Peer discussion

An additional guide for pharmacists and pharmacy technicians

Introduction

This document is for a pharmacist or pharmacy technician seeking additional information about a peer discussion. The information in this document reflects and builds on the guidance provided in the revalidation framework and the two documents should be read together. This document gives you more information about:

- what a peer discussion is and what it is for
- reflecting openly and honestly and maintaining confidentiality
- who can be a peer
- how a peer discussion works
- what you should do to prepare for the discussion
- what you should do during the discussion
- what you should do following the discussion

There is also a link to more guidance about what to do in the very rare circumstance that you feel you have a concern about a pharmacy professional.

In this document we use the following words in this way:

- ‘we’ or ‘us’ means the GPhC
- ‘you’ means a pharmacy professional
- ‘they’ or ‘them’ means a person you have approached to act as a peer

What a peer discussion is and what it is for

A peer discussion is an activity that encourages you to engage with others in reflection on learning and practice. Research shows that having another person’s view can help you to reflect on your practice and can reduce the potential for professional isolation. A peer discussion is also an opportunity to have ideas you can bring back and apply to your practice for the benefit of the people who use your services.

It is important to remember the purpose of the discussion is to help you reflect on your learning and practice. Your role is to be open and honest and respond positively to the questions and prompts provided by your peer.
Reflecting openly and honestly and maintaining confidentiality

If you have selected the right peer you should feel able to speak openly and honestly with them about your practice. But you must also respect patient confidentiality and not pass over information that might identify people or events in your practice. You must also make sure that when you make any of your revalidation records that you do not pass over identifiable information to us.

The peer discussion provides you with a protected space to speak openly and learn from where your practice has been exemplary and from when it could have been better. To make sure you feel comfortable in being open we do not ask for you to record the detail of your discussion. We only ask you to record your reflections on the benefit your peer discussion has had for the people using your services.

How to find a peer

You can seek help in finding an appropriate peer if you cannot think of someone who would be suitable. However, you hold the responsibility for the choice of your peer. No one can allocate you a peer or force you to have a peer you do not want.

We will produce a list of organisations that might be able to support you to find a peer on our website in Autumn of 2018. This will give everyone a year or more to find their peer and have their peer discussion.

Who can be a peer

Almost anyone can be a peer. There are only a few reasons why someone cannot undertake this role. These are that:

- you have too close a personal relationship and either of you feels they cannot be objective
- you or they have a conflict of interest, or a perceived conflict of interest, like a commercial relationship which undermines objectivity
- they are a health professional currently under sanction from a regulator

The important thing is that both you and your peer feel they understand your practice well enough to ask you useful questions to support you to think about how you might improve your practice. This means they might be a pharmacy professional, another health and social care professional or possibly from a completely different background. These are some examples of people who might be effective peers (this not a complete list):
<table>
<thead>
<tr>
<th>Pharmacy professional</th>
<th>Example of a suitable peer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic pharmacist</td>
<td>An academic from a different discipline</td>
</tr>
<tr>
<td>Military pharmacy technician</td>
<td>A military nurse</td>
</tr>
<tr>
<td>Public health pharmacist</td>
<td>Another public health specialist</td>
</tr>
<tr>
<td>Industrial pharmacy technician</td>
<td>A colleague from another scientific background</td>
</tr>
<tr>
<td>A pharmacist working as a senior manager</td>
<td>Another senior manager</td>
</tr>
<tr>
<td>A pharmacy technician in the community setting</td>
<td>An expert patient</td>
</tr>
<tr>
<td>A hospital pharmacy technician</td>
<td>A group of health professionals</td>
</tr>
</tbody>
</table>

**How a peer discussion works**

You will arrange a mutually convenient time for the peer discussion or series of discussions at some point during the year. It is up to you to decide when and how the discussion will benefit you the most.

The peer discussion can be conducted at any time, in person, remotely over the phone or video call, or in a group setting (provided the topic of the group’s conversation is you and your practice and not another issue).

The peer discussion will typically take an hour, although it can be shorter or longer and you may choose to have more than one discussion if you think it will be helpful for you.

You must have consent from your peer to give us some information about them. Your peer must be willing to provide their name, role, organisation and telephone and email contact details to us, because you will record these as part of your revalidation record. We may contact your peer using these details to verify that the peer discussion took place. If we do this, we will only seek to confirm the discussion took place and we will not ask your peer for details of the conversation.

**Preparing for the discussion**

Before the discussion, you may choose to share:

- a professional development plan
- your CPD records or reflective account (both those you plan to undertake or that which you have already completed)
- details of any training or quality improvement activities you are involved in
- any performance and development reviews
• incidents, events or feedback related to your services

If you want to, you can also provide your peer with access to your revalidation records through MyGPhC (Viewer access will be available from Autumn 2018).

You should make note of any suggestions your peer makes during the discussion about possible benefits the conversation could make to your practice.

What happens after the peer discussion has taken place

You will need to write your record of your peer discussion. It might take some time before you are ready to complete it because you might need to apply the learning you have gained in real scenarios.

You are not required to disclose the detail of what you discussed with your peer. You only need to describe what suggestions and changes you decided to implement in your practice as a result of the peer discussion and what the result of these changes have been with real examples.

You should make sure you do not breach patient confidentiality in the use of your examples.

During the discussion

When a you record your peer discussion you provide a response to the following prompt:

Describe how this peer discussion changed your practice for the benefit of your patients or service users.

To help you respond your peer will ask you questions about your practice, offer suggestions for improvement if this is possible and supportively challenge your assumptions. It is important to listen to what they say and be open to the questions and challenges. Try not to answer questions with brief answers and help your peer understand you, your learning and practice.

There are lots of different subjects you might want to talk about over the course of the discussion. You should decide what you want to talk about in advance. But if you need some ideas, we advise both you and your peer to consider:

• the learning you have been doing or intend to do this year, particularly the learning you have applied in practice
• any successes or challenges you have been having this year and how this is impacting on the people who use your services
• incidents, events, complaints, and compliments that you have received this year, paying particular attention to what changes you made to your practice in response to this feedback and the impact on people using your services
• the GPhC’s standards for pharmacy professionals to help identify examples where you feel you have met or exceeded the standards for the benefit of the people using your services.
• quality improvement activities that you have undertaken and how they have benefited the people using your service users.

You might want to make notes of the discussion to help write up your record at a later date. We will not ask for these notes nor expect you to record and submit the detail of your conversation.

**Following the discussion**

We may contact your peer following the discussion to confirm it took place. We will not seek any other details about the conversation from them. It may be almost a year after your discussion that we decide to check that it took place. If your records are selected for review, we will let you know so you might want to let your peer know that we will be making contact.

**If you have a concern about a pharmacy professional**

In some very rare cases, you might have a concern about something that happens during your revalidation or the revalidation of another pharmacy professional. In these circumstances, you should look at our guidance on concerns which is available in the Raising concerns section of our website.