



Medicines & People

Turning Knowledge Into Know-How

Pharmacy  
Practice  
Research  
Trust

## Annual Review 2009



Registered Charity Number: 1076457



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# About the Trust

## Objectives

The objects of the Pharmacy Practice Research Trust (the "Trust"), are:

- to promote research into the practice of pharmacy in the United Kingdom and to publish the useful results of such research;
- to promote the health of the public by educating pharmacists in order to improve the standard of healthcare available to the public; and
- to advance and promote knowledge and skill in relation to the practice of pharmacy for the public good.

## Aims

The Trust has set about identifying a programme of social and economic research that focuses on the use of medicines and their place in society more generally. Through its *Medicines & People Programme* it aims to:

- Provide opportunities for key stakeholders to develop a shared research agenda;
- Identify researchers with the right skills to address high priority research questions;
- Support the development of researchers with the right skills and leadership potential to take the field forward in the future; and
- Provide a forum in which the implications of the results can be considered in the widest possible policy context.

## Aims for 2009

- Inform the aspirations of the Department of Health's White Paper *Pharmacy In England: Building on strengths – delivering the future*<sup>1</sup>;
- Continue to strengthen and develop existing role in research capacity building; and
- Greater partnership working and exploration of match funding opportunities.

## The Trustees

Mr Steve Churton (ex-officio), Mr Peter Curphey, Mr Anthony Clinch, Mr Marshall Davies (Chair), Professor Brian Edwards, Ms Christina Funnell, Mr Ray Jobling, Lord Newton of Braintree, Professor Clive Smee



Trustees of the Pharmacy Practice Research Trust

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<sup>1</sup> DH Pharmacy in England: Building on strengths – delivering the future. April 2008  
[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_083815](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_083815)

# Chair's Report

This year's Annual Review serves two purposes; firstly, to report on the major activities of 2009 and secondly, to mark the 10th anniversary of the establishment of the Trust in 1999. 2009 has brought some significant achievements and developments for the Trust across the breadth of its activities – both in the context of what we do and, indeed, how.

In this review we have provided some snapshots of our work and achievements over the last 10 years, for example, over this period more than 60 pharmacists have been supported by the Trust to develop their research skills and qualifications. In this review you can read about four such pharmacists working across pharmacy who have benefitted from one of our research awards or training bursaries.

Last year we set a strategic direction for pharmacy practice research, an element of which was to increase partnership and collaborative endeavours; taking pharmacy to a wider audience and creating a new and greater awareness about the profession in the research community. This has resulted in new partnerships with Arthritis Care and the Universities of Stirling, York and Aston.

These partnership models will pave the way for further collaborative opportunities and stimulate a wider community to explore pharmacy.

During the year we repeated an exercise undertaken three years ago; an impact evaluation looking across our objectives and activities such as research capacity building and pump-priming research. 83% of grant holders indicated that the funding they had received from the Trust had contributed to the development of further research/funding in their team/department (17% significantly) showing that the Trust has had some demonstrable success in generating wider financial support for pharmacy research.

The impact of research capacity building and pump priming activities should not be underestimated at a time when research funding across all disciplines is unlikely to be sustained at past levels. Achieving wider impact is addressed in this review by a number of my fellow trustees who report on endeavours in the strategic domains of public benefit, patient and public safety, professionalism and value for money.

This has been a year of change and looking forward to the year ahead the Trust does face some uncertainty and this is reflected in our future plans. Research priority/strategy setting takes a necessary long view and therefore requires resources (including core funding) from the stakeholder community that enables the delivery of a long term vision for the profession. The Trust currently has a limited amount of resources (funds) and providing future funds can be reasonably assured, it intends to continue supporting research pharmacists and pharmacy research into our next decade.

As ever the Trustees would like to thank the busy academics and individuals who support the governance structure of the research and its commissioning, the Leverhulme Trade Charities Trust, the Royal Pharmaceutical Society of Great Britain, the Pharmaceutical Trust for Education and Charitable Objects and the Galen Trust for their financial contribution towards research. Plus, of course, all those individuals for whom we are here to support - as without their drive and commitment our job would be more challenging.



**P. L. Marshall Davies**  
Chair, Pharmacy Practice Research Trust

A more detailed report of the Trust's Activities is available at:  
[http://www.pprt.org.uk/Documents/Home/Annual\\_Report\\_and\\_Accounts\\_0809.pdf](http://www.pprt.org.uk/Documents/Home/Annual_Report_and_Accounts_0809.pdf)



# Impact of Research



## A decade of supporting and developing pharmacy practice research Beth Allen, Acting Trust Director

Since the Trust was established by the RPSGB in 1999, it has invested, through its *Medicines and People Programme*, £2m in research; 30% supporting capacity building in pharmacy practice research and 70% on commissioned research. Research has explored large scale issues of national interest through to smaller projects that inform local practice and provide a platform for further investigation.

In addition to the high quality research that the Trust has commissioned and delivered, it has contributed significantly to the development of individual pharmacists and the practice of pharmacy as well as excellence and transparency in the way it operates. Here we outline 10 key achievements from the last 10 years.

### 1. Contribution to National Policy

*Pharmacy in England: building on strengths – delivering the future* acknowledged the Trust's role in informing key aspects of practice and policy and referred to the findings of the Trust commissioned *Longitudinal Cohort study*<sup>1</sup> providing contemporary insights into the career aspirations, choices and experiences of pharmacy students and newly qualified pharmacists.

A recent article<sup>2</sup> has also highlighted how Trust funded research, namely the *National Evaluation of the Contractual Framework for Pharmacy*<sup>3</sup>, has influenced policy and practice in a number of ways including quantifying the extent of change, identifying support needs and feeding into future plans.

*“... using this work as a proxy for research in general, with careful design and conduct research is a valuable resource for the profession, and that with the right timing and dissemination, immediate benefits are possible”*

Professor Alison Blenkinsopp, Keele University

### 2. Patient and Public Involvement

Research commissioned by the Trust particularly centres around the delivery of services, the professional behaviour and competencies of pharmacists and the impact on patients and the public. Applications are now reviewed with public involvement and a brief lay summary of the research is required to ensure accessibility of the research and its findings.

### 3. Stakeholder Engagement

A range of free events have been organised and hosted over the last five years on topics such as education, workforce, mental health, medicine taking, ethics, public health, prescribing and genomics. These have brought together more than 700 individuals, including key stakeholders from all sectors of pharmacy, primary care organisations, policy makers and leading academics (pharmacy and non-pharmacy).

1 <http://www.pharmacy.manchester.ac.uk/cpws/publications/cohortstudyreports/>

2 Blenkinsopp, A., Bond, C., Celino, G. & Gray, N. Can Research Influence Development? *The Pharmaceutical Journal*. Vol. 282. 4 April 2009.

3 Blenkinsopp, A., Bond, C., Celino, G., Inch, J. & Gray, N. (2007) National evaluation of the new community pharmacy contract. Executive Summary. Pharmacy Practice Research Trust.

# Impact of Research

## 4. Partnership Working

Partnership and collaborative working in research is taking pharmacy to a wider audience and creating new and greater awareness about the profession in the wider research community. This is stimulating others to explore pharmacy and compete for funding from broader sources and the Trust has, and continues, to play its part in this movement.

New collaborative academic partnerships to develop research capacity in pharmacy research have been forged through three successful Economic and Social Research Council Collaborative (CASE) studentship applications. These studentships enable the Trust to explore gaps in knowledge with what is a relatively small financial investment and bring fresh perspectives from the social sciences. Collaborations with other charities, such as Arthritis Care, have also been pursued to ensure that what limited funds are available for pharmacy research are utilised to maximise output, outcome and impact.

## 5. Supporting RPS and Developing Research Leadership and Excellence

We are committed to supporting and developing research leaders in pharmacy. One way towards fulfilling this aim is through sponsorship of the annual Conference Practice Research Award which is designed to recognise and celebrate individuals who have made a significant contribution to pharmacy practice through their research and demonstrate clear potential leadership in their field.

## 6. Research Capacity Building

The Trust's capacity building activity (personal awards and bursaries) aims to develop individuals, often early career academics or pharmacists with a special interest, enabling them to undertake small studies. More than 60 pharmacists have now been supported by the Trust to develop their research skills and obtain qualifications. These individuals have advanced their professional development and enhanced their job satisfaction by delivering improved patient outcomes. This support activity has also gone some way to tackling the potential shortfall in academic pharmacists identified by workforce modelling.



Dr Darren Ashcroft receives his BPC Practice Research Award in recognition of his research into medicines usage, quality and safety.

# Impact of Research

## 7. Research Mentoring

We recognise that becoming actively involved in research can represent a significant challenge to practitioners, from developing a research idea through to making a grant application. To provide support, a one-to-one research e-mentoring scheme has been launched to bring together experienced researchers and academics with novice/ junior pharmacy practice researchers enabling the latter to develop research knowledge relating to their practice.

*My e-mentor has been a source of impartial advice and my research is well underway. I feel that my e-mentoring experience has been valuable and in-line with other mentors I have worked with previously. I hope the relationship can continue”*

Keith Pearson, Lead Prescribing Advisor & Independent Prescriber  
Heywood, Middleton and Rochdale PCT

## 8. Publication and Impact

As for many charities, the research process is incremental, and the road to discovery and application can be long and complex. Therefore, the impact of the Trust's funding is likely to be seen some time after the expenditure – and the direct link to health outcomes may be seen only in generations to come<sup>1</sup>.

Nevertheless, in terms of public benefit, incremental findings underpin further research and provide the foundations for future improvements in health. All completed commissioned research which meets the necessary quality standards has been promoted and published free of charge – over 26 reports in all<sup>2</sup>. Additionally, all researchers disseminate their work through conference presentations, abstracts and academic journals.

## 9. External Funding

Through partnership and collaborative working, steady success in attracting external resources has been achieved. In the last five years an additional c. £900,000 has been secured for pharmacy research (above baseline funding).

## 10. Research Governance

The Trust is now a member of the Association of Medical Research Charities (AMRC), widely regarded as a mark of quality in the world of medical and health research, representing a demonstrable recognition of our work and commitment to maintaining the highest standards of practice and policy. A notable benefit is that the Trust no longer has to contribute to indirect costs when commissioning research, (without disadvantaging the academic institution) meaning that funds available for pharmacy practice research will go further. Creating greater value for the profession and the public it serves is particularly important at a time when research funding across all disciplines is unlikely to be sustained at past levels.

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1 Wellcome Trust Annual Report and Financial Statements 2005

2 <http://www.pprt.org.uk/Publications/2010Publications.aspx>

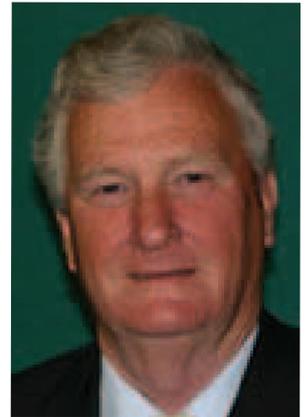
# Achieving Our Objectives

The Trust's nine trustees represent a wide range of knowledge, skills and experience. Here, four trustees describe how the Trust is meeting its high-level objectives that play an integral part in all Trust activities.

## Patient Safety - Brian Edwards, Trustee

Patient safety and pharmacy practice represent one of the Trust's ongoing research priorities with a particular focus on preventing medication errors. Earlier studies directly exploring drug related morbidity and dispensing errors have been instrumental in informing this agenda.

However, studies exploring pharmacists career expectations and job satisfaction have also added depth to our understanding of errors and risk. In 2009 the findings from a number of studies were brought together in a one-day symposium "Workload pressure and the pharmacy workforce; supporting professionals and protecting the public" jointly hosted with the RPSGB under the banner of the RPSGB President's Workplace Pressure Campaign. The Trust brought together a range of stakeholders from academia, pharmacy organisations and employers to present research findings relating to the many factors contributing to workplace pressure which ultimately impinge on patient safety. This evidence contributed significantly to understanding the varied and numerous pressures and stresses being faced by the pharmacy workforce. Following the event, *Turning evidence into action*<sup>1</sup> was jointly published, bringing together the research evidence presented and the key issues the delegates identified for future action to address the pharmacy workforce and workload issues raised.



*"Workload is definitely increasing as illustrated by the rising number of prescriptions, more than 50% in the last 10 years, and the additional work generated by the contractual framework for community pharmacy, for example, Medicines Use Reviews, which have risen from 150,000 undertaken in 2006 to over 1 million in 2008. For many this is resulting in work overload and is leading to stress, dissatisfaction, anxiety and fatigue in a significant number of the profession. An ongoing study which the Trust commissioned has shown that even pharmacists in their registration year are becoming stressed."*

Professor Karen Hassell, Professor of Social Pharmacy, Centre for Workforce Studies,  
University of Manchester  
Joint Trust/RPSGB symposium

Patient Safety was also the focus of the work of the recipient of the 2009 BPC Practice Research Award, Dr Darren Ashcroft, Reader in Medicines Usage and Safety, School of Pharmacy and Pharmaceutical Science at the University of Manchester. Dr Ashcroft received the award in recognition of his work into medicines usage and, in particular, quality and safety. In his Award lecture, Dr Ashcroft said:

*"In practice, medication problems are often not pharmacological but rather the results of failures in the medicines management system to provide the right drug for the right diagnosis to the right patient in the right way."*

The above research meets the Trust's objective of improving understanding of clinical practice and the underpinning services, regulation and governance that can contribute towards improving patient safety.

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1 Turning evidence into action. RPSGB and Pharmacy Practice Research Trust. London 2009  
<http://www.pprt.org.uk/Publications/2009Publications.aspx>

# Achieving Our Objectives



## Patient and Public Benefit - Tina Funnell, Trustee

Following the passing of the Charities Act 2006, all charities must demonstrate, explicitly, that their aims are for public benefit. The Trust has long met this requirement by ensuring that, at all levels, patient and public concern/benefit is at the heart of our strategy, procedures and operations. We have made advances over recent years to strengthen this focus, for example, through increased patient and public involvement in our research from priority setting through to dissemination of findings. Greater efforts have also been made to evaluate the impact of our activities on improving pharmacy interventions for the benefit of the end user, the patient.

Research into the practice of pharmacy and pharmacists as healthcare professionals is a relatively new field and research commissioned by the Trust is particularly centred around the delivery of services as well as the professional behaviour and competencies of pharmacists and the impact on patients and the public. The changes affecting pharmacy and the widening role of the pharmacist, particularly in the community, means they are taking greater professional responsibility for the clinical care of patients and the health and well being of the public. Following the publication of *Pharmacy in England: building on strengths –delivering the future*, the Trust undertook a strategic priority setting exercise which acknowledged the changes to the profession and its relationship with the public. This subsequently influenced the Trustee's more recent commissioning agenda focusing more strongly on patient outcomes of pharmacy interventions – this can be seen in the ongoing project *Evaluating the Pharmacist Provision of Clozapine Services*<sup>1</sup>

Finally, a study still in the commissioning stage, marks another innovation for the Trust; that of a joint partnership with patient representative charity. Working together with Arthritis Care, we are planning to commission research exploring pharmacy's role in medication use amongst adolescents with arthritis.

I hope that this is but one of many collaborations which will contribute to the Trust's aim of benefitting both patients and the public.

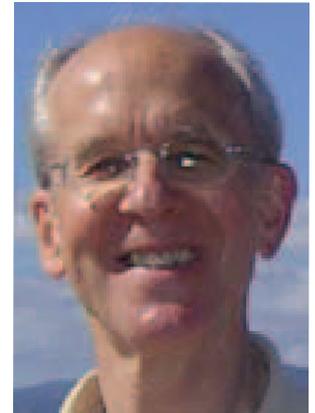
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1 The Clozapine study is comparing patient outcomes and costs when different teams of professionals, including hospital or community pharmacist, nurse, hospital doctor or psychiatrist, are involved in delivering care by studying five different models of clozapine service delivery for people with treatment resistant schizophrenia in a large NHS Trust in Wales.

# Achieving Our Objectives

## Value for Money - Clive Smee, Trustee

One of the aspirations outlined in the Department of Health White Paper *Pharmacy in England: Building on strengths – delivering the future* is that pharmacy should provide evidence in terms of patient outcomes and the economic value of pharmacist intervention. New and additional services are now being delivered by community pharmacists, many as a result of their revised contract, and the Department of Health has reported<sup>1</sup> that studies are beginning to strengthen the evidence base of effectiveness for community pharmacy based services. However, in the current financial climate, evidence of both the clinical and cost-effectiveness of these services will become even more a pre-requisite for commissioners.



The need to provide evidence of the economic value of pharmacist interventions was also identified in the Trust's *Strategic Direction for Pharmacy Practice Research Report*<sup>2</sup> published in April 2009. Considerable research has been undertaken and published, notably in the area of patient safety and medicines management but studies to evaluate the impact of pharmacists' intervention in areas such as long-term conditions have tended to be small scale and of insufficient power to build robust evidence. The report suggested that the evaluation of pharmacist contributions to the management of long terms conditions (LTCs), public health and treatment of minor ailments should be a priority particularly to assess the value they add through medicines management, regular monitoring of conditions and advice on disease management.

Evaluating pharmacist provision of clozapine services is one such study commissioned by the Trust this year. Funding has been agreed for further work to be commissioned in 2010 with a focus on strengthening the evidence base on pharmacist intervention in LTCs, public health and minor ailments. This could be through a series of systematic reviews or further evaluations of different models of delivery of care.

*“Recent Department of Health reports have suggested a greater role for pharmacists in the delivery of health care. Our research, which addresses a chronic mental health problem, will inform decision makers for mental health services and enable them to determine the extent and impact of pharmacists working within different models of clozapine services.”*

Denise Taylor, Senior Teaching Fellow  
Department of Pharmacy and Pharmacology, University of Bath

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1 Anderson, C. Blenkinsopp, A. Armstrong, M. The contribution of community pharmacy to improving the public's health, Literature Review update 2004-7. Management Summary Department of Health, April 2008.

2 Strategic Direction for Pharmacy Practice Research - <http://www.pprt.org.uk/ResearchActivity/StrategicDirectionForPharmacyPracticeResearch.aspx>

# Achieving Our Objectives



## Professionalism - Peter Curphey, Trustee

The face of the pharmacy profession is changing as a result of the significant changes in policy resulting in the establishment of the General Pharmaceutical Council (GPhC) and the Professional Leadership Body (PLB). These changes mean that pharmacists are taking greater professional responsibility for the clinical care of patients and the health and wellbeing of the public.

Professional competence has to be re-defined – pharmacists are no longer the prescriber's backstop but frontline professionals in their own right. In order to nurture professional values and practice in pharmacy and create pharmacy leaders, it is important to understand what aspects of professionalism in practice are valued by pharmacist, patients and the public alike. The Trust's research agenda is addressing this evolving situation through a designated programme of commissioning called

Professionalism in Pharmacy Practice. Three studies have now been commissioned within this programme.

### *Mapping the teaching and assessment of professionalism in pharmacy education.*

The main aim of this study is to understand and clarify how professionalism is learned, cultivated and facilitated in the academic environment.

### *Patient-centred professionalism among newly registered pharmacists.*

The aim of this study is to understand and clarify how professionalism develops in pharmacists' early career years (1-2 years) and to consider the implications of this development for the delivery of quality patient-centred care.

### *Contextualising patient centred professionalism in pharmacy practice: consulting with patients, professionals and stakeholders.*

This study is the first of its type to place current definitions of professionalism in context in a very practical way whilst broadening understanding of patient and professional need and examining expectations about building trust and delivering patient-centred professionalism.

The results of this research programme will inform educationalists (including Medical Education England), the GPhC, and the PLB to help develop standards and competencies early in education and throughout career pathways based directly on patient expectations of professionalism.

# Research Capacity Building

A key objective of the Trust is to increase research capacity and, year on year, we support aspiring researchers through our Research Award and Research Training Bursary schemes -this is developing and increasing the pool of research pharmacists. Here we feature four Trust grant holders across different pharmacy settings: Community, Hospital, Academia and Primary Care who describe what motivated them to undertake research, how it has developed their career and its impact.

## Community Pharmacy

*“Without the Trust I would not have been able, or perhaps even inclined, to undertake the MSc. The award is a wonderful opportunity for every day community pharmacists, like me, to undertake and develop research and other skills; all of which have contributed to my personal development”.*

Karebor Ngwerume is a community pharmacist working in Yorkshire and was granted a Research Training Bursary towards an MSc.



My interest in research started shortly after completing a medicines management diploma with Keele University. A team reflection on practice showed that one way to improve this was to raise the evidence base we relied upon to inform our decisions. I work within the area covered by the Hull and East Riding Pharmacy Research Network whose remit is to increase the research capacity throughout the pharmacy team and to develop research aware practices. A Cochrane Review into the efficacy of cough medicines stimulated the team and I to develop some research into the evidence for the effectiveness of non prescription medicines (NPMs).

My MSc research involved the development and evaluation of an educational intervention that aims to improve the supply of NPMs for four conditions plus the development of a tool which enables practitioners to audit compliance of NICE recommendations on choice and the management of depression. This educational intervention is novel in its approach and its focus is on the whole community pharmacy team, not just pharmacists. The study also involved measuring culture in community pharmacies, using a 14-item Team Climate Inventory, another novel approach.

I'm currently interested in developing summaries of best evidence in useful formats, to assist pharmacists and staff in their practice

My research, I believe, meets the objectives of the Trust as it aims to:

- promote the use of research in practice;
- further knowledge in the supply of NPMs;
- educate pharmacists and medicine counter assistants;
- hopefully, put knowledge into practice for the benefit of the general public; and
- go some way in stimulating the debate about whether the supply of NPMs can ever be evidence based.

# Research Capacity Building



## Hospital Pharmacy

*“The work I am doing promotes pharmacists as researchers by applying their scientific training to determine the clinical effectiveness of medicines in practice and thus contributing to the evidence base for pharmacy as set out in the Pharmacy in England White Paper”.*

Jane Allen is Joint Chief Pharmacist at Queen Victoria Hospital NHS Foundation Trust, East Grinstead and was awarded a Galen Research Award towards a PhD.

I first undertook some research, eight years after qualifying, as part of an MSc in Clinical Pharmacy. This made me aware that research is something pharmacists could do.

My current research was stimulated five years later when working as the pharmacist for my Trust's regional burns centre. I became aware that medicines had altered pharmacokinetics in patients with large burns. With antimicrobials this could lead to underdosing, so increasing the risk of morbidity and mortality. Pharmacokinetics is fundamental to the clinical role of the pharmacist and I considered research into the optimum dosage of antibiotics in patients with major burns was needed.

This research project, which is contributing to a PhD, will result in me making dose recommendations for antibiotics where previously there had been none.

Although the profession contributes to policy on infection management it does not currently have a high research profile. This study will help develop pharmacy within the research field of antibiotic use. I now want to use this experience to develop the research skills of pharmacists and other healthcare professionals, particularly those working in my Trust and in other burns centres in the UK. My own research in pharmacokinetics and in antibiotics will continue.

Without the Galen Award, completing the research and my PhD would have been difficult because of work and family commitments. It made it possible to find the protected time needed and undertaking the research as part of a PhD meant having the support of academic supervisors enabling me to apply my clinical skills in the research field.

# Research Capacity Building

## Academic Pharmacy

*“The Trust aims to support research on medicines use that is for public benefit. My research is directly relevant to pharmacy/pharmacy practice and hopefully will make more than just a contribution to the existing body of literature on medication errors”.*



Tabassum Jafri was awarded a Research Training Bursary in 2003 and a Galen Award in 2006 to undertake a PhD at Cambridge University

My interest in research started as a pharmacy undergraduate working on pharmaceutical formulations. A pre-registration project in industry followed and although having decided to leave industrial pharmacy, I didn't really leave research which continued in some shape or form either through clinical research in hospital or audit in community pharmacy. Later I undertook an MSc in Public Policy, where I conducted a policy focused project in mental health service provision. Although quite different from my research involvement today, an insatiable appetite for research and the challenges of problem-solving developed.

I am currently investigating medication errors in the NHS which follows work by the Design for Patient Safety commissioned by the Department of Health and Design Council. This takes a systems design approach to understand why medication errors arise, what feasible solutions can be undertaken to minimise incidence and evaluation of a systems design approach in healthcare. Particular attention is being paid to the pharmaceutical supply chain and interface of care between primary and secondary care.

I have been working closely with Addenbrooke's Hospital to feedback some results, as well as producing an internal report and running an interactive CPD session, with the aim of improving medication safety at the 'sharp-end'. Close links with pharmaceutical organisations and other pharmacy academics have been maintained over this period.

The Galen Award has:

- directly benefited the quality and credibility of my research and personal development as a researcher;
- allowed me to pursue my interest in pharmacy research with immense support from the Trust that has been a rewarding experience; and
- prepared me for future work with other research/funding bodies and organisations.

I am now completing my PhD in Engineering Design and pursuing mainly post-doctoral and other research positions.

# Research Capacity Building



## Primary Care Organisation

*"Hope the Trust continues to support pharmacists in this manner; it is altruistic and gives the opportunity for individuals to try a different discipline and integrate it into their work. It develops diversity in thinking and application which benefits the profession of pharmacy".*

Sharuna Reddy is Pharmaceutical Advisor/ Organisational Lead for Research and Development, NHS Blackburn and Darwen and was awarded a Research Bursary in 2009 to undertake a Masters in Public Health at Liverpool University.

I have been interested in applied research and public health for some time. Like many busy health professionals it is impossible to undertake practice research unless the job explicitly allows it; protected time is needed to develop critical thinking, reflectivity and research skills. Last year I undertook a secondment in developing primary care research and setting up systems for research governance. This gave me an understanding of research networks and an appreciation of the barriers to participate in research by health professionals due to capacity, capability and lack of long term funding.

The secondment made me more passionate about developing my own practice research skills in addition to encouraging pharmacists and other health professionals to do the same to develop an evaluative culture. My personal interest is in public health and health inequalities; in particular how pharmacy fits into addressing these issues.

Integrating sociological perspectives into my thinking and practice has been a paradigm shift for me, influencing both the type of research and methodology that I want to develop and use. I am currently interested in exploring the interface between pharmacists and patients, particularly in understanding what happens within a Medicines Utilisation Review. Themes from this may help the profession to understand the barriers and facilitators to effective communication and improving health literacy from a patients' perspective and through a sociological framework.

Work permitting, I want to develop mastery in qualitative methodology e.g use ethnography, narratives, participatory research and apply this into my work as a public health and pharmacy practitioner. I am very grateful to the Trust. It has been an amazing opportunity to develop skills in a protected way and without the award I would have struggled to realise my ambitions in undertaking a Masters in Public Health and developing in pharmaceutical public health.

# 2009 Research Activities

## Research Training Bursaries £72,000

Penny Buckingham - Locum Pharmacist, Guernsey. Postgraduate Diploma in Health Research

Elizabeth Bond - Partnership Pharmacist, Conwy, Denbighshire and Flintshire Local Health Board. Masters in Leading, Managing and Partnership Working

Daniel Graham - Pharmacy Manager, Derbyshire. MSc conversion Clinical Pharmacy (Community)

Roselyn Kankondo - Pharmacy Manager and Teacher /Practitioner, Manchester. MSc conversion Clinical Pharmacy (Community)

Sharuna Reddy - Organisational Lead for Research and Development, NHS Blackburn & Darwen. Masters in Public Health

Olufunmilayo Oduniji - Clinical Lecturer in Pharmacy Practice and Locum, Kent. Masters in Public Health

## PPRT Research Awards £64,000

Sir Hugh Linstead Award

Rod Tucker - Community Pharmacist, East Yorkshire

*An investigation into the range of skin problems encountered in community pharmacy and the extent of pharmacist engagement with patients having a skin disease.*

William Horsley - Pharmacist, NHS North of Tyne

*An evaluation of an integrated care pathway for Inflammatory Bowel Disease*

Galen Awards for Research Training

Samir Vohra - Clinical Lecturer in Pharmacy Practice, University of Central Lancashire

Stuart Gill-Banham - Clinical Lecturer, Applied Therapeutics, Medway School of Pharmacy

## Commissioned Research £30,000

*Patient Centred Professionalism among newly registered pharmacists (1-2 years)*

Dr Ellen Schafheutle, Lecturer and Sarah Willis, Research Fellow at the School of Pharmacy and Pharmaceutical Sciences, University of Manchester

## Joint ESRC/ CASE PhD Studentships £18,000

*Personalised medicine and hospital and community based pharmacy: understanding the needs and role of pharmacists in response to innovation*

Kimberly Jamie

Supervisor, Professor Andrew Webster, Department of Sociology, University of York

*Community pharmacists and people with dementia: issues and developments*

Veronica Smith

Supervisor, Professor Alison Bowes, Department of Applied Social Science, University of Stirling

*A mixed methods study of the implications for pharmacy policy and practice of self-tests for signs of serious illness*

Shugaftha Javed

Supervisors, Professor John Marriott, School of Pharmacy and Dr Helen Pattison, School of Life and Health Sciences, Aston University

# 2009 Research Activities

## Publications 2009

### *Living with Medicines for Dementia - Patient/ Carer Perspectives*

Denise Taylor, Senoir Teaching Fellow, University of Bath

<http://www.pprt.org.uk/Documents/Publications/Living%20with%20Medicines%20for%20DementiaI.pdf>

### *Turning evidence into action*

*Workload pressure and the Pharmacy*

*workforce: supporting professionals and protecting the public*

Report and outcomes of the joint Royal Pharmaceutical Society and Pharmacy Practice Research Trust symposium

[http://www.pprt.org.uk/Documents/workplace%20pressures%20FINAL%20\(web\).pdf](http://www.pprt.org.uk/Documents/workplace%20pressures%20FINAL%20(web).pdf)





For further information about the work of the Trust please visit [www.pprrt.org.uk](http://www.pprrt.org.uk) alternatively email: [practiceresearch@rpsgb.org](mailto:practiceresearch@rpsgb.org)

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