

OUR EXPERIENCE OF A CLINICAL AND ACADEMIC HOME PARTNERSHIP

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What is the focus of your Clinical and Academic Home Partnership?

Our Partnership is focussed on non-medical prescribing, which means that Ali has become an Honorary Research Consultant in Non-Medical Prescribing in NHS Lothian and Margot will have an honorary appointment in Non-Medical Prescribing in Queen Margaret University (QMU).

Why did you want to set up a Clinical and Academic Home Partnership?

Margot - We already had a professional relationship but the Clinical Academic Home Framework provided a structure for us to be really clear about how we want to work together and what we want to achieve. It also 'legitimises' the time we spend together.

What are your objectives?

We have identified three joint objectives that bring together education, practice and research relating to non-medical prescribing:

1. Evaluation of online V300 (prescribing) course

- Development of an appropriate tool to measure outcomes
- Work with students and module team to make appropriate modifications and changes based on evaluations.

2. Developing learning resource and support for returning prescribers

- develop CPD to support returners, which will include Royal Pharmaceutical Society

competencies and an agreed consistent process within NHS Lothian that is based on best practice and evidence

3. Evaluation of preparation for Designated Prescribing Practitioner Role

- Review work undertaken and already in place regionally and nationally.
- Develop an appropriate questionnaire and set up focus group

Margot – I also have personal objectives to continue to develop my research and development knowledge and skills and also to develop person-centred leadership within my role to support my strategic objectives and personal growth.

Ali – My personal objective is to engage and support strategic developments in prescribing within NHS Lothian and I have become a member of the Lothian Area Drug and Therapeutics Committee.

How have you gone about putting it into practice?

Margot – we recognised that we needed to block out our protected time and so have 2 days per month, which we have put in our diaries for the next 6 months. Sometimes we meet in person and other times on Teams but we always have a clear idea of what we want to achieve on that day.

What have you achieved so far?

We are currently working on a research study to support the objective relating to returning prescribers and have submitted for ethical approval at QMU.

Margot – this has been my first direct experience of undertaking a research study and I have been able to learn about the research process and governance from Ali. What has been great is that Ali has allowed me to take the lead on this so that I can learn, including from my mistakes!

Ali – I have been able to have really unique access to strategic thinking in the NHS and through attending the Area Drug and Therapeutics Committee I have developed my understanding of wider issues relating to prescribing from the perspectives of pharmacy and medicine. I am still very much in the learning phase and it is great to be at the meetings with Margot. Through this Committee I am now in touch with the Director of Pharmacy and we are discussing ways to develop an assurance system for medicines management that includes nursing students as well as registered practitioners.

What do you see as being the ingredients that makes your Partnership successful?

Margot – there is no ego between us in that we understand why what we are doing is important for patient care, for our organisations, for prescribers as well as for our own development.

Ali – Building trust and communication is key – we benefitted from an existing relationship, but I

think that even with that it is important to allow time to embed the partnership and build that relationship so that you both have really clear ideas about what you both want to get out of it and what each of you have to offer.

What difference does the Clinical and Academic Home Framework make?

Ali – I think we still would have identified the need to evaluate the prescribing course and designated prescribing practitioner role, but the partnership has allowed us space and to make this work a priority. It has given us focus and because we commit the time we are very output driven to make sure we achieve the objectives we have agreed. Having the agreement signed off by our managers means we have the authority to take this time and use it effectively. The agreement document and the discussions we had with others to put it in place was so important and gave us real clarity of purpose.

Margot – I think the Framework has given our existing relationship a different layer and profile around what we are doing and why. We can talk about our partnership confidently with our peers and managers and it has definitely given me a new drive and excitement about my role! I think it is really important to have the honorary titles and to use them as it really demonstrates that we are contributing and supporting the development of non-medical prescribing. I use mine when I attend the Scottish Prescribing Educators Group and feel proud to give them feedback on what we are doing.

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Watch [our video](#) that explores the benefits of our Clinical Academic Partnership.

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