 2.1 Describe **conditions** affecting the central nervous system | | |
| | 2.2 Explain how **common medicines** are used in the treatment of central nervous system conditions | | |
| | 2.3 Explain the reasons why **common side effects** may occur with medicines used to treat central nervous system conditions | | |
| 3. Understand how medicines and non-medicinal treatments are used in the treatment of mental ill health | 3.1 Describe **forms of mental ill health** | | |
| | 3.2 Explain how **common medicinal and non-medicinal treatments** are used in the treatment of mental ill health | | |
| | 3.3 Explain the reasons why **common side effects** may occur with medicines and non-medicinal treatments used to treat mental ill health | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 4. Understand how medicines are used in the treatment and management of pain | 4.1 Explain how the **analgesic ladder** is applied in pharmacy practice | | |
| | 4.2 Explain how **common medicinal and non-medicinal treatments** are used in the management of pain | | |
| | 4.3 Explain the reasons why **common side effects** may occur with medicines used in the treatment and management of pain | | |
| 5. Understand how medicines are used in anaesthesia | 5.1 Explain the requirement for combination drug use in **general anaesthesia** | | |
| | 5.2 Explain the benefits and limitations of the different administration routes for **local anaesthetics** | | |
| | 5.3 Explain the reasons why **common side effects** may occur following the administration of anaesthetics | | |
| 6. Understand the advice individuals need to manage their condition | 6.1 Explain the **information** that must be given to individuals about their medicines | | |
| | 6.2 Explain the information that must be given to individuals about the **management of their condition** | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy.<br><br>Learners are required to cover all the indicative content and:<br><br>• for AC2.1 learners must describe epilepsy and Parkinson's Disease<br>• for AC3.1 learners must describe addiction, dementia and depression |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Structure:** brain (cerebrum, cerebellum, pons, medulla), spinal cord (spinal nerves, plexa), neurons (sensory, motor, relay), neurotransmitters (dopamine, serotonin) |
| | **Function:** the physiology and pathology relating to the initiation and transmission of the nerve impulse, sympathetic and parasympathetic control, receptors, effectors, reflex arc |
| LO2 | **Conditions:** epilepsy, Parkinson's Disease, attention deficit hyperactivity disorder (ADHD) |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to current edition of British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO3 | **Forms of mental ill health:** anxiety, bipolar, sleep, eating, depression, psychosis (eg schizophrenia, delusional disorders, mania), addiction, trauma, dementia |
| | **Common medicinal and non-medicinal treatments:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO4 | **Analgesic ladder:** the need for regular pain control and the pain ladder, reasons for adjuvant drugs; limitations of analgesia, different types of pain (acute, chronic, referred, nociceptive, neuropathic, sensory hypersensitivity), causes of pain |
| | **Common medicinal and non-medicinal treatments:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO5 | **General anaesthesia:** concept of general anaesthesia, stages of anaesthesia, combination drug use (intravenous anaesthetics, inhalation anaesthetics, anti-muscarinic, anxiolytic, analgesia, antiemetic, perioperative drugs, muscle relaxants, reversal) |
| | **Local anaesthetics:** routes of administration including epidural intrathecal and intravenous regional anaesthesia, use of vasoconstrictors and action of local anaesthetic |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO6 | **Information:** dosage, frequency, storage, care, contraindications, other appropriate information, eg take medicine with food |
| | **Management:** treatment pathways, self-care, self-monitoring, signposting to other information, resources and organisations, attendance at regular health checks, understanding actions of different prescribed medicines, changes to lifestyle |
| | **Condition:** central nervous system; mental ill health; pain |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 17
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 18 Medicinal methods for the prevention, protection from and treatment of infections (K/617/9342)

| | |
|---|---|
| **Unit summary** | The aim of this unit is for Pharmacy Technicians to develop knowledge and understanding of blood, and how infections are prevented through the use of vaccines and anti-microbial agents. It also covers how medicines and immunological products are used to manage infections. Finally, learners will learn the information that a Pharmacy Technician needs to understand to advise individuals about the effective management and treatment of associated conditions. |
| **Credit value** | 6 |
| **Guided Learning Hours** | 40 |
| **Total Unit Time** | 60 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| 1. Understand the function of blood | 1.1 Describe the **structure** of blood | | |
| | 1.2 Explain how the structure of blood relates to its **function** | | |
| 2. Understand how medicines are used in the treatment of infections | 2.1 Describe **common infections** and their associated symptoms | | |
| | 2.2 Explain how **common medicines** are used to treat infections | | |
| | 2.3 Explain the reasons why **common side effects** may occur with medicines used to treat infections | | |
| | 2.4 Explain the role of **anti-microbials** in the control of infections | | |
| | 2.5 Explain **factors** that influence the selection of anti-microbial medicines | | |
| 3. Understand the uses of commonly available immunological products | 3.1 Explain the **general principles of vaccination** | | |
| | 3.2 Explain the use of **vaccines** | | |
| | 3.3 Explain the **care of immunological products** | | |
| | 3.4 Explain the use of **immunoglobins** | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 4. Understand the advice individuals need to manage their health | 4.1 Explain the **information** that must be given to individuals about their medicines | | |
| | 4.2 Explain the information that must be given to individuals about the **management of their health** | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Structure:** leucocytes (white cells), erythrocytes (red cells), platelets, blood types |
| | **Function:** the physiology and pathology relating to carrying oxygen, clotting, defence; optimum levels |
| LO2 | **Common infections:** bacterial (tuberculosis, urinary tract infections (UTI), lower respiratory tract infection, conjunctivitis, impetigo, cellulitis), viral (influenza, common cold, herpes simplex, human immunodeficiency virus (HIV)), fungal (aspergillosis, candidiasis, nail and skin fungal infections), protozoal (malaria), infestations (roundworm, tapeworm and threadworm), sepsis |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| | **Anti-microbials:** anti-microbial resistance (AMR), anti-microbial stewardship (AMS), allergies, implications for over-use, over-prescribing of antibiotics, classes of antibiotics, how antibiotics work; prophylaxis |
| | **Factors:**<br>Individual – renal function, hepatic function, age, pregnancy, lactation, allergy, host defence mechanism, conditions of the nervous system<br>Non-individual – local factors at site of action, cost, pharmacokinetics |
| LO3 | **General principles of vaccination**: vaccination and immune response, reasons for immunisation, immunisation schedule, immunisation of high-risk groups, immunisation procedures for international travel, immunisation procedures in the event of pandemics |
| | **Vaccines:** UK vaccination schedule, diseases covered and their symptoms, reasons for vaccination, vaccines and antisera available and limitations for the use of each against disease, care of vaccines (records, storage, transport, disposal, cold chain) |
| | **Care of immunological products**: records, storage, transport, disposal, cold chain, examples of best practice, workplace policies |
| | **Immunoglobulins:** normal immunoglobulins, specific immunoglobulins, anti-D |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| | immunoglobulin availability, reasons for use |
| LO4 | **Information:** dosage, frequency, storage, care, non-compliance, relevant contraindications and any other appropriate information, eg take medicine with food, prophylaxis, resistance |
| | **Management of their health:** vaccinations; infections; treatment pathways, self-care, self-monitoring, signposting to information, resources and organisations, attendance at regular health checks, understanding actions of different prescribed medicines, changes to lifestyle |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 18
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 19 Medicinal treatments for endocrine, gynaecological and genitourinary conditions (M/617/9343)

| | |
|---|---|
| **Unit summary** | The aim of this unit is for Pharmacy Technicians to develop knowledge and understanding of the endocrine, lymphatic and genitourinary systems and the medicines that are used to treat and manage them. Finally, learners will learn the information that a Pharmacy Technician needs to understand in order to provide advice to individuals for effective management and treatment of associated conditions. |
| **Credit value** | 6 |
| **Guided Learning Hours** | 40 |
| **Total Unit Time** | 60 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 1. Understand the lymphatic system | 1.1 Describe the **structure of the lymphatic system** | | |
| | 1.2 Explain how the structure of the lymphatic system works to achieve its **function** | | |
| 2. Understand the endocrine system | 2.1 Describe the **structure of the endocrine system** | | |
| | 2.2 Explain how the structure of the endocrine system works to achieve its **function** | | |
| 3. Understand the genitourinary system | 3.1 Describe the **structure of the urinary system** | | |
| | 3.2 Explain how the structure of the urinary system assists the **regulation** of body fluids | | |
| | 3.3 Describe the **structure of the reproductive system** | | |
| | 3.4 Explain how the structure of the reproductive system supports its **function** | | |
| | 3.5 Describe **foetal development** | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 4. Understand how medicines are used in the treatment of endocrine conditions | 4.1 Describe **common conditions** affecting the endocrine system | | |
| | 4.2 Explain how **common medicines** are used in the treatment of endocrine conditions | | |
| | 4.3 Explain the reasons why **common side effects** may occur with medicines used to treat endocrine conditions | | |
| 5. Understand how medicines are used in the treatment of gynaecological conditions | 5.1 Describe **common conditions** of the gynaecological system | | |
| | 5.2 Explain how **common medicines** are used in the treatment of gynaecological conditions | | |
| | 5.3 Explain the reasons why **common side effects** may occur with medicines used to treat gynaecological conditions | | |
| 6. Understand how medicines are used in the treatment of genitourinary conditions | 6.1 Describe **common conditions** affecting the genitourinary system | | |
| | 6.2 Explain how **common medicines** are used in the treatment of genitourinary conditions | | |
| | 6.3 Explain the reasons why **common side effects** may occur with medicines used to treat genitourinary conditions | | |
| 7. Understand how medicines are used in obstetrics | 7.1 Explain how medicines are used in **obstetrics** | | |
| | 7.2 Describe the **main methods of contraception** | | |
| 8. Understand the advice individuals need to manage their condition | 8.1 Explain the **information** that must be given to individuals about their medicines | | |
| | 8.2 Explain the information that must be given to individuals about the **management of their condition** | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE Organisation qualification assessment strategy.<br><br>For AC4.1 learners are required to cover all content within the scope of learning and:<br><br>• **Thyroid***:* hypothyroidism, hyperthyroidism<br>• **Pancreas***:* diabetes, hypoglycaemia, pancreatitis |

| **Delivery and assessment** |
|---|
| Assessment must cover **either** thyroid **or** pancreas.<br><br>Learners are also required to cover the following:<br><br>• **Sex hormones**: excess and deficiency, oestrogen; progesterone; menopause, hormone replacement therapy, male sex hormones and antagonists<br>• **Hypothalamic and pituitary**: adrenal insufficiency, Cushing's syndrome Addison's disease<br>• **Tumours of endocrine glands**<br>• **Infertility.**<br><br>Assessment must cover **two** of the **four** points above.<br><br>For AC5.1 learners must describe menorrhagia plus one other condition<br>For AC6.1 and 6.2 learners must describe erectile dysfunction, chlamydia plus one other condition. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Structure of the lymphatic system:** lymphatic vessels, lymph nodes, spleen |
| | **Function:** the physiology and pathology relating to drainage of tissue fluid and formation of lymph |
| LO2 | **Structure of the endocrine system:** hypothalamus, pituitary gland, thyroid, parathyroid, pancreas, adrenal medulla, adrenal cortex, gonads |
| | **Function:** the physiology and pathology relating to the production of hormones, secretion of hormones, regulating the metabolism, homeostasis and endocrine control and feedback |
| LO3 | **Structure of the urinary system:** kidneys, nephron, ureters, urethras, bladder |
| | **Regulation:** the physiology and pathology relating to filtration, absorption, urine production, storage and release, electrolyte and pH balance |
| | **Structure of the reproductive system:**<br>Male – testis, epididymis, scrotum, sperm, duct, penis, accessory glands<br>Female – ovary, oviducts, uterus, vagina, external genitalia, mammary glands |
| | **Function:** the physiology and pathology relating to how the production of gametes, hormonal regulation of sperm production in males, female ovarian and menstrual cycles, fertilisation, pregnancy, birth, lactation |
| | **Foetal development:** fertilisation, stages of development (trimesters), birth |
| LO4 | **Common conditions**: thyroid: hypothyroidism, hyperthyroidism; pancreas: diabetes, hypoglycaemia, pancreatitis; sex hormones: excess and deficiency, oestrogen, progesterone, menopause, hormone replacement therapy, male sex hormones and antagonists; hypothalamic and pituitary: adrenal insufficiency, Cushing's syndrome Addison's disease; infertility |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO5 | **Common conditions:** menorrhagia, polycystic ovary syndrome (PCO), fibroids, pelvic inflammatory disease (PID), endometriosis, infertility |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO6 | **Common conditions:** urinary retention: urinary incontinence and nocturnal enuresis, benign prostatic hyperplasia (BPH), erectile dysfunction; infections of the genitalia: sexually transmitted diseases, bacterial vaginosis (BV) |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines for the conditions listed including agents and their actions, benefits and limitations and contraindications |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO7 | **Obstetrics:** termination of pregnancy, induction of labour, management of complications of labour, pre-eclampsia and eclampsia |
| | **Main methods of contraception:** hormonal (combined, progestogen-only), spermicidal contraceptives, intra-uterine devices (IUD), intra-uterine systems (IUS), emergency contraception (hormonal and IUD); use, limitations and side effects<br>Refer to the current edition of the British National Formulary (BNF) for common drug treatments, devices and barrier methods of contraception |
| LO8 | **Information:** dosage, frequency, storage, care, non-compliance, relevant contraindications and any other appropriate information, eg take medicine with food |
| | **Management of their condition:** treatment pathways, self-care, self-monitoring, signposting to other information, resources and organisations, attendance at regular health checks, understanding actions of different prescribed medicine, changes to lifestyle |
| | **Conditions:** endocrine; gynaecological; genitourinary |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 19
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 20 Medicinal treatments for sensory organ conditions (T/617/9344)

| | |
|---|---|
| **Unit summary** | The aim of this unit is for Pharmacy Technicians to develop knowledge and understanding of the sensory organs and the medicines used to treat related medical conditions. Finally, learners will learn the information that a Pharmacy Technician needs to understand in order to provide advice to individuals for effective management and treatment of associated conditions. |
| **Credit value** | 5 |
| **Guided Learning Hours** | 30 |
| **Total Unit Time** | 50 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| 1. Understand sensory organs | 1.1 Describe the structure of the body's **sensory organs** | | |
| | 1.2 Explain how the structure of each sensory organ relates to its **function** | | |
| 2. Understand how medicines are used in the treatment of eye conditions | 2.1 Describe **common conditions and diseases** affecting the eye | | |
| | 2.2 Explain how **common medicines** are used in the treatment of eye conditions | | |
| | 2.3 Explain the reasons why **common side effects** may occur with medicines used to treat eye conditions | | |
| 3. Understand how medicines are used in the treatment of ear conditions | 3.1 Describe **common conditions** affecting the ear | | |
| | 3.2 Explain how **common medicines** are used in the treatment of ear conditions | | |
| | 3.3 Explain the reasons why **common side effects** may occur with medicines used to treat ear conditions | | |
| 4. Understand how medicines are used in the treatment of oropharynx conditions | 4.1 Describe **common conditions** of the oropharynx | | |
| | 4.2 Explain how **common medicines** are used in the treatment of oropharynx conditions | | |
| | 4.3 Explain the reasons why **common side effects** may occur with medicines used to treat oropharynx conditions | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 5. Understand how medicines are used in the treatment of nose conditions | 5.1 Describe **common conditions** of the nose | | |
| | 5.2 Explain how **common medicines** are used in the treatment of nose conditions | | |
| | 5.3 Explain the reasons why **common side effects** may occur with medicines used to treat nose conditions | | |
| 6. Understand how medicines are used in the treatment of dermatological conditions | 6.1 Describe **common dermatological conditions** | | |
| | 6.2 Explain how **common medicines** are used in the treatment of dermatological conditions | | |
| | 6.3 Explain the reasons why **common side effects** may occur with medicines used to treat dermatological conditions | | |
| 7. Understand the advice individuals need to manage their condition | 7.1 Explain the **information** that must be given to the individual about their medicines | | |
| | 7.2 Explain the information that must be given to the individual about the **management of their condition** | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles.<br><br>Learners are required to cover **all** content within the scope of learning and:<br><br>• AC2.1, glaucoma (closed and open angled, steroid induced), conjunctivitis (infective and allergenic), tear deficiency (tired or dry eyes), inflammatory disorders, scleritis, stye, 'red eye'<br>• AC3.1, otitis externa, otitis media, ear wax, labyrinth disorders<br>• AC4.1, gingivitis, mouth ulcer, sore throat (viral/bacterial), herpes<br>• AC5.1, rhinitis (including allergic), nasal congestion, staphylococcal infections<br>• AC6.1, eczema (including infected), psoriasis, acne, rosacea, dandruff, fungal infections (eg athlete's foot, onychomycosis, ringworm), infestations (eg lice, scabies), warts, verrucas, allergic rashes, bacterial infections (eg impetigo).<br><br>At least one item from this list must be covered in assessment. |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Sensory organs:** eyes, ears, mouth, nose, skin |
| | **Function:** the physiology and pathology relating to how sensory organs function |
| LO2 | **Common conditions and diseases:** glaucoma (closed and open angled, steroid induced), conjunctivitis (infective and allergenic), tear deficiency (tired or dry eyes), inflammatory disorders, blepharitis, scleritis, stye, 'red eye' |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO3 | **Common conditions:** otitis externa, otitis media, ear wax, labyrinth disorders |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO4 | **Common conditions:** gingivitis, mouth ulcer, sore throat (viral/bacterial), herpes |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO5 | **Common conditions:** rhinitis (including allergic), nasal congestion, staphylococcal infections |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO6 | **Common dermatological conditions:** eczema (including infected), psoriasis, acne, rosacea, dandruff, fungal infections (eg athlete's foot, onychomycosis, ringworm), infestations (eg lice, scabies), warts, verrucas, allergic rashes, bacterial infections (eg impetigo) |
| | **Common medicines:** refer to the current edition of the British National Formulary (BNF) and other reliable sources for details of common medicines including agents and their actions, benefits and limitations and contraindications for the conditions listed |
| | **Common side effects:** refer to the current edition of the British National Formulary (BNF) for common medicines and treatments for the conditions listed |
| LO7 | **Information:** dosage, frequency, storage, care, non-compliance, relevant contraindications and any other appropriate information, eg take medicine with food |
| | **Management of their condition:** treatment pathways, self-care, self-monitoring, signposting to other information, resources and organisations, attendance at regular health checks, understanding actions of different prescribed medicines, changes to lifestyle |
| | **Condition:** eye; ear, oropharynx; nose; dermatological |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 20
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

## Unit 21 Principles of safe manufacture of quality medicines in the pharmaceutical environment (F/617/9380)

| | |
|---|---|
| **Unit summary** | This unit is designed to give learners an insight into the complex and varied aspects of the work involved in medicines preparation and manufacture. Learners will therefore consider the preparation and manufacture of medicines in order to develop an understanding of the need to work in a systematic and auditable way according to standard operating procedures. The unit also covers the principles behind quality assurance of medicines. The unit aims to provide Pharmacy Technicians with an appreciation of pharmaceutical and other factors that can result in inaccuracy and poor-quality medicines and understand the harm that could result to the health of individuals. |
| **Credit value** | 10 |
| **Guided Learning Hours** | 70 |
| **Total Unit Time** | 100 |
| **Level** | 3 |
| **Mandatory/optional** | Mandatory |

| | |
|---|---|
| **Learner name:** | |
| **Centre no:** | |

| **Learning outcomes** The learner will: | **Assessment criteria** The learner can: | **Evidence record** eg page number & method | **Assessor** Initial and date |
|---|---|---|---|
| 1. Understand the governance requirements for the manufacture of pharmaceutical products | 1.1 Explain why pharmaceutical preparation and manufacture is highly controlled by **legislation and standards** | | |
| | 1.2 Explain how legislation governs the manufacture and supply of **clinical trial** materials | | |
| | 1.3 Outline the roles and responsibilities of **key personnel** in pharmaceutical preparation and manufacture | | |
| | 1.4 Explain why it is important to have a robust recording system in pharmacy preparation and manufacturing | | |
| | 1.5 Explain the difference between **preparation and manufacture** | | |
| | 1.6 Describe the use of **documentation** in the preparation and manufacture of medicines | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 2. Understand the importance of maintaining environments for pharmaceutical manufacture in relation to **Good Manufacturing Practice (GMP)** | 2.1 Explain why **different environments** are used for pharmaceutical manufacturing | | |
| | 2.2 Explain the importance of **hygiene** in pharmaceutical manufacture | | |
| | 2.3 Explain the importance of the following in the manufacture of pharmaceutical products:<br>• process design<br>• workflow. | | |
| | 2.4 Discuss the different **sources of contamination** which could be present in a manufacturing environment | | |
| | 2.5 Explain the **potential consequences** of different sources of contamination within pharmaceutical manufacturing | | |
| | 2.6 Describe the importance of **planned preventative maintenance** in pharmaceutical manufacturing | | |
| | 2.7 Describe the procedures for **preparing the environment** for the manufacture of medicines | | |
| | 2.8 Explain the difference between sterile, non-sterile and aseptic techniques in the manufacturing of pharmaceutical products | | |
| 3. Understand how medicines are manufactured | 3.1 Describe the different **types of pharmaceutical products** | | |
| | 3.2 Describe different **pharmaceutical manufacturing techniques** | | |
| | 3.3 Explain the use of different **equipment** in the manufacturing environment | | |
| | 3.4 Outline the governance in relation to the principles of **labelling and packaging** | | |
| | 3.5 Explain the importance of correctly **labelling and packaging** pharmaceutical products | | |
| | 3.6 Describe the different methods of sterilisation | | |
| 4. Understand how to perform calculations for pharmaceutical formulae | 4.1 Explain the importance of performing accurate **calculations** | | |
| | 4.2 Explain how to calculate accurate **dosages and quantities** for individuals in accordance with prescriptions | | |

| **Learning outcomes**<br>The learner will: | **Assessment criteria**<br>The learner can: | **Evidence record**<br>eg page number & method | **Assessor**<br>Initial and date |
|---|---|---|---|
| 5. Understand the principles of pharmaceutical quality systems in the manufacture of pharmaceutical products | 5.1 Explain the role of the following in **pharmaceutical quality systems**:<br>• **quality assurance**<br>• **quality control.** | | |
| | 5.2 Describe how manufactured products are tested for quality | | |
| | 5.3 Describe **types of validation** that are carried out in pharmaceutical manufacturing | | |
| | 5.4 Discuss safe systems and error reduction strategies in the context of medicines manufacture | | |
| | 5.5 Describe different **audit processes** in:<br>• licensed units<br>• unlicensed units. | | |

**Assessment guidance**

| **Delivery and assessment** |
|---|
| This unit must be assessed in line with Skills for Health Assessment Principles and the NCFE qualification assessment strategy. |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO1 | **Legislation and standards**: Medicines Act 1968; Human Medicines Regulations 2012; licensing and requirements process; EU Directive on Good Manufacturing Practice for Human Medicinal Products; Rules and Guidance for Pharmaceutical Manufacturers and Distributors and current appendices thereof (Orange Guide); Quality Assurance of Aseptic Preparation Services (current edition) EL(97) 52; Good Distribution Practice (GDP); Good Automated Manufacturing Practice (GAMP) |
| | **Clinical trial:** purpose, design of trials; different types of trials; phases of trials, good clinical practice (GCP) and clinical trials regulation; protection of the public; Investigational Medicinal Products (IMPs) |
| | **Key personnel:** roles and responsibilities of Qualified Person (QP); production manager; Quality Assurance (QA) Manager; Regional QA Officer; quality controller; Accountable Pharmacist; Authorised Pharmacist; accredited product approver |
| | **Preparation and manufacture:** non-sterile; extemporaneous products; sterile and aseptic; large batch production: scaling-up of quantities; scaling-up of methods of manufacture; scaling-up of packaging and transport operations |
| | **Documentation:** certificates of analysis and conformity; data integrity; documentation and system control in pharmacy manufacturing: local standard operating procedures; working procedure manuals, batch worksheets or records and associated documents; storage, distribution and transport of pharmaceutical products; dispensing units |

| **Scope of learning**<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| LO2 | **Good Manufacturing Practice** applied in preparation and manufacturing areas; preparation versus manufacturing: the difference between extemporaneous and named patient dispensing items and licensed manufacturing; how this is implemented in the workplace |
| | **Different environments** must include: classification of clean rooms and support rooms; classification of isolators; air handling units; High-Efficiency Particulate Air (HEPA) filters; essential requirements for sterile, non-sterile and aseptically prepared products in the manufacturing environment, fabric and fittings of buildings, layout of preparation areas |
| | **Hygiene** and its potential effects on environment, products and therefore the safety of individuals |
| | **Sources of contamination:** particles; microorganisms; chemical/cross contamination |
| | **Potential consequences:** failed batches; harm to individuals; waste; cost; delay to treatment; reputation |
| | **Planned preventative maintenance:** use and scheduled maintenance to premises and equipment |
| | **Preparing the environment:** environmental monitoring and recording of results in relation to: product quality; safe parameters of the clean room; cleaning; changing procedures |
| LO3 | **Types of pharmaceutical products:** eye drops, injections; antibiotic reconstitutions; cytotoxic products; monoclonal antibodies (MABs), advanced therapy medicinal product (ATMP) parenteral nutrition (PN); radiopharmaceutical products; centralised intravenous additive service (CIVAS); syringe drivers; gene therapy, radiopharmacy; extemporaneous products |
| | **Pharmaceutical manufacturing techniques**: mixing; size reduction; doubling up; filtration; asepsis |
| | **Equipment:** practical use of autoclaves, stills, mixing equipment, filling and sealing equipment, pumps, unidirectional air flow and isolator cabinets, filters |
| | **Labelling and packing:** in line with legislation |
| LO4 | **Calculations** for: weights; volumes; percentages; ratios; dilutions; displacement values; small-quantity calculations; concentration; use of formulae for extemporaneous dispensing |
| | **Dosages and quantities** for individuals based on: age, weight, surface area and blood volume; quantity of medicine based on number of prescribed doses and time intervals |
| LO5 | **Pharmaceutical quality systems (PQS):** implementation of Quality Management; philosophy or operations management; process control, process validation, personal validation, product definition, specifications, safe systems, corrective and preventive actions (CAPA), continuous improvement record keeping; health and safety reporting procedures; validation, eg broth and process validation |
| | **Quality assurance:** standards in the dispensing or manufacturing process, master formulae and worksheets, official standards relating to containers, raw materials and finished products, quality and product specifications; product contamination by personnel, environment and personnel monitoring; shelf life and stability testing; statutory requirements on quality of pharmaceutical raw materials and formulated products; packaging, labelling and quarantine of completed products, release procedure; batch reconciliation and product recall; procedures; quality assurance issues particular to large-scale production manufacture |
| | **Quality control**: contamination or impurities in pharmaceutical materials and formulated products, their sources and control; in-process testing, degradation of pharmaceutical products; chemical analysis of raw materials and final products; reasons for product sampling and reliability, sterility and pyrogen testing |

| Scope of learning<br>*Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.* | |
|---|---|
| | **Types of validation:** operator validation; process validation; change validation; transfer validation |
| | **Audit processes**: Medicines and Healthcare products Regulatory Agency (MHRA); EL(97)52 Aseptic Dispensing in NHS Hospitals |

**Learner declaration of authenticity:**
I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:** Unit 21
I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date:

For e-portfolio a signature is not required, providing the learner has a personalised and secure login.

**Suitable assessment methods**

Each learner must generate evidence from appropriate assessment tasks which demonstrate achievement of all the learning outcomes associated with each unit.

A range of approved assessment methods has been identified, which may be used for the units in this qualification. This gives the opportunity for different learning styles and individual needs of learners to be taken into account.

If you are proposing to use an assessment method that is not included within the list below, you should contact your External Quality Assurer with full details of your proposed method. It will need formal approval from us before it can be used.

**Centres must verify that a significant proportion of assessment decisions of competence take place in the workplace, for the trainee to demonstrate how they meet the learning outcomes in practice. Centres may use evidence provided by experienced Assessors other than their own, or expert witnesses testimony, to assess competence, but this can only form one of the three pieces of evidence required for each skills based assessment criteria.**

Recognition of prior learning (RPL) will only be accepted where a learner has been registered on a GPhC approved Pharmacy Technician qualification previously. RPL should not be used from other qualifications.

Please refer to the notes relating to expert witness testimony and simulation which follow this table.

| Ref | Assessment Method | Assessing Competence/ Skills | Assessing Knowledge/ Understanding |
|---|---|---|---|
| A | Direct observation of learner by Assessor:<br>• by an Assessor who meets the relevant Sector Skills Council's or other assessment strategy/principles and includes inference of knowledge from this direct observation of practice | Yes | No |
| B | Professional discussion | Yes | No |
| C | Expert witness testimony*<br>• when directed by the Sector Skills Council or other assessment strategy/principles. | Yes | No |
| D | Learner's own work products | Yes | Yes |
| E | Learner log or reflective diary | Yes | Yes |
| F | Activity plan or planned activity | Yes | Yes |

| Ref | Assessment Method | Assessing Competence/ Skills | Assessing Knowledge/ Understanding |
|---|---|---|---|
| G | Portfolio of evidence<br>• may include simulation.** | Yes | Yes |
| H | Recognition of prior learning (please note that recognition of prior learning will only be accepted when a learner has been enrolled on a Pharmacy Technician qualification previously). | Yes | Yes |
| I | Reflection on own practice in real work environment | Yes | Yes |
| J | Written and pictorial information | No | Yes |
| K | Scenario or case study | No | Yes |
| L | Task set by CACHE (for knowledge learning outcomes) | No | Yes |
| M | Oral questions and answers | Yes | Yes |

* **Expert witness testimony** should be used in line with the relevant assessment strategy/principles. This method must be used with professional discretion, and only selected when observation would not be appropriate. Those providing an expert witness testimony must be lead practitioners with experience of making judgements around competence. The circumstances that may allow for an expert witness testimony include:

- when assessment may cause distress to an individual, such as supporting a child with a specific need
- a rarely occurring situation, such as dealing with an accident or illness
- confidential situations – such as safeguarding strategy meetings – where it would be inappropriate for an Assessor to observe the learner's performance.

** **Simulation**. A learner's portfolio of evidence may only include simulation of skills where simulation is permitted. We have been clear about which units allow simulation in the unit summaries above.

# Section 3

## Explanation of terms

**Explanation of terms**

This table explains how the terms used at Level 3 in the unit content are applied to this qualification (not all verbs are used in this qualification).

| | |
|---|---|
| **Apply** | Explain how existing knowledge can be linked to new or different situations in practice. |
| **Analyse** | Break the subject down into separate parts and examine each part. Show how the main ideas are related and why they are important. Reference to current research or theory may support the analysis. |
| **Clarify** | Explain the information in a clear, concise way. |
| **Classify** | Organise according to specific criteria. |
| **Collate** | Collect and present information arranged in sequential or logical order. |
| **Compare** | Examine the subjects in detail and consider the similarities and differences. |
| **Critically compare** | This is a development of compare where the learner considers the positive aspects and limitations of the subject. |
| **Consider** | Think carefully and write about a problem, action or decision. |
| **Demonstrate** | Show an understanding by describing, explaining or illustrating using examples. |
| **Describe** | Write about the subject giving detailed information in a logical way. |
| **Develop (a plan/idea which …)** | Expand a plan or idea by adding more detail and/or depth of information. |
| **Diagnose** | Identify the cause based on valid evidence. |
| **Differentiate** | Identify the differences between two or more things. |
| **Discuss** | Write a detailed account giving a range of views or opinions. |
| **Distinguish** | Explain the difference between two or more items, resources, pieces of information. |
| **Draw conclusions (which …)** | Make a final decision or judgement based on reasons. |
| **Estimate** | Form an approximate opinion or judgement using previous knowledge or considering other information. |

| | |
|---|---|
| **Evaluate** | Examine strengths and weaknesses, arguments for and against and/or similarities and differences. Judge the evidence from the different perspectives and make a valid conclusion or reasoned judgement. Reference to current research or theory may support the evaluation. |
| **Explain** | Provide detailed information about the subject with reasons showing how or why. Responses could include examples to support these reasons. |
| **Extrapolate** | Use existing knowledge to predict possible outcomes which might be outside the norm. |
| **Identify** | Recognise and name the main points accurately. (Some description may also be necessary to gain higher marks when using compensatory marking.) |
| **Implement** | Explain how to put an idea or plan into action. |
| **Interpret** | Explain the meaning of something. |
| **Judge** | Form an opinion or make a decision. |
| **Justify** | Give a satisfactory explanation for actions or decisions. |
| **Perform** | Carry out a task or process to meet the requirements of the question. |
| **Plan** | Think about and organise information in a logical way using an appropriate format. |
| **Provide** | Identify and give relevant and detailed information in relation to the subject. |
| **Review and revise** | Look back over the subject and make corrections or changes. |
| **Reflect** | Learners should consider their actions, experiences or learning and the implications of this for their practice and/or professional development. |
| **Select** | Make an informed choice for a specific purpose. |
| **Show** | Supply evidence to demonstrate accurate knowledge and understanding. |
| **State** | Give the main points clearly in sentences or paragraphs. |
| **Summarise** | Give the main ideas or facts in a concise way. |

# Section 4

## Additional information

## Additional information

### Resource requirements

Learners must have access to a registered Pharmacist or registered Pharmacy Technician within a Pharmacy setting.

Learners would benefit from access to a laboratory and laboratory equipment, but where this is not possible use of virtual technology or video is acceptable.

As this qualification provides entry into a registered profession and is regulated by the General Pharmaceutical Council (GPhC), the GPhC documents referenced in Section 01 are also a mandatory resource requirement for this qualification.

---

## Support for centres

### Key Facts

This document outlines the key information of this qualification for the centre, learner and employer.

### Useful websites

Centres may find the following website helpful for information, materials and resources to assist with the delivery of this qualification:

- General Pharmaceutical Council (GPhC) www.pharmacyregulation.org

---

# Section 5

## Appendices

## Appendices

We have provided a number of templates for centres to use to help provide evidence for approval and External Quality Assurance visits. These documents are not mandatory, but evidence that the required processes are in place will need to be provided at approval and quality assurance visits.

### Appendix A: Character reference template

It is a requirement of the General Pharmaceutical Council (GPhC) that centres have measures in place as part of their selection process that make sure applicants have the right attributes to train as a healthcare professional.

Good character checks should include consideration of any cautions or convictions, any investigations or fitness to practise proceedings with other regulatory bodies and any issues connected to their academic or training career.

A good character reference is one way of providing this evidence.

### Appendix B: Self-declaration of health template

It is a requirement of the GPhC that appropriate health checks are carried out at the point of selection, to seek information about conditions that may affect an applicant's fitness to practise as a trainee and to consider how such conditions could be managed.

A self-declaration of health form is one way that centres can provide this evidence.

### Appendix C: Patient feedback questionnaire

It is a requirement of the GPhC that patient feedback is collected to inform course development and the personal development of the pre-registration trainee Pharmacy Technician. A patient feedback questionnaire is one way that centres can meet these criteria.

### Appendix D: Three-way agreement template

It is a requirement of the GPhC that formal agreements are in place between learners, employers and centres outlining roles and responsibilities for delivery, assessment and supervision. Using our three-way agreement template is one way that centres can meet this condition.

**Appendix A: Character reference template**

Course providers should have measures in place as part of the selection criteria that make sure applicants have the right attributes to train as a healthcare professional.

This includes consideration of the appropriate characteristics, attitudes and qualities necessary to act professionally, provide person-centred care and prioritise patient safety.

If learners are 16 on entry to the course they may not have any professional experience to support their application.

Character references are one way that centres can be confident that learners have the right attributes. They can be provided by Teachers, Lecturers, group/club leaders, mentors, neighbours or family friends. They shouldn't be written by a close friend or relative.

An example template is below.

*Dear Sir/Madam*

*I am pleased to write this character reference template for NAME in relation to their application to study as a pre-registration Pharmacy Technician.*

*Please include some detail about your relationship with the applicant including how long you've known them and in what capacity.*

*I am confident that NAME has the appropriate characteristics, attitudes and qualities necessary to act professionally, provide person-centred care and prioritise patient safety because:*

*(please give examples of situations where you have seen the individual demonstrate these characteristics)*

*Please add your contact details and any other relevant information including your professional status.*

**Appendix B: Self-declaration of health template**

Learner name:
Date:

Do you need to declare a physical or mental health condition which may impact on your ability to train as a Pharmacy Technician? This may include a health condition which requires you to change your training or practice to enable you to work safely with patients or may cause an interruption to your studies.

| | |
|---|---|
| Yes | |
| No | |

| If **yes**, please give details below about your diagnosis including dates, any treatment you are receiving and how you think this might affect your ability to train. |
|---|
| |

| How will this condition (these conditions) be managed? (To be completed by centre staff in conjunction with the learner.) |
|---|
| |

**Please note that it is the joint responsibility of the learner and the centre contact to consider any changes in an individual's health condition which may impact on their fitness to practise.**

Signed (learner)
Signed (centre contact)

**Appendix C: Patient Feedback questionnaire**

The General Pharmaceutical Council (GPhC) sets out standards that must be met by the registered members of the pharmacy team that are involved in your care. The trainee Pharmacy Technician (insert name) that was involved in your care is expected to work towards achieving the same. Your evaluation of (insert name) will contribute towards his/her further development and compliance with the guidance. This form remains anonymous, but the responses may be shared with the learner/Tutors/learning centre.

Please complete the questionnaire and return it to:

……by…… (date)

| The trainee Pharmacy Technician was... | Strongly Agree | Agree | Unsure | Disagree | Strongly Disagree |
|---|---|---|---|---|---|
| Easily identified | | | | | |
| Professional | | | | | |
| Courteous | | | | | |
| Confident | | | | | |
| Informative | | | | | |
| Respectful | | | | | |
| Knowledgeable | | | | | |
| Kind | | | | | |
| Argumentative | | | | | |
| Untidy in appearance | | | | | |
| Impolite | | | | | |
| A good member of the team | | | | | |

| |
|---|
| **Would you be happy for this trainee Pharmacy Technician to be involved in your care in the future?** *(please answer yes/no and give your reasons)*<br>**Yes/No – Because** |
| **Were you confident having a trainee Pharmacy Technician involved in your care?** *(please answer yes/no and give your reasons)*<br>**Yes/No – Because** |
| **Could the trainee Pharmacy Technician have done anything to improve your experience?**<br>*(please answer yes/no and give examples)*<br>**Yes/No – Examples** |
| **Please add any further information that you wish to regarding the trainee Pharmacy Technician.** |
| **Thank you for taking the time to complete this valuable evaluation.**<br><br>**Please return it to:**<br><br>**……by…….(date)** |

## Appendix D: Three-Way Learning Agreement Template

The learning partnership is between the learner, the centre and the employer.

The purpose of this agreement is to ensure that all stakeholders understand their roles and responsibilities with regards to the delivery of the course.

### Centre Commitment

Centre responsibilities to the employer:

- organisational needs analysis undertaken if required following employer engagement contact/enquiry
- initial assessment of the learner undertaken to establish eligibility (English, numeracy, character and health requirements) training needs, funding
- quote for required learning provision negotiated and accepted
- proposed training, learning needs and delivery model established
- pre-vetting visit to the learner's work/training setting to ensure health and safety requirements are in place, documented and sustained
- planned programme of learning commences as agreed
- regular reviews to take place involving all stakeholders
- procedures are in place to resolve any concerns or appeal, including those to do with fitness to practise
- three-way contract agreed and signed

Centre responsibilities to the learner:

- careers, learning, information, advice and guidance to be provided throughout the programme to ensure the journey is the correct direction for the learner to meet their needs, aspirations and general wellbeing
- if it is no longer possible for the learner to complete the course they will be made aware of what options are available to them
- effective and informative induction provided to the learner (including information about where to find learning resources and assessment procedures)
- provide appropriate and timely feedback
- an individual learning plan is agreed between learner, employer and Assessor/Tutor and any reasonable adjustments considered
- learning programme commences as agreed in the individual learning plan (Learning Agreement)
- teaching, learning and assessment is constructive and responsive to learner's needs and provided in a professional manner
- regular reviews to take place involving all stakeholders
- procedures are in place to resolve any concerns or appeals, including those to do with fitness to practise
- support all learners to achieve their potential by ensuring adequate, quality provision and resources are supplied in line with their learning styles and needs
- three way contract agreed and signed

**Employer Commitment**

Employer responsibilities to the centre:

- encourage staff to take up learning activities and provide a scope of opportunities for evidence requirements
- to put patient safety first at all times
- to request patient/customer feedback to inform and improve the learner's personal development and the development of the course
- provide constructive feedback about the learner/centre practices where necessary
- educational supervisors to be trained and supported in their role and their roles and responsibilities clearly defined to them
- suitable facilities will be provided for assessment to take place
- review meeting arrangements will be established prior to commencement of the programme
- to embed relevant regulatory documentation in practice (eg GPhC's Guidance on Tutoring pharmacists and Pharmacy Technicians).
- allow access to authorised personnel to confirm that the provider is compliant with the external contractual requirements
- submit relevant, completed documentation to the centre within agreed time scales to meet contractual and quality monitoring requirements
- invoices are paid in line with the agreed terms and conditions
- notification to be made in writing as soon as possible if circumstances change that alter the agreements made
- procedures will be established to resolve any concerns or appeals, including those to do with fitness to practise
- allow the learner to be released from work to participate in exams and any external training
- three-way contract agreed and signed

Employer responsibilities to the learner:

- clear learning outcomes are established with the learner that reflect the learner's and company needs
- on and off the job 'time off' will be agreed in order to undertake training/learning
- provide appropriate and timely feedback
- provide access not just to registered Pharmacists or Pharmacy Technicians but also to a range of healthcare professionals, which will support the learner to work as part of a multi-disciplinary team
- notification to be made as soon as possible if circumstances change that alter the agreements made
- review meeting arrangements will be established prior to commencement of the programmes
- all pre-registration Pharmacy Technicians will be provided with a designated educational supervisor who will act as a mentor and point of contact in the workplace and with whom they can interact regularly
- supportive management of staff will create a culture of life-long learning; level of involvement established
- learner's work/training setting consistently meets Health and Safety, GPhC and/or CQC requirements
- learners will be adequately supervised at all times and only be given tasks within their area of competence as a trainee, so that patient safety is not compromised
- three-way contract agreed and signed

**Learner Commitment**

Learner responsibilities to the employer:

- to put patient safety first at all times and only carry out tasks within area of competence
- agree any meetings and reviewing opportunities and timescales
- utilise the internal arrangements for concerns or complaints, including those to do with fitness to practise
- to read and work to department Standard Operating Procedures (SOPs) at all times
- to behave in a way which is appropriate for a Trainee Pharmacy Technician including being able to act professionally and provide person-centred care
- raise concerns on identifying any risks to patients and customers, including concerns about own, or others', performance
- to identify any sensitive issues that may arise during assessment and discuss the arrangements for dealing with them
- agree who will be part of the assessment/learning process
- time off and on the job, will be agreed in order to undertake training/learning
- notification to be made as soon as possible if circumstances change that alter the agreements made
- reviews to take place in line with agreements in Individual Learning Plan
- comply with health and safety responsibilities
- follow the company's policies and procedures in line with job description
- to inform employer of any external training required as part of their programme
- three-way contract agreed and signed

Learner responsibilities to the centre:

- programme commitment is established and outlined in the Individual Learning Plan (Learning Agreement)
- use as many opportunities to broaden knowledge base and maximise assessment and learning opportunities
- notification to be made as soon as possible if circumstances change that alter the agreements made (including anything which may impact on their fitness to practise)
- reviews to take place in line with agreements in Individual Learning Plan
- agree, prepare, attend meetings and reviewing opportunities within the timescales set
- submit relevant, completed documentation within agreed time scales to meet contractual and quality monitoring requirements
- procedures are in place to resolve any concerns or appeals, including those to do with fitness to practise
- follow the provider's policies and procedures during the programme
- to attend all exams and external training as required as part of their programme
- three-way contract agreed and signed

Learner Name:

Learner Signature:

Date:

---

Employer Name:

Employer Signature:

Position:

Date:

---

Provider Name:

Provider Signature:

Position:

Date:

**Contact us**

NCFE
Q6
Quorum Park
Benton Lane
Newcastle upon Tyne
NE12 8BT

Tel: 0191 239 8000*
Fax: 0191 239 8001
Email: customersupport@ncfe.org.uk
Websites: www.ncfe.org.uk



Version 1.2 July 2023
Information in this qualification specification is correct at the time of publishing but may be subject to change.



***To continue to improve our levels of customer service, telephone calls may be recorded for training and quality purposes.***