

Case Study

Real South West London

Real Jobs

Real You

South West
London
Integrated
Care System

NHS
South West London



Name:

Luqman Dawud

Job Role:

**Senior Clinical
Pharmacist**

Age:

36

Location:

Surbiton

What were you doing before you worked in the NHS?

I studied pharmacy at university and was then a pharmacist at Boots.

How long have you been working for the NHS?

Five years.

Did you have any worries about finding a good job?

I felt my CV was not strong enough and I wouldn't be considered because I wasn't necessarily offering anything different from what other community pharmacists could. Then at the interview, I realised I knew more clinically than I probably gave myself credit for.

Has working for the NHS changed you?

The NHS is giving me the opportunity and space to develop, and I feel more fulfilled in doing what I'm doing.

What are the positives of working in the NHS?

Probably the opportunity for career progression. I started out in the NHS in Epsom where I was a clinical pharmacist. I completed the training, which is an 18 month pathway with a prescribing course. I finished that and joined Sutton. They gave me the opportunity to be a Senior Technical Pharmacist, which is my current role and I think I've learned a lot in the role.

Would you encourage others to apply for work within the NHS?

I would for several reasons, simply because it's the NHS. I think most people have had contact with it in some way, shape or form. Most people were probably born in a NHS hospital. I think joining the NHS and helping to improve it is a good option. The NHS also gives us quite a bit of autonomy and agency to make decisions as well. I feel I can speak to the practise manager, the partners and clinical directors, and say I think we should do things this way. They listen so you can affect change and see the impact of it. So I definitely think it's worthwhile.

What are you doing in your role now?

We mainly focus on medication reviews. We speak to patients and counsel them on their medication. We conduct reviews on longterm conditions. We are there as a resource for GPs as well to help them with what they should be prescribing. We also conduct audits to see how we're performing, and just generally try to help day-to-day.

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Tell us about your background

'I qualified as a pharmacist in 2012 and worked in community pharmacy because, at the time, this was one of the main sectors to work in other than hospital pharmacy. I worked in Boots for some years but I thought I was losing my clinical knowledge and was looking for other challenges to develop my career. When I was working for Boots, they started an anticoagulation service for people on warfarin. You conduct monitoring, which was more clinical-based. It meant I would see the patients, measure the INR, and was trained to ascertain how much warfarin a patient should take.

Tell us about your training.

I was enrolled onto the CPPE Clinical Pharmacists in Primary care pathway which is an 18 month program that you complete along side working that has various module to equip you with the skills and knowledge to review and manage long term conditions in primary care. After completed this, I was able to complete a non-medical prescriber course which now allows me to sign prescriptions for patients in my chosen field of asthma. This training was all funded by HEE and it has definitely helped to give me the platform to thrive in my role.

What is challenging in your role?

One of the main challenges for me was the mental aspect. To explain, in community pharmacy, I was trained for what is quite an established role. You know what you can and you can't do as things tend to be quite black and white. Whereas becoming a clinical pharmacist means things are very rarely black and white. You need to use your clinical knowledge much more. It's about getting used to that and realising there isn't necessarily a single right option for a situation. Instead it's much more nuanced, talking to the patient, speaking to the clinician, and having the confidence to then make a decision for a course of action.

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Realising that there's not
always necessarily the one
right thing to do”

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