



Expert practice guide to support pharmacists with the knowledge, skills, experience and behaviours to advance their practice

Specialist practice in rheumatology

July 2016

This expert practice guide is endorsed by:



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- This publication is intended as a guide and may not include all information relating to its subject matter.
- All information and advice should be interpreted with reference to your own professional knowledge and all relevant pharmacy and healthcare literature and guidelines.
- Nothing in this publication constitutes legal advice and cannot be relied upon as such.
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- The layout and themes in this expert practice guide may be subject to change. Reviews can be expected annually while the Faculty is being set up. Please check that you are using the most up to date version of the curricula on the RPS Faculty website (www.rpharms.com/faculty).

Acknowledgements

- The mapping tables in this document closely follow the Royal Pharmaceutical Society Advanced Pharmacy Framework (APF) which builds on the widely used Advanced to Consultant Level Framework (ACLF) which was developed by the Competency Development and Evaluation Group (CoDEG).

Primary Contributors

- This document was developed by a Steering Group of UK specialist pharmacists in rheumatology and a consultant rheumatologist, with support from the British Society of Rheumatology.

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Approval

- This document has been approved for use by the BSR and RPS.

Professional Expert Practice Guide for Advanced Pharmacy Practice in Rheumatology

- This expert practice guide provides an overview of the knowledge and skills required to practice at advanced level in rheumatology pharmacy at three stages:
 - Advanced Stage I, Advanced Stage II and Mastery, in line with the requirements of the APF.
- The document is intended to be used by practitioners to support the development of their practice at advanced level in managing patients with rheumatic disease.
- It encourages practitioners to think critically and to use knowledge in rheumatic therapeutics, supporting informed decision making using knowledge from this and other related therapeutic areas to promote optimal medicines management for patients.
- This document is intended to be as useful to the wider community working with patients with rheumatic disease as possible from all sectors of care.
- Feedback will be obtained to ensure that the document is beneficial for the health service and accurately reflects the needs of pharmacists working at the specified stages.

Knowledge, Skills, Experience and Behaviours

- Practitioners will develop portfolios linked to the APF (www.rpharms.com).
- The recommended knowledge, skills, experience and behaviours which practitioners require to demonstrate competence at Advanced Stage I, Advanced Stage II and Mastery stage for all six APF clusters (Expert Professional Practice, Collaborative Working Relationships, Leadership, Management, Education, Training and Development, and Research and Evaluation) are listed here.
- The APF mapping tables in this document link the recommended knowledge, skills, experience and behaviours with the relevant competency developmental descriptors.

Advanced Stage I

- Either early stages of specialisation and advancement, or established in a role, performing well, advanced beyond foundation years.

Advanced Stage II

- An expert in an area of practice, experienced. Routinely manages complex situations and a recognised leader locally/regionally.

Mastery

- Aligned to recognised leader in community or primary care; Consultant and corporate level practice in NHS; equivalent leads in academia; business / corporate leadership roles in industry; business or strategic leader in community. Recognised as a leader in an area of expertise (nationally often internationally), alongside a breadth of experience.

Resources for Curriculum Development

Supporting References and External Resources

The Royal Pharmaceutical Society (RPS) Advanced Pharmacy Framework (APF) 2013. Available at: <http://www.rpharms.com/faculty-documents/rps-advanced-pharmacy-framework-guide.pdf>

The Royal Pharmaceutical Society (RPS) Renal Expert Professional Practice Curriculum 2014. Available at: <http://www.rpharms.com/faculty-resources/expert-practice-curricula.asp> (content accessible for members only).

APF Mapping Tables

- The following tables list the knowledge, skills, experience and behaviours recommended to demonstrate the APF competencies for all six APF clusters (Expert Professional Practice, Collaborative Working Relationships, Leadership, Management, Education, Training and Development, and Research and Evaluation) mapped against the relevant APF competency developmental descriptors.
 - For the APF Expert Professional Practice cluster, developmental descriptors vary in places from the APF).
 - The tables are intended primarily to support practitioners to develop their practice, but may be useful for portfolio preparation. All statements relate to the practitioner's area of practice specialty.
- The competencies listed for "Advanced Stage I", "Advanced Stage II" and "Mastery" are additive, i.e. those at "Advanced Stage II" build on the competencies established in "Advanced Stage I".
 - Practitioners are expected to demonstrate "Advanced Stage I" first before moving on to "Advanced Stage II".
 - Those wishing to demonstrate "Advanced Stage II" will usually be expected to have demonstrated "Advanced Stage I" previously.
 - Those wishing to demonstrate "Mastery" will usually be expected to have demonstrated "Advanced Stage II" previously.
- A pharmacist starting to specialise in an area of Expert Professional Practice might be expected to be working towards attaining competencies at Advanced Stage I. A practitioner having attained Advanced Stage I in an area of Expert Professional Practice might be expected to be working towards attaining competencies at Advanced Stage II.
- At Advanced Stage I practitioners are expected to build on the General Level Framework competencies and (for the relevant competency descriptors) to demonstrate experience of caring for patients with disorders, pharmaceutical care issues and co-morbidities that are commonly found in rheumatology.
- At Advanced Stage II practitioners are expected to build on Advanced Stage I competencies and (for the relevant competency descriptors) to demonstrate experience of caring for patients with complex co-morbidities or pharmaceutical care issues or those with more specialist conditions in Rheumatology.
- At Mastery Level practitioners are expected to build on Advanced Stage II competencies and (for the relevant competency descriptors) to demonstrate experience of caring for patients

with complex co-morbidities or pharmaceutical care issues, or those with more specialist conditions in Rheumatology.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 1: Expert Professional Practice			
1.1 Expert skills and knowledge	<p>Demonstrates specialist pharmaceutical skills and knowledge in core rheumatology curriculum</p> <p>In addition for patient-focused roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients with rheumatological and other co-morbidities</p>	<p>Demonstrates advanced pharmaceutical skills and knowledge in defined area(s)</p> <p>In addition for patient-focused roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s)</p>	<p>Advances the knowledge base in defined area(s)</p> <p>In addition for patient-focused roles: Advances in-depth/complex pharmaceutical care programmes for patients</p>
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Application of specialist* disease knowledge to patients with rheumatology conditions (including: aetiology, physiology, common signs and symptoms, epidemiology, risk factors) in an inpatient or outpatient setting. • Application of specialist knowledge of medicines used in the management of rheumatic diseases (including: place in therapy, mechanism of action, indications, common adverse effects and drug interactions, and precautions). 	<ul style="list-style-type: none"> • Application of advanced* disease knowledge to patients with rheumatology conditions (including: aetiology, physiology, less common signs and symptoms, epidemiology, risk factors) in an inpatient or outpatient setting. • Application of advanced knowledge of medicines used in the management of rheumatic diseases (including: place in therapy, mechanism of action, indications, less common adverse effects and drug interactions, and precautions), including unlicensed drugs and off-label use of drugs. 	<ul style="list-style-type: none"> • Application of expert* disease knowledge to patients with rheumatology conditions (including: aetiology, physiology, rare signs and symptoms, epidemiology, risk factors) in an inpatient or outpatient setting. • Application of expert knowledge of medicines used in the management of rheumatic diseases (including: place in therapy, mechanism of action, indications, rare adverse effects and drug interactions, and precautions), including unlicensed drugs and off-label use of drugs.

*Please refer to the Glossary for definitions of “specialist”, “advanced”, and “expert” in the context of Expert Professional Practice for rheumatology pharmacists.

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Cluster 1: Expert Professional Practice			
1.1 Expert skills and knowledge	<p>Demonstrates specialist pharmaceutical skills and knowledge in core rheumatology curriculum</p> <p>In addition for patient-focused roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients with rheumatological and other co-morbidities</p>	<p>Demonstrates advanced pharmaceutical skills and knowledge in defined area(s)</p> <p>In addition for patient-focused roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s)</p>	<p>Advances the knowledge base in defined area(s)</p> <p>In addition for patient-focused roles: Advances in-depth/complex pharmaceutical care programmes for patients</p>
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Application of specialist knowledge in the management of rheumatology pharmaceutical issues to ensure safe prescribing in all patients. • Able to develop, implement and review plans for the pharmaceutical care of patients with rheumatic diseases, including dose adjustment. • Able to recognise, recommend, interpret and review appropriate monitoring of common lab tests, disease markers and outcomes measures for rheumatic diseases and medicines for the pharmaceutical care of rheumatic patients. 	<ul style="list-style-type: none"> • Able to interpret and use complex/specialist lab tests and/or disease markers for the pharmaceutical care of rheumatology patients. • Able to make recommendations on the pharmaceutical care of complex rheumatology patients based on the evidence-base and/or best practice e.g. IFR. • Able to advise on the choice and use of relevant specialist resources to resolve complex pharmaceutical care issues. 	<ul style="list-style-type: none"> • Identifies knowledge gaps and advances the knowledge base in rheumatology medicine. • Application of expert clinical examination skills in the management of patients. • Identifying clinical service needs and local opportunities for expansion of the pharmacist role.

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Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Able to provide specialist rheumatology examinations of patients e.g. DAS score. • Able to assess patients that are suitable for shared care with GPs. • Able to make recommendations on the pharmaceutical care of rheumatology patients based on the evidence-base and/or best practice, including prescription of adjunct therapy. • Able to describe the structure of the service, the system of care, and the roles of the healthcare professionals and other relevant teams, disciplines or agencies involved in patient care • Able to follow relevant policies and local and national guidance e.g. BSR, EULAR. 	<ul style="list-style-type: none"> • Able to consult with, support, educate and advise patients, carers, pharmacy staff, students, medical staff, nursing staff and other allied healthcare professionals (AHPs) effectively on complex pharmaceutical care issues and related relevant healthcare issues within and outside the Trust. • Able to influence the structure of the service, the system of care, and the roles of the healthcare professionals and other relevant teams, disciplines or agencies involved in patient care. • Able to advise on the relevant legal, ethical, professional and organisational policies and procedures and codes of conduct issues that have implications for the pharmaceutical care of patients. 	<ul style="list-style-type: none"> • Able to consult with, support, educate and advise patients, carers, pharmacy staff, students, medical staff, nursing staff and other allied healthcare professionals (AHPs) effectively on highly complex pharmaceutical care issues and related relevant healthcare issues within and outside the Trust. • Able to take a leadership role in defining the structure of the service, the system of care, and the roles of the healthcare professionals and other relevant teams, disciplines or agencies involved in patient care • Able to manage patients who have highly complex co-morbidities that require cautious use of a drug because of their co-morbidities.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 1: Expert Professional Practice			
1.1 Expert skills and knowledge	<p>Demonstrates specialist pharmaceutical skills and knowledge in core rheumatology curriculum</p> <p>In addition for patient-focused roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients with rheumatological and other co-morbidities</p>	<p>Demonstrates advanced pharmaceutical skills and knowledge in defined area(s)</p> <p>In addition for patient-focused roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s)</p>	<p>Advances the knowledge base in defined area(s)</p> <p>In addition for patient-focused roles: Advances in-depth/complex pharmaceutical care programmes for patients</p>
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Able to consult with, support, educate and advise patients, carers, pharmacy staff, students, medical staff, nursing staff and other allied healthcare professionals (AHPs) effectively on rheumatology pharmaceutical care issues and related relevant healthcare issues within the Trust. • Able to apply pharmacoeconomic principles and support drug expenditure analysis work. • Able to provide patients with appropriate resources and materials which support them in the use of their medication • Registration as a core independent prescriber. 	<ul style="list-style-type: none"> • Interprets, undertakes and communicates drug expenditure analysis and advises on relevant pharmacoeconomic issues. • Holds an advanced rheumatology examination qualification • Deals with patients who have moderate co-morbidities that would restrict treatment options or require additional monitoring e.g. pregnancy, diabetes, respiratory diseases. 	<ul style="list-style-type: none"> • Able to consult with, support, educate and advise patients, carers, pharmacy staff, students, medical staff, nursing staff and other allied healthcare professionals (AHPs) effectively on highly complex pharmaceutical care issues and related relevant healthcare issues within and outside the Trust. • Able to take a leadership role in defining the structure of the service, the system of care, and the roles of the healthcare professionals and other relevant teams, disciplines or agencies involved in patient care • Able to manage patients who have highly complex co-morbidities that require cautious use of a drug because of their co-morbidities.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 1: Expert Professional Practice			
1.1 Expert skills and knowledge	<p>Demonstrates specialist pharmaceutical skills and knowledge in core rheumatology curriculum</p> <p>In addition for patient-focused roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients with rheumatological and other co-morbidities</p>	<p>Demonstrates advanced pharmaceutical skills and knowledge in defined area(s)</p> <p>In addition for patient-focused roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s)</p>	<p>Advances the knowledge base in defined area(s)</p> <p>In addition for patient-focused roles: Advances in-depth/complex pharmaceutical care programmes for patients</p>
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Able to understand the burden of disease on the individual patient and society. • Able to deal with patients who have co-morbidities that would not be expected to affect their management plan e.g. hypothyroid. 		

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 1: Expert Professional Practice			
1.2 Delivery of Professional Expertise	Uses expertise to deliver medicine management service as an individual	Demonstrates accountability for the delivery of professional services and expertise via a team or directly to groups of patients/clients/users	Demonstrates accountability for the delivery of professional expertise at a defined higher level May include providing expertise and service delivery nationally or at a strategic level
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Able to provide a clinical pharmacy service and deliver effective pharmaceutical care to patients with rheumatic diseases. • Monitors prescribing quality and addresses and resolves issues identified with the appropriate member(s) of the MDT. <ul style="list-style-type: none"> ○ Resolves general queries and queries requiring specialist knowledge of rheumatology. ○ Takes active measures to avoid clinical oversight. ○ Shares MHRA reports and drug safety alerts. • Ensures that appropriate patient documentation is maintained. • Ensures protocols and formularies are based on evidence, best practice and are up to date. • Implements change from formulary reviews. 	<ul style="list-style-type: none"> • Responsible for the provision of a clinical pharmacy service (where applicable) and the delivery of effective pharmaceutical care to rheumatology patients with complex co-morbidities or pharmaceutical needs. • Monitors prescribing quality and addresses and resolves any issues identified within the locality. • Makes appropriate changes based on MHRA reports for Trust. • Actively involved in the development of medicines-related aspects of patient documentation systems. <ul style="list-style-type: none"> ○ Develops appropriate strategies to minimise drug waste. • Advises on and manages the entry of new drugs. • Able to manage homecare service, including strategic review, tendering and contracts. 	<ul style="list-style-type: none"> • Advises on workforce planning and strategic direction of specialist rheumatology pharmacy services • Advises on medicines optimisation in patients with rheumatic diseases, including tendering and procurement, entry of new drugs and treatment guidelines at a network/regional/national level. • Makes appropriate regional changes based on MHRA reports. • Implements prescription changes for patients requiring treatment outside the pathway.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 1: Expert Professional Practice			
1.2 Delivery of Professional Expertise	Uses expertise to deliver medicine management service as an individual	Demonstrates accountability for the delivery of professional services and expertise via a team or directly to groups of patients/clients/users	Demonstrates accountability for the delivery of professional expertise at a defined higher level May include providing expertise and service delivery nationally or at a strategic level
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Able to develop own work plan. • Implements prescription changes in patients being treated and responding in the rheumatology treatment pathway. 	<ul style="list-style-type: none"> • Implements prescription changes in patients that require modification of the pathway/2nd /3rd line treatment. 	

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 1: Expert Professional Practice			
1.3 Reasoning and Judgement	<p>Demonstrates ability to use skills in a range of routine situations requiring analysis or comparison of a range of options</p> <p>Recognises priorities when problem-solving and identifies deviations from the normal pattern</p>	<p>Demonstrates ability to use skills to make decisions in complex situations where there are several factors that require analysis, interpretation and comparison</p> <p>Demonstrates an ability to see situations holistically</p>	<p>Demonstrates ability to use skills to manage difficult and dynamic situations</p> <p>Demonstrates ability to make decisions in the absence of evidence or data or when there is conflicting evidence or data</p>
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Able to recognise and resolve basic problems and justify approach. • Demonstrates accurate reasoning. • Able to make decisions with limited information. • Able to critically appraise and interpret published papers. • Able to make decisions in a timely manner. • Able to prioritise problems. • Able to assess prescriptions or work for adherence to local/national guidelines. • Recognises own limitations and able to refer appropriately. 	<ul style="list-style-type: none"> • Recognises, evaluates and resolves complex problems. • Able to appraise information, make an informed decision with the evidence available and be able to justify/defend the decision to others, including in situations where evidence is lacking. • Able to present and explain a critical appraisal of published papers. • Is aware of the limitations of some research to non-research settings. • Demonstrates an ability to see situations holistically. • Able to take into consideration different values and views when making decisions. • Able to refer appropriately to others within and outside own team. 	<ul style="list-style-type: none"> • Provides expert advice to external agencies and/or professionals on novel or highly complex situations.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 1: Expert Professional Practice			
1.4 Professional Autonomy	Is able to follow legal, ethical, professional and organisational policies/procedures and codes of conduct	Is able to take action based on own interpretation of broad professional policies/procedures where necessary	Is able to interpret relevant policy and strategy, in order to establish goals and standards for others within the defined area(s)
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Contributes to the development of policies and procedures specifically for the local service, under supervision. • Applies principles of MCA. • Able to apply and comply with the relevant legal, ethical, professional and organisational policies and procedures and codes of conduct issues that have implications for the pharmaceutical care of rheumatology patients. 	<ul style="list-style-type: none"> • Develops policies, procedures and treatment guidelines specifically for the local rheumatology service. 	<ul style="list-style-type: none"> • Leads on Trust-wide issues related to rheumatology patient care. • Responsible for the application of national guidelines within the Trust.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 2: Collaborative Working Relationships			
2.1 Communication	<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible)</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere</p>
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Able to use clear, concise, appropriate and effective written and oral communication skills to a range of patients, carers and staff from within the Trust. • Able to communicate effectively where the content of the discussion is explicitly defined. • Able to communicate effectively with individual patients, carers, colleagues and clinicians in a form and manner that is consistent with the individual level of understanding, culture and background. • Able to recognise barriers to effective communication and modify communication accordingly. 	<ul style="list-style-type: none"> • Able to use clear, concise, appropriate and effective written and oral communication skills, to a range of patients, carers and staff from within and outside the Trust. • Able to communicate effectively where the content of the discussion is based on opinion. • Able to communicate effectively with groups of patients, carers, staff, colleagues and senior managers in a form and manner that is consistent with the level of understanding, culture and background of the group. 	<ul style="list-style-type: none"> • Demonstrates ability to present complex, sensitive or contentious information to large groups of patients, clinicians and senior managers. • Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere. • Able to use clear, concise, appropriate and effective written and oral communication skills to policy makers, and healthcare professionals at a national level.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 2: Collaborative Working Relationships			
2.1 Communication	<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible)</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere</p>
Recommended knowledge, skills, experience and behaviours	<p>Engagement</p> <ul style="list-style-type: none"> • Able to engage with others within the MDT about individual episodes of care. • Able to engage patients in meaningful discussions about medicines and compliance. 	<p>Engagement</p> <ul style="list-style-type: none"> • Able to engage with the MDT regarding individual complex clinical or technical issues. • Able to persuade or influence staff with respect to organisational change, research, guidelines and protocols, in line with medicines optimisation agenda. 	<p>Engagement</p> <ul style="list-style-type: none"> • Contribute to the multidisciplinary team, organisational development strategy and course of action in extremely complex cases.
	<p>Motivate</p> <ul style="list-style-type: none"> • Understands motivational language and techniques. 	<p>Motivate</p> <ul style="list-style-type: none"> • Use motivational language and techniques to motivate members of the pharmacy team to achieve an objective (e.g. to follow a guideline, collect data, to improve the quality of care, to identify areas of practice for development and improvement). 	<p>Motivate</p> <ul style="list-style-type: none"> • Use motivational language and techniques to motivate multidisciplinary team over a network or equivalent.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 2: Collaborative Working Relationships			
2.1 Communication	<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible)</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere</p>
Recommended knowledge, skills, experience and behaviours	<p>Negotiate</p> <ul style="list-style-type: none"> Understands negotiation language and techniques to achieve pharmaceutical care or to resolve technical issues for individual patients, to resolve issues about teamwork and workloads (e.g. rotas, staffing, training requirements), and to negotiates simple treatment issues with patients and MDT. 	<p>Negotiate</p> <ul style="list-style-type: none"> Uses negotiation language and techniques to achieve pharmaceutical care or technical issues for groups of patients, to resolve issues between the specialty team and pharmacy, to negotiate on financial issues, and to negotiate complex treatment issues with patients and MDT. 	<p>Negotiate</p> <ul style="list-style-type: none"> Uses negotiation language and techniques to resolve issues on an organisation-wide, network (or equivalent) or (inter) national basis.
	<p>Empathise/Provide reassurance</p> <ul style="list-style-type: none"> Communicates in an empathetic and respectful manner with patients, carers and staff. Uses appropriate verbal and body language. Able to communicate sensitive information and advice to patients in a professional manner and to acknowledge boundaries in behaviour. 	<p>Empathise/Provide reassurance</p> <ul style="list-style-type: none"> Communicates in an empathetic and respectful manner with patients, carers and staff in complex situations. Uses appropriate verbal and body language. Manages, mentors and supervises staff in an empathetic manner. Able to reassure groups appropriately 	<p>Empathise/Provide reassurance</p> <ul style="list-style-type: none"> Gives appropriate feedback and acts as a role model, helping staff to communicate in an empathetic and respectful manner (including the appropriate use of verbal and body language).

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 2: Collaborative Working Relationships			
2.1 Communication	<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible)</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere</p>
Recommended knowledge, skills, experience and behaviours	<p>Empathise/Provide reassurance</p> <ul style="list-style-type: none"> • Able to reassure individuals appropriately. 		
	<p>Listen</p> <ul style="list-style-type: none"> • Able to effectively listen and respond to patients, carers, colleagues and members of the MDT. 	<p>Listen</p> <ul style="list-style-type: none"> • Demonstrates effective listening skills with patients, carers, visitors, members of the MDT and/or colleagues. • Able to effectively listen to groups of patients, carers, visitors, members of the MDT and/or colleagues. 	<p>Listen</p> <ul style="list-style-type: none"> • Trains pharmacy staff in listening skills.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
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2.1 Communication	<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible)</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere</p>
Recommended knowledge, skills, experience and behaviours	<p>Influence</p> <ul style="list-style-type: none"> • Able to use appropriate communication to gain the co-operation of individual patients, colleagues and clinicians. • Able to positively influence junior staff within the local clinical pharmacy team to develop and deliver a higher quality of service. 	<p>Influence</p> <ul style="list-style-type: none"> • Able to use appropriately selected communication skills to gain the co-operation of small groups of patients, colleagues, senior clinicians and managers within the organisation. • Able to positively influence staff delivering the local clinical services to increase the MDT's awareness of medicine management issues. • Able to advocate for others. • Proactively influences developments in pharmacy services to meet the needs of patients. 	<p>Influence</p> <ul style="list-style-type: none"> • Able to communicate appropriately to gain cooperation and /or influence large groups of patients, and managers and healthcare professionals outside the organisation. • Able to influence senior clinicians and managers within the organisation in a hostile, antagonistic or highly emotive atmosphere. • Able to engage with external organisations including commissioning groups. • Implements collaborative approach to innovative practice.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 2: Collaborative Working Relationships			
2.1 Communication	<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible)</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere</p>
Recommended knowledge, skills, experience and behaviours	<p>Networking skills</p> <ul style="list-style-type: none"> • Is a member of the relevant national clinical specialty group or other local/national associations that provide an appropriate level of support (if applicable). • Is a fully integrated member of the local MDT. • Attends relevant external/educational meetings. • Able to network effectively. 	<p>Networking skills</p> <ul style="list-style-type: none"> • Is a participating member of the relevant national clinical specialty group. • Participates in local network groups (or equivalent). • Participating member of working groups within the local service. • Attends relevant national/international conferences. 	<p>Networking skills</p> <ul style="list-style-type: none"> • Leads a local network group or equivalent. • Participates in / leads (inter) national rheumatology or pharmacy groups. • Represents rheumatology pharmacy at national Specialised Services Commissioning level e.g. Clinical Reference Group (CRG). • Member of rheumatology executive board or leads one of the sub-groups e.g. UKCPA Rheumatology and Dermatology group • Regularly provides advice via executive board discussion forums. • Able to engage stakeholders to develop and improve services.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 2: Collaborative Working Relationships			
2.1 Communication	<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible)</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere</p>
Recommended knowledge, skills, experience and behaviours	<p>Presentation skills</p> <ul style="list-style-type: none"> • Presents effectively to pharmacy and the MDT. • Communication is always clear, precise and appropriate. 	<p>Presentation skills</p> <ul style="list-style-type: none"> • Presents effectively to senior MDT including consultant level. • Presents effectively at clinical specialty group meetings. 	<p>Presentation skills</p> <ul style="list-style-type: none"> • Presents at senior Trust level, regional and (inter) national fora.
Recommended knowledge, skills, experience and behaviours	<p>Writing skills</p> <ul style="list-style-type: none"> • Demonstrates an understanding of clear, concise, and appropriate writing skills regarding clinic letters, formulary applications, IFRS, shared care guidelines, pathways (including use of Blueteq), reports, patient information, and PGDs. 	<p>Writing skills</p> <ul style="list-style-type: none"> • Is able to write clear, concise, and appropriate clinic letters, formulary applications, IFRS, shared care guidelines, pathways (including use of Blueteq), reports, patient information, and PGDs at a local level. 	<p>Writing skills</p> <ul style="list-style-type: none"> • Is able to write clear, concise, and appropriate clinic letters, formulary applications, IFRS, shared care guidelines, pathways (including use of Blueteq), reports, patient information, and PGDs at a national level.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 2: Collaborative Working Relationships			
2.2 Teamwork and Consultation	<p>Demonstrates ability to work as a member of a team</p> <p>Recognises personal limitations and refers to more appropriate colleague(s) when necessary</p>	<p>Demonstrates ability to work as an acknowledged member of a multidisciplinary team</p> <p>Consulted within the organisation for advice which requires in-depth professional expertise</p>	<p>Works across boundaries to build relationships and share information, plans and resources</p> <p>Sought as an opinion leader both within the organisation and in the external environment</p>
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Able to work effectively as part of clinical specialty team and within the MDT. • Able to explain the roles of the members of the MDT and values other members of the team. • Recognises situations outside of own experience or competence and effectively refers to a more appropriate member of the team. • Demonstrates initiative in own work. • Demonstrates ability to effectively delegate work/tasks to other members of the team and is willing to take on work/tasks delegated by senior staff. 	<ul style="list-style-type: none"> • Demonstrates the ability to work as an acknowledged member of an MDT, and as part of a clinical pharmacy team. • Shares expertise with both pharmacy and clinical specialty colleagues. • Recognition of expertise by the local rheumatology service. • Participates in MDT working groups looking into service development or clinical guidelines development. 	<ul style="list-style-type: none"> • Works across boundaries to build relationships and share information, plans and resources. • Sought as an opinion leader both within the organisation and in the external environment • Shares expertise with the wider community of health and social care professionals working in rheumatology medicine. • Contributes to national guidelines.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 3: Leadership			
3.1 Strategic context	Demonstrates understanding of the needs of stakeholders Practice reflects relevant local and national policy	Demonstrates ability to incorporate relevant national policy to influence local strategy	Demonstrates active participation in creating relevant national policies
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Understands commissioning perspectives. 	<ul style="list-style-type: none"> Able to provide input into commissioning strategies. 	<ul style="list-style-type: none"> Leads design of commissioning strategies.
3.2 Governance	Demonstrates understanding of the pharmacy role in governance Implements this appropriately within the workplace	Influences the governance agenda for the team and/or service	Shapes and contributes to the governance agenda at a higher level
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Awareness of clinical governance and application to clinical practice. 	<ul style="list-style-type: none"> Provides input into clinical governance at a departmental level and ensures appropriate application by others to clinical practice. 	<ul style="list-style-type: none"> Provides clinical governance leadership.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 3: Leadership			
3.3 Vision	Demonstrates understanding of, and contributes to, the workplace vision	Creates vision of future and translates this into clear directions for others	Convinces others to share the vision at a higher level
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Demonstrates an understanding of CRG plans and the specialist rheumatology pharmacist role within this plan. 	<ul style="list-style-type: none"> Able to implement changes in order to put vision into action. 	<ul style="list-style-type: none"> Able to share best practice.
3.4 Innovation	Demonstrates ability to improve quality within limitations of service	Recognises and implements innovation from the external environment	Takes the lead to ensure innovation produces demonstrable improvement
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Able to use services efficiently. 	<ul style="list-style-type: none"> Actively participates in regional/local networking events to share novel ideas and best practice. 	<ul style="list-style-type: none"> Able to lead a quality improvement project.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 3: Leadership			
3.5 Service Development	Reviews last year's progress and develops clear plans to achieve results within priorities set by others	Develops clear understanding of priorities and formulates practical short-term plans in line with workplace strategy	Relates goals and actions to strategic aims of organisation and profession
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Contributes to service development, clinical audit and evaluation of the rheumatology pharmacy service. 	<ul style="list-style-type: none"> Initiates and leads service development, clinical audit and evaluation of the rheumatology pharmacy service. 	<ul style="list-style-type: none"> Demonstrates effectiveness in business case writing and subsequent approval.
3.6 Motivational	Demonstrates ability to motivate self to achieve goals	Demonstrates ability to motivate individuals and/or the team.	Demonstrates ability to motivate individuals and/or teams at a higher level. May include more strategic motivational activities at local, institutional and national levels
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Actively sets personal goals and identifies own training needs following discussion with more senior staff/mentor. 	<ul style="list-style-type: none"> Able to motivate and appraise others within the rheumatology pharmacy team. 	<ul style="list-style-type: none"> Able to motivate and appraise others outside of the rheumatology pharmacy team.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 4: Management			
4.1 Implementing National Priorities	Demonstrates understanding of the implications of national priorities for the team and/or service	Shapes the response of the team and/or service to national priorities	Accountable for the direct delivery of national priorities at a higher level
4.2 Resource Utilisation	Demonstrates understanding of the process for effective resource utilisation	Demonstrates ability to effectively manage resources	Demonstrates ability to reconfigure the use of available resources
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Using shared benefit schemes to support best use of resources (where applicable). 	<ul style="list-style-type: none"> Developing shared benefit schemes within a department to support best use of resources. 	<ul style="list-style-type: none"> Develops and implements benefit schemes in collaboration with commissioners.
4.3 Standards of Practice	Demonstrates understanding of, and conforms to, relevant standards of practice	Demonstrates ability to set and monitor standards of practice at team and/or service level	Accountable for the setting and monitoring of standards at a higher level
Recommended knowledge, skills, experience and behaviours		<ul style="list-style-type: none"> Ensures that protocols are followed by all relevant members of the rheumatology team. 	
4.4 Managing Risk	Demonstrates ability to identify and resolve risk management issues according to policy/protocol	Develops risk management policies/protocols for the team and/or service, including identifying and resolving new risk management issues	Is accountable for developing risk management policies/procedures at a higher level, including identifying and resolving new risk management issues

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 4: Management			
4.5 Managing Performance	Follows professional and organisational policies/procedures relating to performance management Refers appropriately to colleagues for guidance	Is accountable for performance management for a team or group of personnel	Is accountable for performance management at a higher and/or institutional level
4.6 Project Management	Demonstrates understanding of the principles of project management	Demonstrates ability to successfully manage a project at team and/or service level	Demonstrates ability to successfully manage a project at a higher level
4.7 Managing Change	Demonstrates understanding of the principles of change management	Demonstrates ability to manage a process of change for the team and/or service	Demonstrates ability to manage a process of change at a higher level
4.8 Strategic Planning	Demonstrates ability to think 4-12 months ahead within a defined area. Plans the work programme to align with strategy Demonstrates understanding of formal structures	Demonstrates ability to think over a year ahead within a defined area Demonstrates understanding of culture and climate and ability to plan with the whole of the organisation in mind	Thinks long term and sector-wide. Takes the long-term perspective Demonstrates understanding of organisational politics and changes in the external environment
Recommended knowledge, skills, experience and behaviours			<ul style="list-style-type: none"> • Able to deal with shared care issues. • Able to provide business case support. • Working with commissioners to plan strategic direction for medicines management.
4.9 Working across boundaries	Demonstrates ability to extend boundaries of service delivery within the team	Demonstrates ability to extend the boundaries of the service across more than one team	Demonstrates the value of extending service delivery across boundaries in the external environment

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 5: Education, Training, and Development			
5.1 Role Model	Understands and demonstrates the characteristics of a role model to members in the team and/or service	Demonstrates the characteristics of an effective role model at a higher level	Is able to develop effective role model behaviour in others
5.2 Mentorship	Demonstrates understanding of the mentorship process	Demonstrates ability to effectively mentor others within the team and/or service	Demonstrates ability to effectively mentor outside the team and/or service
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Demonstrates evidence of reflection in CPD. 	<ul style="list-style-type: none"> Able to support training of early career pharmacists. 	<ul style="list-style-type: none"> Able to mentor other pharmacists within region specialising in immune-related conditions.
5.3 Conducting Education and Training	Demonstrates ability to conduct teaching and assessment effectively according to a learning plan with supervision from a more experienced colleague	Demonstrates ability to assess the performance and learning needs of others Demonstrates ability to plan a series of effective learning experiences for others	Demonstrates ability to design and manage a course of study, with appropriate use of teaching, assessment and study methods
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Able to provide education to other pharmacy staff and <i>ad hoc</i> education on medicines to other rheumatology HCPs. 	<ul style="list-style-type: none"> Identifies training needs and provides dedicated training sessions for pharmacy staff and other healthcare professionals to facilitate medicines optimisation for people with rheumatic diseases. 	<ul style="list-style-type: none"> Able to develop rolling, frequent education programmes including distance learning. Provides induction courses, BSR training, or specialist registrar training.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 5: Education, Training, and Development			
5.4 Professional Development	Demonstrates self-development through continuous professional development activity	Facilitates the professional development of others	Shapes and contributes to the professional development strategy
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Actively improves understanding of the pharmaceutical care of patients with complex pharmaceutical care issues and those with more complex rheumatic conditions. 	<ul style="list-style-type: none"> Able to support/train others to develop and implement plans for the pharmaceutical care of patients with complex pharmaceutical care issues and those with more complex rheumatic conditions. 	<ul style="list-style-type: none"> Able to lead development and implementation strategies for the professional development of others.
5.5 Links Practice and Education	Participates in the delivery of formal education programmes	Participates in education and training in an external environment	Shapes, contributes to or is accountable for the creation or development of higher education qualification(s)
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Able to participate in the general training of other pharmacists. Able to train undergraduates and postgraduates. 	<ul style="list-style-type: none"> Able to deliver lectures on a specialist area in an external environment e.g. PGDip Clinical Pharmacy. Able to participate in arthritis-related training and education events external to the primary sphere of practice. 	<ul style="list-style-type: none"> Acts as module leader for undergraduate or postgraduate qualification. Part of course development board for undergraduate or postgraduate courses.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 5: Education, Training, and Development			
5.6 Educational Policy	Demonstrates an understanding of current educational policies relevant to working areas of practice	Demonstrates ability to interpret national policy in order to design strategic approaches for local workforce education planning and development	Shapes and contributes to national education and workforce planning and development policy
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Able to reflect on policy and demonstrate implementation within practice. 	<ul style="list-style-type: none"> Able to apply the APF to own practice. 	<ul style="list-style-type: none"> Able to develop a competency framework and to define a standard curriculum for specialist pharmacists.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 6: Research and Evaluation			
6.1 Critical Evaluation	Demonstrates ability to critically evaluate and review literature	Demonstrates application of critical evaluation skills in the context of working practice	Is recognised as undertaking peer review activities within working practice
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Able to describe the main principles of relevant key papers and national documents. • Participates in group meetings to discuss key papers. 	<ul style="list-style-type: none"> • Applies the main principles of key papers, policies, national documents, and local and national guidance to the care of patients with complex co-morbidities and/or complex pharmaceutical needs. 	<ul style="list-style-type: none"> • Leads peer review activities including shaping policy, publication review, departmental review, and ethics committee or educational board participation.
6.2 Identifies Gaps in the Evidence Base	Demonstrates ability to identify where there is a gap in the evidence base to support practice	Demonstrates ability to formulate appropriate and rigorous research questions	Demonstrates ability to design a successful strategy to address research questions
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Able to recognise the limitations of National Guidance and identify evidence gaps. 	<ul style="list-style-type: none"> • Actively involved in identifying research questions and participating in research. 	<ul style="list-style-type: none"> • Actively involved in answering research questions through leading research and audit, and publishing findings. • Able to design methodology to implement solutions to research questions.

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 6: Research and Evaluation			
6.3 Develops and Evaluates Research Protocols	Demonstrates ability to describe the core features of research protocols	Demonstrates ability to design a rigorous protocol to address previously formulated research questions	Demonstrates active involvement in the critical review of research protocols
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Awareness of patients potentially eligible for trial inclusion. Able to incorporate patients into standard clinical review. Provides patient counselling for trial inclusion. 	<ul style="list-style-type: none"> Demonstrates detailed understanding of trial feasibility within protocol design. 	<ul style="list-style-type: none"> Able to act as a Principal Investigator for research protocols.
6.4 Creates Evidence	Demonstrates ability to generate evidence suitable for presentation at local level	Demonstrates ability to generate new evidence suitable for presentation at research symposia	Demonstrates authorship of primary evidence and outcomes in peer reviewed media
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> Able to conduct patient surveys on trial experience, appropriate audit, and local presentation of findings. 	<ul style="list-style-type: none"> Able to define areas of research based on information in research database. 	

Competency/ Developmental descriptors	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
Cluster 6: Research and Evaluation			
6.5 Research Evidence into Working Practice	Demonstrates ability to apply the research evidence base into working practice	Demonstrates ability to apply research and evidence-based practice within the team and/or service	Is able to use research evidence to shape policy/procedure at an organisational and/or national level
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Applies understanding of the importance of clinical audit, research costs, and implications of research costs to clinical practice. • Able to present research at regional meetings. 	<ul style="list-style-type: none"> • Able to assess costs and implements clinical audit and quality improvement into clinical practice. 	<ul style="list-style-type: none"> • Able to develop original novel research including research into dose reductions. • Able to measure impact of service change on cost and share best practice through audit and quality improvement. • Able to conduct systematic reviews and develop guidelines and pathways.
6.6 Supervises Others Undertaking Research	Demonstrates understanding of the principles of research governance	Is able to contribute to research supervision in collaboration with research experts	Is a research project supervisor for postgraduate students
Recommended knowledge, skills, experience and behaviours	<ul style="list-style-type: none"> • Demonstrates an understanding of Good Clinical Practice. 	<ul style="list-style-type: none"> • Is able to liaise with research and development and pharmaceutical companies. • Takes an active role in identifying appropriate patient recruitment numbers. 	<ul style="list-style-type: none"> • Leads pharmacy team education on clinical trials in rheumatology.
6.7 Establishes Research Partnerships	Demonstrates ability to work as a member of the research team	Demonstrates ability to establish new multidisciplinary links to conduct research projects	Demonstrates ability to show leadership within research teams concerning the conduct of specialist research

Curriculum for Rheumatology Pharmacists

- The curriculum is a recommended list of specific requirements for pharmacy care in rheumatology which will act as a guide for practitioners for practice application at Advanced Stage I, Advanced Stage II, and Mastery levels (see descriptions on page 5).

Advanced Stage I

Entry point

Postgraduate Diploma in Clinical Pharmacy and Statement of Completion of General Level Framework (e.g. AfC Band 6/7) or appropriate proof of equivalent qualification and practice.

Description

Whilst working towards Advanced Stage I the aim is for practitioners to develop and deliver competent clinical care with a focus on patients with rheumatological disorders. The individual works towards becoming competent at delivering a clinical pharmacy service to patients with common rheumatological conditions through experience of delivering a service to these patients.

Advanced Stage II

Description

Pharmacists working at Advanced Stage II would be expected to have developed advanced knowledge and skills in order to deliver good quality clinical care to the various groups of patients with rheumatological conditions. They are expected to be an integrated member of the wider multi-professional team and as such works alongside other professionals to achieve the aims of the team, leading where appropriate.

Mastery

Description

Pharmacists who achieved Mastery would display advanced knowledge and skills in order to deliver good quality clinical care to the various groups of patients with rheumatological conditions. They are expected to be an integrated member of the wider multi-professional team and as such works alongside other professionals to achieve the aims of the team, leading where appropriate.

1. Rheumatoid arthritis	Level
1.1. Clinical features	
Understands the signs and symptoms <ul style="list-style-type: none"> • Specific signs and symptoms of RA • Features of synovitis – pain, swelling, stiffness • Pattern of joint disease; acute versus chronic onset • Extra-articular disease 	ASI ASII M M
Able to differentiate between stages of disease progression, including features of early RA versus established clinical signs	ASI
Can describe treatment aims, including achieving remission or low disease activity, and pain management	ASI
Can describe the pathophysiology of the disease process through a basic understanding of immunology and pathology	ASII
Can describe the monitoring parameters and assessments relevant to the disease process <ul style="list-style-type: none"> • DAS28 and its components • Able to perform joint examinations 	ASI M
Can describe investigations to establish cause including: <ul style="list-style-type: none"> • Basic blood tests, immunology and radiology • Understanding of use/benefits of MSK ultrasound 	ASI M
1.2 Drug selection	
Able to list and are familiar with drugs used for management <ul style="list-style-type: none"> • NSAIDs, analgesics, steroids, DMARDs, biologics, small molecules, ULDs, bisphosphonates 	ASI
Able to describe the mechanism of action of each drug	ASI
Can relate mechanism of action to pathophysiology of disease process, including symptom control versus disease modification	ASI
Can describe the pharmacological mechanism of action of these side effects, including PK, PD, half-life and drug target	ASI
Can describe investigational agents being considered in the disease	ASII
Awareness of major contraindications and impact of co-morbidities on prescribing each drug class	ASI
Can describe the pathophysiological and pharmacological reasons for contraindications to using each drug	ASI
Can describe doses, routes and appropriate formulations for each drug and understands the rationale for using different routes/formulations of the same drug	ASI
1.3 Application to patients	
Can identify all drug–patient interactions between patients’ previous and current medical history	ASI
Able to prioritise all drug–patient interactions between patients’ previous and current medical history	ASI
Can suggest suitable actions for all drug–patient interactions between patients’ previous and current medical history	ASI
Can describe the risks and benefits of any actions suggested to both the management of the disease and the co-morbidities	ASI
Can interpret new evidence	ASII
Able to appropriately follow recommended management guidelines (NICE/BSR/EULAR)	ASI
Awareness of appropriate pre-screening of patients by major drug class (DMARDs, biologics)	ASI
Awareness of blood monitoring protocols	ASI
Development of shared care protocols	ASII
Able to develop pathways and guidelines	M
Able to conduct audit and QI	M

Key: **Advanced stage I (ASI)** **Advanced stage II (ASII)** **Mastery (M)**

2. Spondyloarthropathies	Level
2.1. Clinical features	
Understands the signs and symptoms <ul style="list-style-type: none"> Basic understanding of major SpAs including PsA, AS, reactive arthritis Axial versus peripheral disease Inflammatory back pain Extra-articular features – skin, bowel, eye 	ASI M M M
Able to differentiate between stages of disease progression including differential diagnosis of early inflammatory arthritis (see RA)	ASI
Can describe treatment aims including: <ul style="list-style-type: none"> Remission versus low disease activity Pain management Approach to non-articular manifestations 	ASI ASI M
Can describe the pathophysiology of the disease process through a basic understanding of immunology and pathology	ASII
Can describe the monitoring parameters and assessments relevant to the disease process, including disease activity assessments – BASDAI, PASI	ASI
Can describe investigations to establish cause <ul style="list-style-type: none"> Basic blood tests, immunology and radiology Understanding of use/benefits of MSK ultrasound MRI in spinal disease 	ASI M M
2.2 Drug selection	
Able to list and are familiar with drugs used for management <ul style="list-style-type: none"> NSAIDs, analgesics, steroids, DMARDs, biologics, small molecules, ULDs, bisphosphonates 	ASI
Able to describe the mechanism of action of each drug	ASI
Can relate mechanism of action to pathophysiology of disease process, including symptom control versus disease modification	ASI
Can describe the pharmacological mechanism of action of these side effects, including PK, PD, half-life and drug target	ASI
Can describe investigational agents being considered in the disease	ASI
Awareness of major contraindications and impact of co-morbidities on prescribing each drug class	ASI
Can describe the pathophysiological and pharmacological reasons for contraindications to using each drug	ASI
Can describe doses, routes and appropriate formulations for each drug and understands the rationale for using different routes/formulations of the same drug	ASI
2.3 Application to patients	
Can identify all drug–patient interactions between patients’ previous and current medical history	ASI
Able to prioritise all drug–patient interactions between patients’ previous and current medical history	ASI
Can suggest suitable actions for all drug–patient interactions between patients’ previous and current medical history	ASI
Can describe the risks and benefits of any actions suggested to both the management of the disease and the co-morbidities	ASI
Can interpret new evidence	ASII
Able to appropriately follow recommended management guidelines (NICE/BSR/EULAR)	ASI
Awareness of appropriate pre-screening of patients by major drug class	ASI
Awareness of blood monitoring protocols	ASI
Development of shared care protocols	ASII
Able to develop pathways and guidelines	M
Able to conduct audit and QI	M

Key: Advanced stage I (ASI) Advanced stage II (ASII) Mastery (M)

3. Musculoskeletal pain problems and soft tissue rheumatism	Level
3.1. Clinical features	
Understands the signs and symptoms	
<ul style="list-style-type: none"> • Specific signs and symptoms • General awareness of non-inflammatory conditions – fibromyalgia key disease • Impact of pain syndromes on other rheumatic diseases 	ASI
Able to differentiate between stages of disease progression, including awareness of primary and secondary pain syndromes	ASII
Can describe treatment aims, including pain management approaches	ASII
Can describe the monitoring parameters and assessments relevant to the disease process, including an understanding of how pain syndromes can be monitored	M
Can describe investigations to establish cause	
<ul style="list-style-type: none"> • Understanding that pain syndromes are diagnosis of exclusion • Understanding of appropriate level of investigation to reach a diagnosis 	M
3.2 Drug selection	
Able to list and are familiar with drugs used for management	
<ul style="list-style-type: none"> • NSAIDs, analgesics, SSRIs, TCAs, opiates 	ASI
Able to describe the mechanism of action of each drug	ASI
Can relate mechanism of action to pathophysiology of disease process	ASI
Can describe the pharmacological mechanism of action of these side effects	ASI
Can describe investigational agents being considered in the disease	ASI
Awareness of major contraindications and impact of co-morbidities on prescribing each drug class	ASI
Describe the pathophysiological and pharmacological reasons for contraindications to using each drug	ASI
Can describe doses, routes and appropriate formulations for each drug and understands the rationale for using different routes/formulations of the same drug	ASI
3.3 Application to patients	
Can identify all drug–patient interactions between patients’ previous and current medical history, and understands risks of polypharmacy	ASI
Able to prioritise all drug–patient interactions between patients’ previous and current medical history	ASI
Can suggest suitable actions for all drug–patient interactions between patients’ previous and current medical history	ASI
Can describe the risks and benefits of any actions suggested to both the management of the disease and the co-morbidities	ASI
Can interpret new evidence	ASII
Able to appropriately follow recommended management guidelines (NICE/BSR/EULAR)	ASI
Awareness of appropriate pre-screening of patients by major drug class	ASI
Awareness of blood monitoring protocols	ASI
Development of shared care protocols	ASII
Able to develop pathways and guidelines	M
Able to conduct audit and QI	M

Key: **Advanced stage I (ASI)** **Advanced stage II (ASII)** **Mastery (M)**

4. Autoimmune connective tissue diseases	Level
4.1. Clinical features	
Understands the signs and symptoms <ul style="list-style-type: none"> • Specific signs and symptoms of CTDs • Basic knowledge of CTD spectrum – SLE, myositis, systemic sclerosis, Sjögren’s, MCTD, uCTD, vasculitis • Common clinical features – multi-system disease 	ASI
Able to differentiate between stages of disease progression, including inflammation versus damage	M
Can describe treatment aims, including <ul style="list-style-type: none"> • Remission induction versus maintenance therapy • Non-pharmacological management • Co-morbidity management – steroid side effect, CVD, infection risk 	ASII
Can describe the pathophysiology of the disease process, including basic immunology and pathology	M
Can describe the monitoring parameters and assessments relevant to the disease process including appropriate national policies/access to therapies (e.g. BILAG, SLEDAI, BVAS)	M
Can describe basic immunological investigations to establish cause	M
4.2 Drug selection	
Able to list and are familiar with drugs used for management <ul style="list-style-type: none"> • NSAIDs, analgesics, steroids, DMARDs, biologics, small molecules, ULDs, bisphosphonates 	ASI
Able to describe the mechanism of action of each drug	ASI
Can relate mechanism of action to pathophysiology of disease process	ASI
Can describe the pharmacological mechanism of action of these side effects	ASI
Can describe investigational agents being considered in the disease	ASI
Awareness of major contraindications and impact of co-morbidities on prescribing each drug class	ASI
Describe the pathophysiological and pharmacological reasons for contraindications to using each drug	ASI
Can describe doses, routes and appropriate formulations for each drug and understands the rationale for using different routes/formulations of the same drug	ASI
4.3 Application to patients	
Can identify all drug–patient interactions between patients’ previous and current medical history	ASI
Able to prioritise all drug–patient interactions between patients’ previous and current medical history	ASI
Can suggest suitable actions for all drug–patient interactions between patients’ previous and current medical history	ASI
Can describe the risks and benefits of any actions suggested to both the management of the disease and the co-morbidities	ASI
Can interpret new evidence	ASII
Able to appropriately follow recommended management guidelines (NICE/BSR/EULAR), including regional/national prescribing policies outside of NICE (e.g. NHS-E)	M
Awareness of appropriate pre-screening of patients by major drug class	ASI
Awareness of blood monitoring protocols	ASI
Development of shared care protocols	ASII
Able to develop pathways and guidelines	M
Able to conduct audit and QI	M

Key: **Advanced stage I (ASI)** **Advanced stage II (ASII)** **Mastery (M)**

5. Crystal associated arthropathies	Level
5.1. Clinical features	
Understands the signs and symptoms	
<ul style="list-style-type: none"> • Specific signs and symptoms of crystal associated arthropathies • Gout and CPPD • Acute monoarthritis – pain, swelling and stiffness • Differential diagnosis for presentation of acute monoarthritis 	ASI
Able to differentiate between stages of disease progression, including early, recurrent disease versus established and persistent disease	ASII
Can describe factors that might exacerbate disease, including lifestyle and drugs for gout	ASII
Can describe treatment aims	M
Can describe the pathophysiology of the disease process, including basic science of gout and CPPD	M
Can describe the monitoring parameters and assessments relevant to the disease process	ASI
<ul style="list-style-type: none"> • Serum urate monitoring • Frequency of attacks 	ASI
Can describe investigations to establish cause	
<ul style="list-style-type: none"> • Basic blood and radiological investigations • Synovial fluid analysis 	ASI
	M
5.2 Drug selection	
Able to list and are familiar with drugs used for management	ASI
<ul style="list-style-type: none"> • NSAIDs, analgesics, steroids, ULDs 	ASI
Able to describe the mechanism of action of each drug	ASI
Can relate mechanism of action to pathophysiology of disease process	ASI
Can describe the pharmacological mechanism of action of these side effects	ASI
Can describe investigational agents being considered in the disease	ASI
Awareness of major contraindications and impact of co-morbidities on prescribing each drug class	ASI
Describe the pathophysiological and pharmacological reasons for contraindications to using each drug	ASI
Can describe doses, routes and appropriate formulations for each drug and understands the rationale for using different routes/formulations of the same drug	ASI
5.3 Application to patients	
Can identify all drug–patient interactions between patients’ previous and current medical history	ASI
Able to prioritise all drug–patient interactions between patients’ previous and current medical history	ASI
Can suggest suitable actions for all drug–patient interactions between patients’ previous and current medical history	ASI
Can describe the risks and benefits of any actions suggested to both the management of the disease and the co-morbidities	ASI
Can interpret new evidence	ASII
Able to appropriately follow recommended management guidelines (NICE/BSR/EULAR)	ASI
Awareness of appropriate pre-screening of patients by major drug class	ASI
Awareness of blood monitoring protocols	ASI
Development of shared care protocols	ASII
Able to develop pathways and guidelines	M
Able to conduct audit and QI	M

Key: **Advanced stage I (ASI)** **Advanced stage II (ASII)** **Mastery (M)**

6. Osteoarthritis and related conditions	Level
6.1. Clinical features	
Understands the signs and symptoms <ul style="list-style-type: none"> • Non-inflammatory joint pain • Features of OA, including joints involved and demographics 	M
Can describe treatment aims <ul style="list-style-type: none"> • Symptom relief • Involvement of MDT – physio, OT and surgeons 	M
Can describe the basic pathology of the disease process	M
Can describe investigations to establish cause, including radiological assessment and tests to exclude other causes	M
6.2 Drug selection	
Able to list and are familiar with drugs used for management <ul style="list-style-type: none"> • NSAIDs, analgesics, steroids, opiates, TCAs, topical therapy 	ASI
Able to describe the mechanism of action of each drug	ASI
Can relate mechanism of action to pathophysiology of disease process	ASI
Can describe the pharmacological mechanism of action of these side effects	ASI
Can describe investigational agents being considered in the disease	ASI
Awareness of major contraindications and impact of co-morbidities on prescribing each drug class	ASI
Describe the pathophysiological and pharmacological reasons for contraindications to using each drug	ASI
Can describe doses, routes and appropriate formulations for each drug and understands the rationale for using different routes/formulations of the same drug	ASI
6.3 Application to patients	
Can identify all drug–patient interactions between patients’ previous and current medical history	ASI
Able to prioritise all drug–patient interactions between patients’ previous and current medical history	ASI
Can suggest suitable actions for all drug–patient interactions between patients’ previous and current medical history	ASI
Can describe the risks and benefits of any actions suggested to both the management of the disease and the co-morbidities	ASI
Can interpret new evidence	ASI
Able to appropriately follow recommended management guidelines (NICE/BSR/EULAR)	ASI
Awareness of appropriate pre-screening of patients by major drug class	ASI
Awareness of blood monitoring protocols	ASI
Development of shared care protocols	ASII
Able to develop pathways and guidelines	ASI
Able to conduct audit and QI	ASI

Key: **Advanced stage I (ASI)** **Advanced stage II (ASII)** **Mastery (M)**

7. Juvenile idiopathic arthritis	Level
7.1. Clinical features	
Understands the signs and symptoms <ul style="list-style-type: none"> • Specific signs and symptoms of JIA • JIA subtypes and presentation • Inflammatory versus non-inflammatory paediatric joint pain 	ASI ASII M
Able to differentiate between stages of disease progression	ASI
Can describe treatment aims, including achieving remission and low disease activity	ASI
Can describe the basic pathology of the disease process	ASII
Can describe the monitoring parameters and assessments relevant to the disease process	M
Can describe investigations to establish cause, including <ul style="list-style-type: none"> • Basic blood and radiological investigations • Specific reference to paediatric issues (reduced phlebotomy, limited exposure to radiation) 	M
7.2 Drug selection	
Able to list and are familiar with drugs used for management, and can identify specific paediatric requirements (doses, timings etc.) <ul style="list-style-type: none"> • NSAIDs, analgesics, steroids, DMARDs, biologics, small molecules, ULDs, bisphosphonates 	ASI
Able to describe the mechanism of action of each drug	ASI
Can relate mechanism of action to pathophysiology of disease process	ASI
Can describe the pharmacological mechanism of action of these side effects	ASI
Can describe investigational agents being considered in the disease	ASI
Awareness of major contraindications and impact of co-morbidities on prescribing each drug class	ASI
Describe the pathophysiological and pharmacological reasons for contraindications to using each drug	ASI
Can describe doses, routes and appropriate formulations for each drug and understands the rationale for using different routes/formulations of the same drug	ASI
7.3 Application to patients	
Can identify all drug–patient interactions between patients’ previous and current medical history	ASI
Able to prioritise all drug–patient interactions between patients’ previous and current medical history	ASI
Can suggest suitable actions for all drug–patient interactions between patients’ previous and current medical history	ASI
Can describe the risks and benefits of any actions suggested to both the management of the disease and the co-morbidities	ASI
Can interpret new evidence	ASII
Able to appropriately follow recommended management guidelines (NICE/BSR/EULAR)	ASI
Awareness of appropriate pre-screening of patients by major drug class	ASI
Awareness of blood monitoring protocols	ASI
Development of shared care protocols	ASII
Able to develop pathways and guidelines	M
Able to conduct audit and QI	M

Key: **Advanced stage I (ASI)** **Advanced stage II (ASII)** **Mastery (M)**

8. Bone disorders	Level
8.1. Clinical features	
Understands the signs and symptoms <ul style="list-style-type: none"> • Specific signs and symptoms of bone disorders • Focus on osteoporosis – features, presentation and risk factors • Impact of rheumatic diseases on risk of osteoporosis • Awareness of other conditions, including Paget’s disease and osteomalacia 	ASI ASII ASII M
Able to differentiate between stages of disease progression, including primary versus secondary osteoporosis	ASI
Can describe factors that might exacerbate disease, including risk factors for disease	ASI
Can describe treatment aims, including primary versus secondary prevention	ASI
Can describe basic pathology of the disease process	ASII
Can describe the monitoring parameters and assessments relevant to the disease process, including use of DEXA and bone turnover markers	M
Can describe investigations to establish cause, including basic blood and radiological investigations	ASI
8.2 Drug selection	
Able to list and are familiar with drugs used for management <ul style="list-style-type: none"> • Analgesics, bisphosphonates, SERMs, PTHrP, HRT, calcium, vitamin D and monoclonal antibodies (e.g. denosumab) 	ASI
Able to describe the mechanism of action of each drug	ASI
Can relate mechanism of action to pathophysiology of disease process	ASI
Can describe the pharmacological mechanism of action of these side effects	ASI
Can describe investigational agents being considered in the disease	ASI
Awareness of major contraindications and impact of co-morbidities on prescribing each drug class	ASI
Describe the pathophysiological and pharmacological reasons for contraindications to using each drug	ASI
Can describe doses, routes and appropriate formulations for each drug and understands the rationale for using different routes/formulations of the same drug	ASI
8.3 Application to patients	
Can identify all drug–patient interactions between patients’ previous and current medical history	ASI
Able to prioritise all drug–patient interactions between patients’ previous and current medical history	ASI
Can suggest suitable actions for all drug–patient interactions between patients’ previous and current medical history	ASI
Can describe the risks and benefits of any actions suggested to both the management of the disease and the co-morbidities	ASI
Can interpret new evidence	ASII
Able to appropriately follow recommended management guidelines (NICE/BSR/EULAR)	ASI
Awareness of appropriate pre-screening of patients by major drug class	ASI
Awareness of blood monitoring protocols	ASI
Development of shared care protocols	ASII
Able to develop pathways and guidelines	M
Able to conduct audit and QI	M

Key: Advanced stage I (ASI) Advanced stage II (ASII) Mastery (M)

Glossary

Abbreviations

AHP, allied health professional

APF, Advanced Pharmacy Framework

AS, ankylosing spondylitis

BASDAI, Bath Ankylosing Spondylitis Disease Activity Index

BILAG, British Isles Lupus Activity Group

BSR, British Society for Rheumatology

BVAS, The Birmingham Vasculitis Activity Score

CPD, continual professional development

CPPD, calcium pyrophosphate deposition

CTD, connective tissue disease

CVD, cardiovascular disease

DAS28, Disease Activity Score 28

DEXA, dual-energy x-ray absorptiometry

DMARDs, disease-modifying anti-rheumatic drugs;

EULAR, The European League Against Rheumatism

HCP, healthcare professional

HRT, hormone replacement therapy

IFRS, International Financial Reporting Standards

JIA, juvenile idiopathic arthritis

MCA, medicine counter assistant

MCTD, mixed connective tissue disease

MDT, multi-disciplinary team

MRI, magnetic resonance imaging

MSK, musculoskeletal

NHS, National Health Service

NICE, The National Institute for Health and Care Excellence

NSAIDs, non-steroidal anti-inflammatory drugs

OA, osteoarthritis

OT, occupational therapist

PASI, Psoriasis Area Severity Index

PD, pharmacodynamic

PGD, patient group directive

PK, pharmacokinetic

PsA, psoriatic arthritis

PTHrP, parathyroid hormone-related protein

QI, quality improvement

RA, rheumatoid arthritis

RPS, Royal Pharmaceutical Society

SERM, selective estrogen receptor modulators

SLE, systemic lupus erythematosus

SLEDAI, Systemic Lupus Erythematosus Disease Activity Index

SpA, spondyloarthritis

SSRI, selective serotonin re-uptake inhibitors

TCA, triamcinolone acetonide

UCTD, undifferentiated connective tissue disease

UKCPA, The United Kingdom Clinical Pharmacy Association

ULD, urate-lowering drug

Definitions

The following definitions define use of the terms “specialist”, “advanced” and “expert” in Cluster 1: Expert Professional Practice:

Specialist, patient being treated and responding according to rheumatology pathway

Advanced, patient requires modification of pathway or 2nd/3rd-line treatment

Expert, patient requires treatment outside of pathway