A New Approach to NHS Pre-Registration Pharmacist Recruitment - a pilot study



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1. Introduction

Pre-Registration Pharmacist recruitment takes place across the NHS every September. In Thames Valley, we have a regional approach to recruitment with approximately 200 students applying for 28 places across 5 NHS Trusts. Historically, we have used shortlisting criteria to identify 90 applicants for interview. This has become a very time consuming activity that is done by staff at the Trusts involving up to 10 people shortlisting. Despite a clear shortlisting criteria is also quite a subjective process. In 2016, we decided to pilot a new approach that would standardise our shortlisting process to ensure that it was fair and transparent.

At the same time, another region was looking to develop a two stage process of recruitment using an assessment centre as the first stage. This approach is used in Medicine and other healthcare professions and hence there was experience within our organisation of this method. We decided to move forward with this approach, using the assessment paper provided by our colleagues in the other region.

2. Method

Pre-check

- Checked all applicants for eligibility to apply for a pre-registration pharmacist placement
- All eligible applicants invited to the assessment centre
- 60 minute written assessment covering:-Calculations

Stage 1

- Clinical pharmacy
- Pharmacy practice
- Prioritisation exercise

Stage 2

 Top 90 scoring applicants invited for stage 2 interview - Multiple Mini Interviews (MMIs) used previously in our region

2. Results



Average overall score 69%

Calculations 87%

Clinical pharmacy 43%

Pharmacy Practice 73%

Prioritisation 71%

Figure 2. Overall score of participants at TV assessment Centre (n=51)

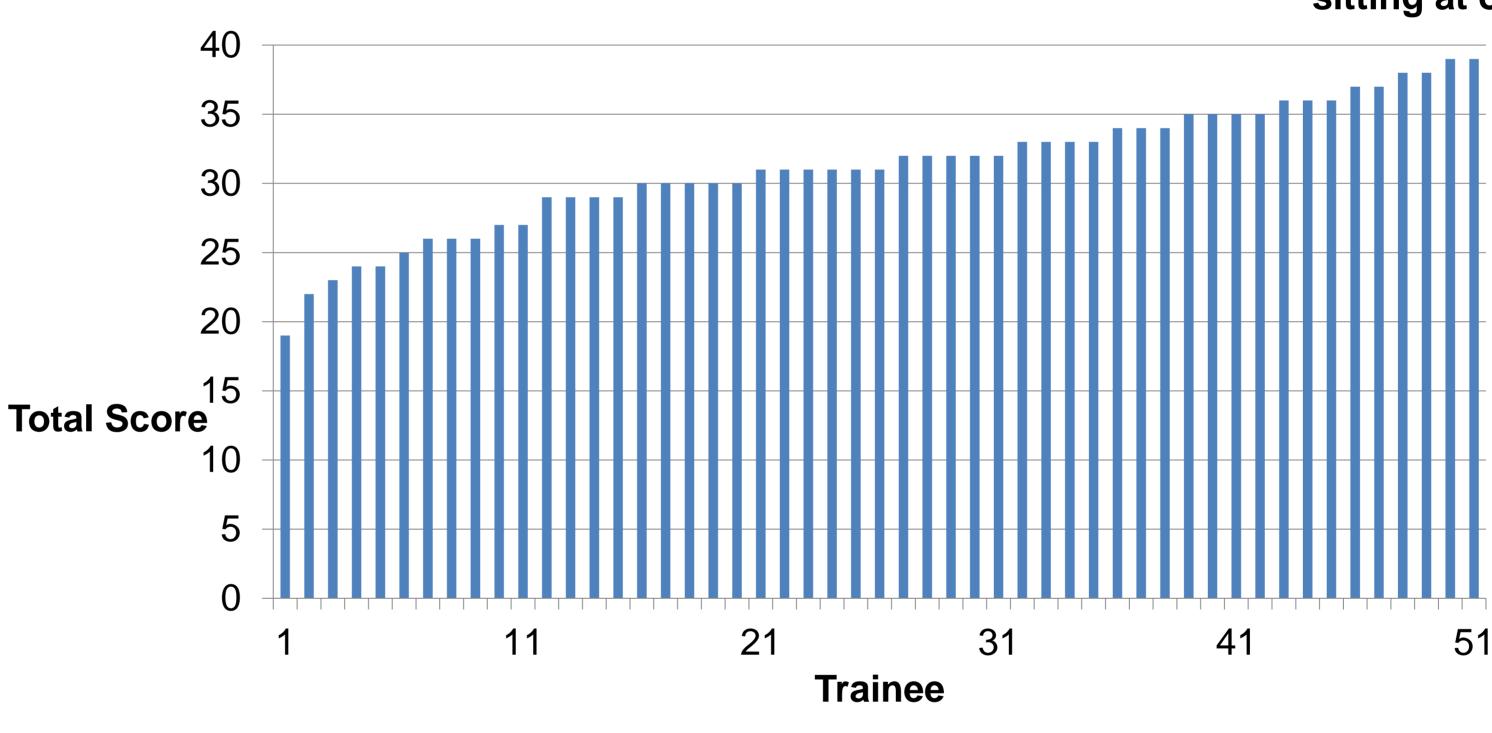
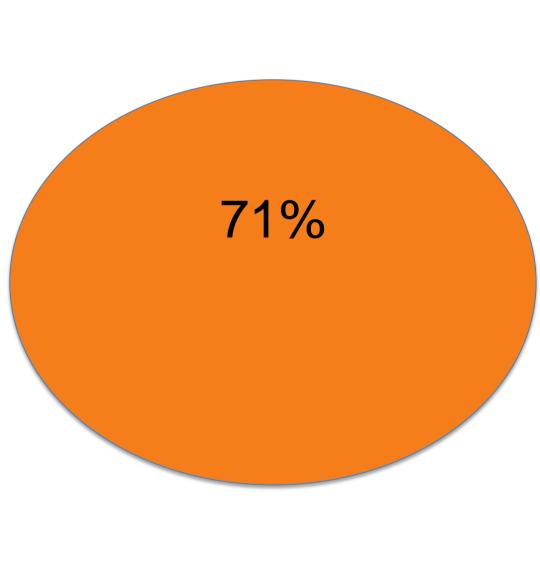


Figure 3. Percentage score needed at assessment centre to reach stage 2 (n=194, this includes results from TV candidates sitting at other assessment centre)



Stage 2 – standard approach of Multiple Mini Interviews (MMIs)

In Thames Valley we have used MMIs at pre-registration pharmacist recruitment for the past few years. In 2016, we interviewed 91 applicants for 28 places using this process and offered places to the top 28 applicants.

Using the scores from the stage 1 assessment paper only 13 of the top 30 applicants were offered a place at one our of Trusts after the stage 2 MMI process.

Sex of applicants passed assessment centre (n=51) 37% Male 63% Female

Sex of applicants offered positions (n=28)
43% Male

77%

Figure 4: Mean percentage score at assessment centre of the applicants offered a post in TV (n=28)

57% Female

4. Discussion

This was the first time that an assessment centre has been used for NHS pre-registration pharmacist recruitment. There were some challenges with the recruitment IT system. However, this workload was much less extensive than the previous approach to shortlisting and could be done by an administrator instead of pharmacy professionals. It is difficult to establish at this stage if the process has enabled us to recruit a higher standard of applicant as they are not due to start until August 2017. The results do suggest that performance at the assessment centre was not a predictor for job offer at the end of the process. This approach did remove an in-depth review of the applicant form in the recruitment process and did not directly take into account prior work experience either within or outside of pharmacy. This may be fairer in an environment where obtaining a pharmacy placement is getting harder to achieve. The balance between assessing academic ability and professionalism/clinical skills was strived for with both the assessment centre and the stage 2 Multiple Mini Interviews. We plan to follow-up with these trainees in our 2017/18 cohort. Also, our Head of School is closely involved with the national Oriel recruitment for 2017 and has fed our findings into this new process.