

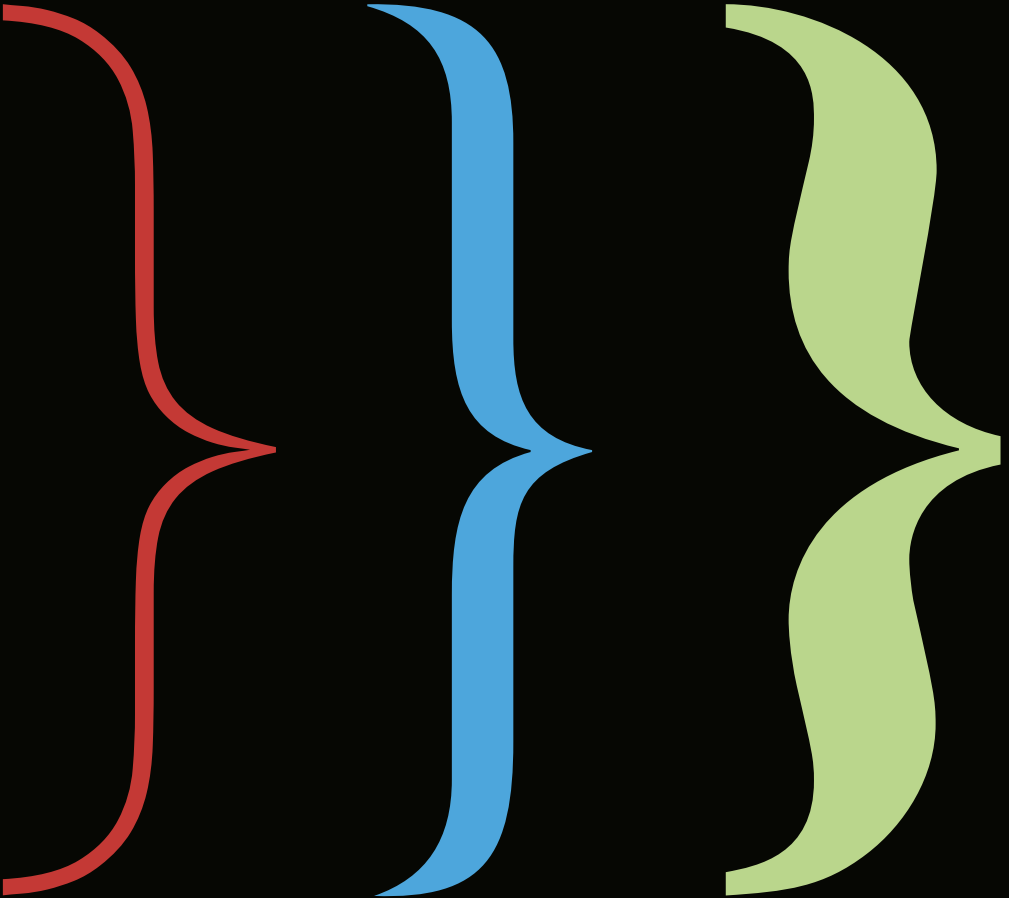
→ **Be part of the change**

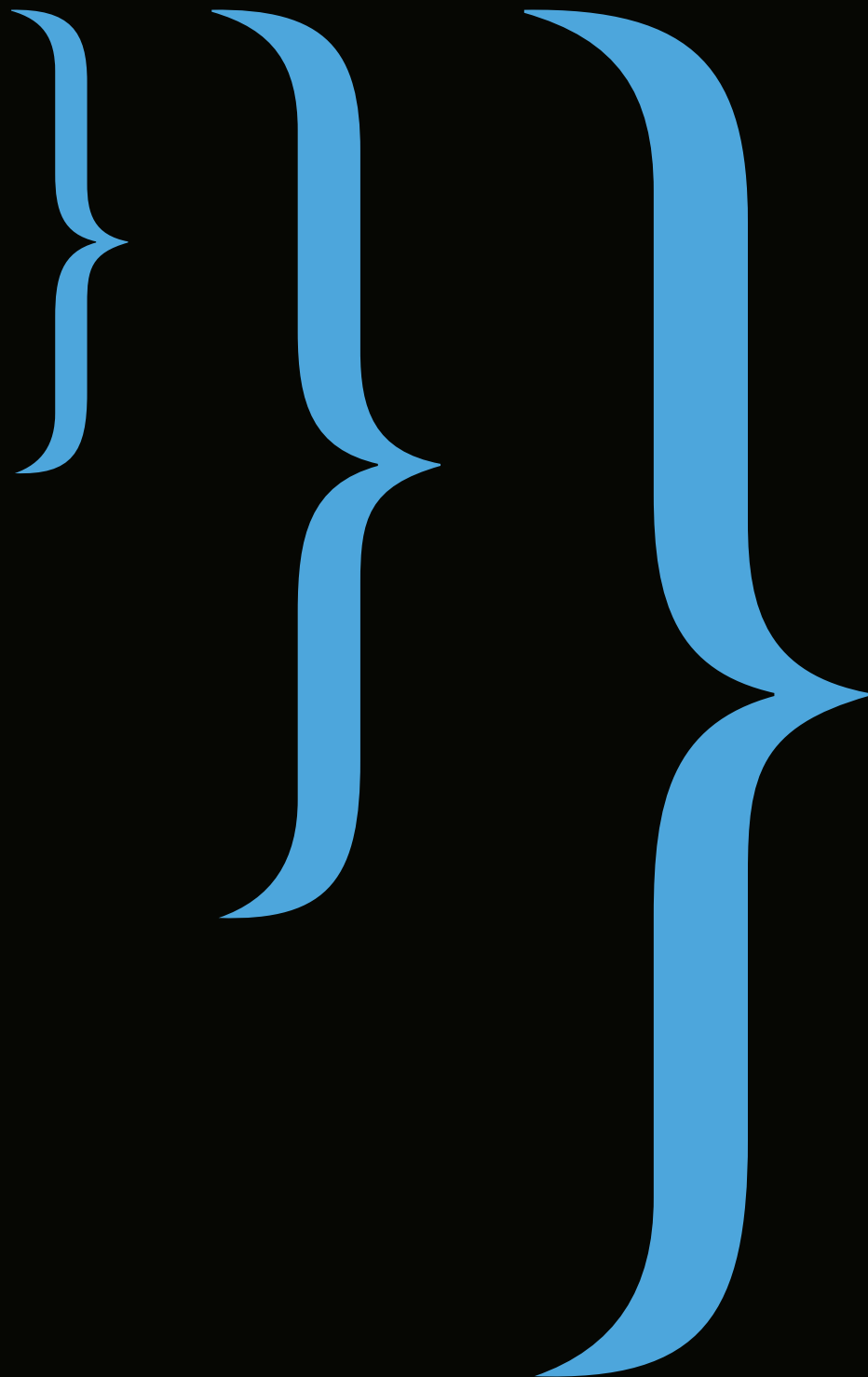


**Royal
Pharmaceutical
Society**
of Great Britain

Inspiring leadership

An introduction for primary care trusts to the Leading Across Boundaries programme





Looking to the future

Leading Across Boundaries is a unique programme aiming to develop the leadership potential of individual pharmacists across the public and private sectors. It supports both the development of robust, forward-thinking and outward-looking local pharmacy networks and the discovery of solutions to important local issues.

Taking this three stranded approach, the programme has the potential to help Primary Care Trusts:

- get better value from increasingly tight budgets
- energise and engage key professionals
- improve patient safety
- offer a more co-ordinated service for patients
- break down traditional professional barriers.

The programme is the result of a collaboration between the NHS Leadership Centre and the Royal Pharmaceutical Society of Great Britain. It is now endorsed by the NHS Institute for Innovation and Improvement based at the University of Warwick.

The contribution that pharmacists and their teams could play in improving the NHS is often underestimated. Recent research shows that nearly 7% of admissions to hospital are related to an adverse drug reaction, at an estimated cost of £466 million per year.¹ Most of these are avoidable reactions. Other studies have found that almost 60% of unplanned readmissions could be avoided by more effective action at the time of discharge.²

The Leading Across Boundaries programme has the potential to make a big difference to the work of local PCTs by tackling some of these issues. There is also the potential to maximise the opportunities presented by the new community pharmacy contract; practice based commissioning; Choosing Health Through Pharmacy³ and Our Health, Our Care, Our Say.⁴

The pilot programme, launched in England in 2005, helped pharmacists within local networks develop their leadership skills and work across organisational boundaries in new and effective ways.

Nearly 80% of participants said that the programme helped them to make significant or major progress on a real-life local issue. Nearly 70% said that they had noticed a significant or major development in how they communicated and worked together to get things done. Nearly 95% said that pharmacy was or had the potential to be better integrated into the work of the NHS following their participation in the programme.

“We have worked together and this will ultimately mean that the patient will get a better level of service and quality of life resulting in better uses of NHS resources.”

Good practice, local application

Leadership development is an important tool in driving improvement in the NHS. However, many pharmacists have not had access to the benefits of leadership development programmes.

Our Leading Across Boundaries six- to nine-month integrated programme aims to fill this gap. It brings together key pharmacists in the same PCT area for six days. Participants are given an overview of current leadership thinking and best practice, and work on their individual and collaborative leadership styles, linked to the NHS Leadership Qualities Framework™. This work is supported by mentors or buddies and by action learning sets.

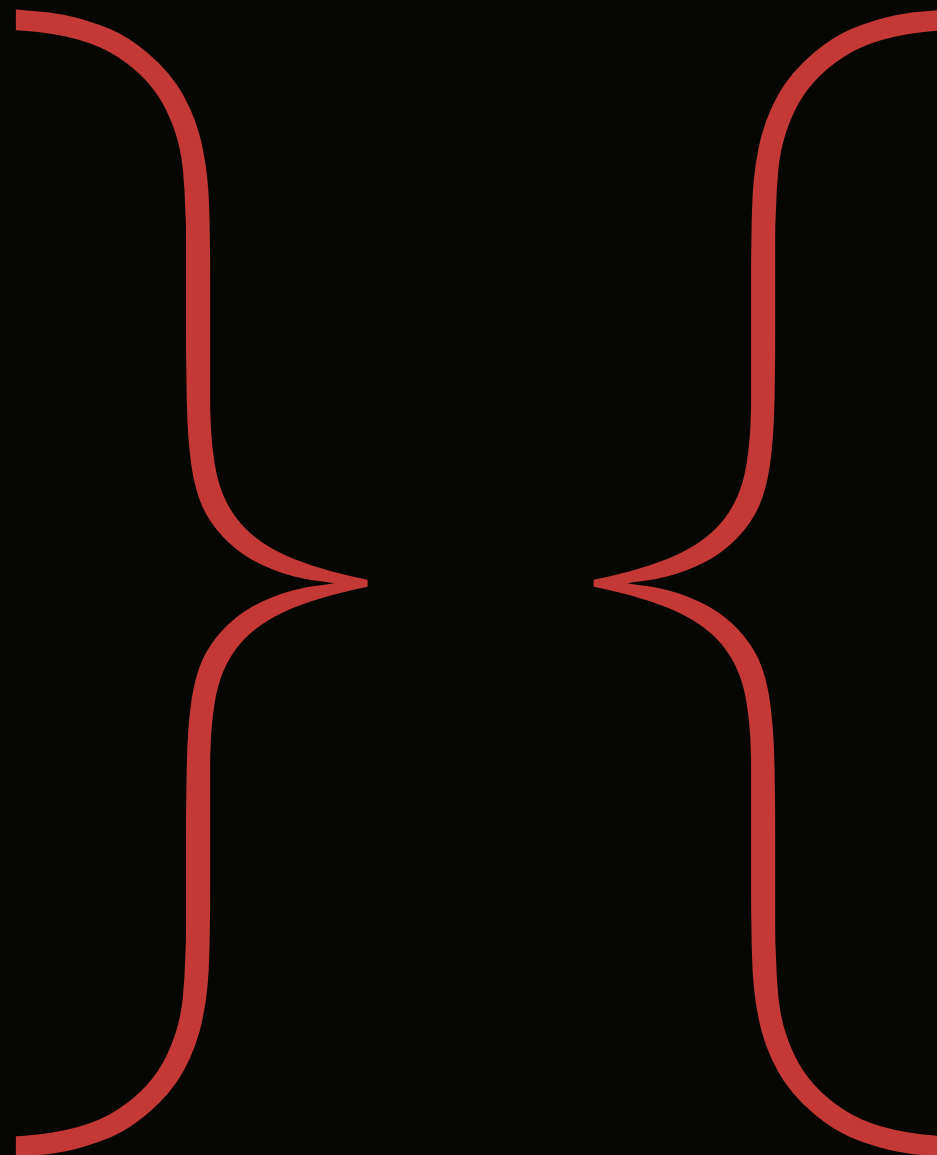
The programme has a very practical focus. Participants work together to improve a specific local issue. This might involve better management of complex pharmaceutical cases, or improving processes on hospital discharge. Whatever the issue, the aim is always to improve services for patients.

For the most effective results, eight to 10 participants with a key role to play in the improvement of local pharmacy services will be drawn from many different sectors – senior managers working within hospital or PCTs, employee managers working for national and local retail pharmacy businesses, proprietor pharmacists, GP practice pharmacists and others.

Ideally, participants will include:

- the pharmacist member of the Professional Executive Committee
- a senior PCT pharmacist
- a member of the Local Pharmaceutical Committee, its development officer or chief executive
- senior acute and mental health trust pharmacists
- pharmacists already working across health and social care boundaries with responsibilities within the network area
- other interested pharmacists particularly from the community sector.

“We have been accepted as an integrated group at a local NHS level.”



Developing better networks

One group who took part in the programme designed a new service for patients to reduce hospital admissions due to drug – related problems, as well as decrease the length of hospital stay.

The estimated cost of admitting up to 800 patients a year to hospital as a result of potentially preventable drug related causes is up to £1.5 million. They identified the pinch points in the current system – including lack of co-ordination and communication post-hospital discharge, and patients leaving with bags of medicines (to join the bags they already had at home).

The group says the new way of working should save money by reducing drugs wastage, inappropriate prescribing and unnecessary GP visits. They estimate up to £1.5 million savings per year, plus real improvements in patient care.

A flexible programme

By creating a strong network of local pharmacists and working with you to determine the local focus of the programme we believe that together we can make a real difference to patient care; reducing budgets and hospital admissions; helping with the delivery of the new pharmacy contract, practice based commissioning and public health strategies; meeting the desire of the public to see a greater role for pharmacists.

The programme has been designed to be cost-effective, and tailored to local needs. Delivery can be flexible, undertaken by a team from the Royal Pharmaceutical Society working alone or alongside suitably experienced local facilitators.

To find out more about the programme please contact:

Anne Adams
Head of Professional Leadership
E anne.adams@rpsgb.org
T 0115 9396465

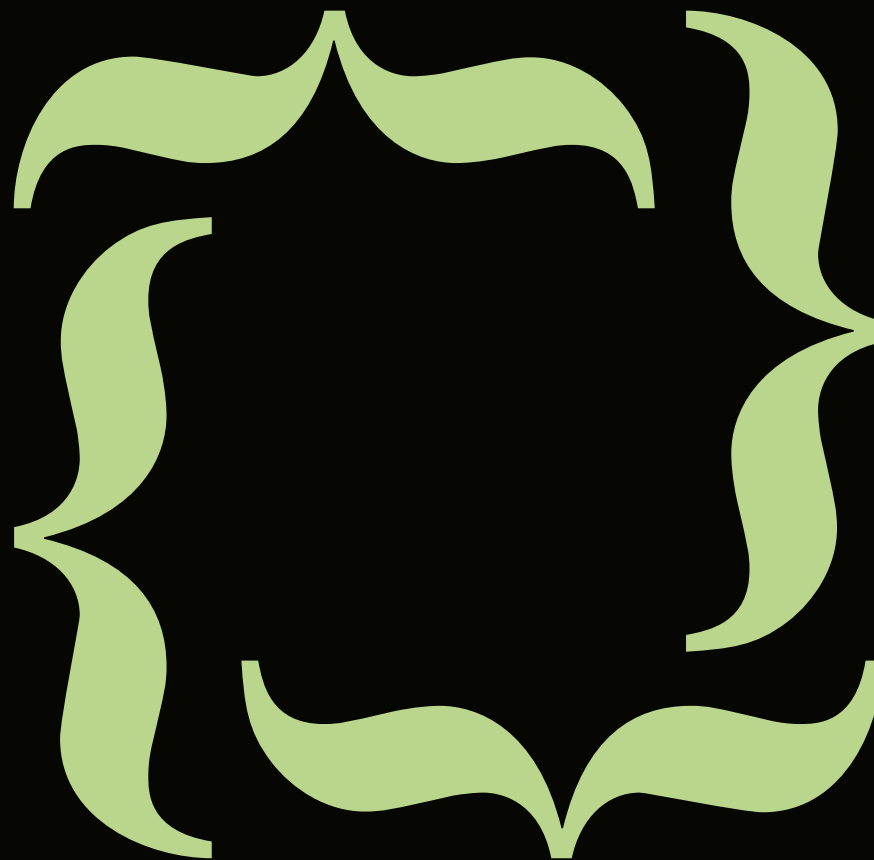
¹ Pirmohamed M et al, Adverse drug reactions as cause of admission to hospital: prospective analysis of 18,820 patients, BMJ 2004;329:15-19

² Moving Patients, Moving Medicines, Moving Safely: Guidance on Discharge and Transfer Planning, RPSGB, 2006

³ Choosing Health Through Pharmacy: more information can be found on www.dh.gov.uk

⁴ Our Health, Our Care, Our Say: more information can be found on www.dh.gov.uk

“We’ve made a difference already – even with the first patient who was discharged.”



**Royal Pharmaceutical Society
of Great Britain**

1 Lambeth High Street
London SE1 7JN

T 020 7735 9141
F 020 7735 7629

www.rpsgb.org.uk
