

Template for SPCR internship projects 2024

Name & email supervisor(s): Professor Ellen Schafheutle, Dr Imelda McDermott
Proposed length of internship and when it could take place: ~ 1 month: mid-June to mid-July 2024
Host department: Institute of Population Health, University of Manchester <i>Specifically in the Centre for Pharmacy Workforce Studies, Division of Pharmacy and Optometry, The University of Manchester</i>
How will the internship be conducted: <input checked="" type="checkbox"/> In person at the university <input type="checkbox"/> Virtual/ from home <input type="checkbox"/> Both are possible, depending on preference student Hybrid arrangements will be possible
Title internship project: Advancing clinical skills in the community pharmacy workforce
Summary of the internship project: <i>(max 250 words, can include hyperlinks to further information)</i> <p>Pharmacists are playing increasingly clinical roles in primary care and clinical pharmacy, including gaining and using an independent prescribing (IP) qualification. Clinical and IP services are being introduced in community pharmacy, particularly aimed at managing urgent, low acuity conditions, thus aiming to create capacity in general practice for the management of patients with more complex needs. It is important that pharmacists have the skills and confidence to offer such services, that patients are positive about being managed by pharmacists, and indeed that GPs are confident in this approach also. It is also important that the community pharmacy environment supports the offer of safe, quality services, and that these integrate with the wider primary care system.</p> <p>At the Centre for Pharmacy Workforce Studies (CPWS), we have been commissioned to undertake two related (but not linked) studies, which an intern could work on. One is a study commissioned by NHS England, to evaluate the Community pharmacy IP pathfinders programme. The other study is funded by the NIHR SPRC and explores referrals from general practice into community pharmacy under the Community Pharmacist Consultation Service (CPCS). Both studies are mix-methods, employing literature reviews, semi-structured interviews and surveys. Both start in April 2024.</p> <p>These projects offer the opportunity for an intern to experience being part of a research team (CPWS), and – due to the timing of these projects – offer excellent insights into engaging with</p>

existing evidence and informing study design. An intern may also have the opportunity to support with our application for university ethics committee approval and possibly some secondary data analysis. We would hope that an intern could do things that add value to the overall work beyond what NHSE and SPCR have commissioned.

Learning objectives:

- To experience being part of a research team, based in [CPWS](#) and with links to population health at the University of Manchester
- To be exposed to literature review, secondary data analysis and survey and/or qualitative interview design

Any further information:

This would be most suited to a pharmacy student, however other students studying subjects other than pharmacy will also be able and welcome to work on this project, as its general purpose and methods are relevant to other workforce studies in primary care.

We realise that these internships are specifically targeted at “one non-medical student,” and this project would be perfect. We would, however, prefer it if these students could be defined other than by what they are not; so could we avoid using ‘non-medical’ please. We should define people and professionals by what they are rather than by what they are not. I was myself alerted to this a few years ago, when we had been commissioned to undertake a study looking at ‘non-medical prescribing’. We involved a group of patients and the public, and one of them challenged us not to use the term ‘non-medical’ prescriber. He illustrated this by saying that he would not, for example, describe a workman as a ‘non-plumber’ but by using a term which described their trade and what they did – rather than what they were not. He suggested we should just call them ‘prescribers’.