

Competencies for Provision of a Weight Management Service (WMS) using the General Level Framework & Service Specification

This is a comprehensive mapping of the GLF against the enhanced service specification (where this exists) and the use of PGDs where applicable. The mapping interprets the key GLF behaviours for the enhanced service. The HAG competencies are also listed against the relevant behavioural statements of the GLF. Pharmacists should use this mapping to support and identify portfolio entries for CPD.

A quick reference guide showing where the HAG competencies specifically map to the GLF behaviours is also available at www.codeg.org and <http://www.pcc.nhs.uk/200> . This excludes the interpretation of the behaviours against the service specification.

Delivery of Patient Care Cluster	Interpretation for Service ¹	Interpretation for supply of medicines under a PGD ² (i.e. for a level 2 service)*	Link to HAG Competencies for Provision of a WMS ³	Examples of Evidence for a Portfolio
Patient Assessment Uses appropriate questioning to obtain relevant information from the patient	Essential to establish patient eligibility (clinical) and inclusion criteria for the service. Essential to assess: -lifestyle -preference -social circumstances -co morbidities -degree of overweight or obesity -risk from overweight and obesity -previous treatment	1.3 The pharmacist will assess each patient on the basis of the PGD requirements. Essential to establish patient eligibility (clinical) and inclusion criteria for the service (3.9). Elicit a clear and concise clinical picture of the patient's presenting problems. Completion of service proforma as required.	1e) Able to assess a person's readiness to lose weight and willingness to modify behaviour to achieve and maintain the appropriate target	Witness Statement Performance record from informal/formal training role play/OSCE Case Example Critical Incident e.g. where information was later identified that could have been elicited earlier Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format)

	-willingness to change			Completion of CPPE open learning programme and assessment 'Weight Management'
Consultation or referral Pharmaceutical or health problems are appropriately referred	Need for referral may be identified at various points during the patient encounter. The pharmacist should be able to demonstrate they can identify the need to refer from initial questioning, service specification and service proforma.	1.3 The pharmacist will refer to other health and social care providers where appropriate The pharmacist should follow the referral pathways for the service, agreed locally with the PCT (3.9), and use information provided by the PCT about other services (3.8). Need for referral may be identified at various points during the patient encounter. The pharmacist should be able to demonstrate they can identify the need to refer from initial questioning or criteria within the PGD, service specification and service proforma.	1h) Understands how to select the most appropriate treatment and referral pathways to other primary/secondary care specialist services where necessary	Case Example where referral to local services took place List of local services Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format) Completion of CPPE open learning programme and assessment 'Weight Management'
Recording Consultations Documents consultation where appropriate in the patient's records	Records of consultation should be made to ensure continuity of care. The patient should receive a copy of agreed goals and actions.	3.6 The pharmacist must maintain appropriate records. Records should be made using the framework for recording provided by the PCT (3.11) and in the patient's pharmacy record.	2m) Understands and is able to apply the medico-legal aspects of medicine provision in accordance with a patient group direction	Copy of an example of a record (anonymised) Attendance at PCT commissioned workshop covering Level 2 (such as CPPE local solutions format) and successful completion of role play

				assessment Completion of CPPE open learning programme and assessment on 'Patient Group Directions'
Patient consent Satisfactorily obtains patient consent if appropriate	Signature of patient on proforma. Assess barriers to the patient making an informed choice (e.g. language).	3.7 Need for permission of the patient to share relevant information with other healthcare professionals and agencies. Signature of patient on proforma. Assess barriers to the patient making an informed choice (e.g. language). Should consider Fraser Guidelines in assessment for the capacity of a young person to give valid consent. Document any factors taken into account in the patient record.	2m) Understands and is able to apply the medico-legal aspects of medicine provision in accordance with a patient group direction	Service documentation showing consent Case example where consent was problematic Attendance at PCT commissioned workshop covering Level 2 (such as CPPE local solutions format) and successful completion of role play assessment Provides a review of NHS consent guidance Completion of CPPE open learning programme and assessment on 'Patient Group Directions'
Relevant Patient Background Retrieval of ALL relevant and available information	As for patient assessment above, but including written information as well (i.e. PMR info).	1.3 The pharmacist will assess each patient on the basis of the PGD requirements As for patient assessment above, but including written information as well (i.e. PMR info).	1c) Understands the health risks and determinants of eating behaviour and benefits of maintaining a healthy weight, and appreciates why reducing weight can be difficult. 1d) Understands how to determine a person's	Case example Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format) Examples of SOPs developed for use of equipment

			degree of overweight / obesity 6.3) Can use necessary monitoring equipment (e.g. to measure HBA1c, lipids, blood glucose)	Examples of inhouse training of pharmacy team in using equipment
Drug History Documents an accurate and comprehensive drug history when required	Produced from the patient assessment and retrieval of relevant patient background. Allows for medication related factors in obesity and previous treatment to be taken into account.	1.3 The pharmacist will assess each patient on the basis of the PGD requirements This is produced from the patient assessment and retrieval of relevant patient background. Allows for medicines exclusions to be identified.	2m) Understands and is able to apply the medico-legal aspects of medicine provision in accordance with a patient group direction	Case Example Completion of CPPE open learning programme and assessment on 'Patient Group Directions'
Drug – drug interactions Identified, Prioritised and Acted upon		1.3 The pharmacist will assess each patient on the basis of the PGD requirements	2l) Understands the pharmacotherapy for the full range of available medication and appropriate clinical guidance	For all of these behaviours case examples using straight forward supplies and/or examples where an exclusion criteria was identified and the supply not made. CPD examples that update clinical knowledge (e.g. review articles, completion of formal CE programmes)
Drug – patient interactions Identified, Prioritised and Acted upon		(Drug interactions are stated in the PGD and should be identified to establish service exclusions)	2n) Able to demonstrate knowledge of the clinical content of the relevant Patient Group Direction	
Drug – disease interactions Identified, Prioritised and Acted upon				
Ensures appropriate dose Appropriate dose is ensured		1.3 The pharmacist will assess each patient on the basis of the PGD requirements		Attendance at PCT commissioned workshop covering Level 2 (such as CPPE local solutions format) and successful
Selection of dosing regimen Appropriate route, timing of dose is ensured		(Dose of medicines is appropriate for indication and supplied as per the		

Selection of formulation and concentration Appropriate formulation is ensured		PGD. The regimen is provided in the PGD. Advice on dose timing is provided to the patient. The formulation supplied is defined in the PGD)		completion of role play assessment Completion of CPPE open learning programme and assessment on 'Patient Group Directions'
The prescription is legal Legality of prescription is ensured		The supply of the POM against the PGD complies with legal requirements i.e. the PGD is signed by all pharmacists delivering the service in the pharmacy.	2m) Understands and is able to apply the medico-legal aspects of medicine provision in accordance with a patient group direction	
Labelling of the medicine The label on the dispensed medicine includes required information		Prior to supplying the medicine, the product should be labeled as per POM requirements.	2m) Understands and is able to apply the medico-legal aspects of medicine provision in accordance with a patient group direction	A copy of an anonymised label could be used with a case example Attendance at PCT commissioned workshop covering Level 2 (such as CPPE local solutions format) and successful completion of role play assessment Completion of CPPE open learning programme and assessment on 'Patient Group Directions'
The dispensed medicine is labeled appropriately for the patient		Accommodates special requirements (large labels, literacy /language issues).		Case example where special requirement was identified and provided for
Public Health Provides lifestyle advice appropriately	Lifestyle advice is crucial to managing overweight and obesity and is the cornerstone of this service. Intensity of treatment should be based on	2.1 The service aims to support self-care and improve health. 2.3 The pharmacist should provide advice and	1a) Understands the epidemiology of obesity in the UK 1b) Understands the role of diet and physical activity	Copies of leaflets available or given to patients Witness statement Case example

	<p>person's level of risk and potential for health benefits from losing weight.</p>	<p>support alongside treatment or prophylaxis for the condition being managed.</p> <p>This may be provided by the PCT (3.12) or sourced nationally.</p>	<p>in helping to modify overweight / obesity prevalence as a function of age, gender, ethnic origin and social class.</p> <p>1g) Aware of the effectiveness of the range of behavioural support (e.g. cognitive behavioural therapy and motivational techniques) and medication (e.g. NICE and other national guidelines).</p> <p>1j) Able to undertake brief interventions and motivational interviews with the aim of supporting behavioural change.</p> <p>1k) Understands how to deal appropriately with lapses during treatment</p>	<p>CPD example demonstrating update on knowledge in this area</p> <p>Use of PharmacyHealthLink public health resources e.g. Brief Advice Cards⁴</p> <p>Completion of CPPE open learning programme and assessment 'Weight Management'</p> <p>Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format)</p>
<p>Health Needs Takes into account the patient's individual circumstances</p>	<p>Pharmacists need to assess the patient's willingness and confidence to make changes to their lifestyle in order to offer appropriate advice and management. Support should be tailored to the patient's needs and respond to changes over time.</p> <p>Cultural/social background may influence attitudes and beliefs about weight management.</p>	<p>1.3 The pharmacist will provide support and advice to the patient for the condition being treated</p> <p>(Cultural/social background may influence patient choice).</p>	<p>1c) Understands the health risks and determinants of eating behaviour and benefits of maintaining a healthy weight, and appreciates why reducing weight can be difficult.</p> <p>1e) Able to assess a person's readiness to lose weight and willingness to modify behaviour to achieve and maintain the appropriate target</p>	<p>Case Example</p> <p>CPD information on psychosocial aspects of sexual healthcare</p> <p>Completion of CPPE open learning programme and assessment 'Weight Management'</p> <p>Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions</p>

	Repeated unsuccessful attempts at weight loss may need referral		1j) Able to undertake brief interventions and motivational interviews with the aim of supporting behavioural change. 1k) Understands how to deal appropriately with lapses during treatment	format)
Need for information is identified Patient need for information is accurately identified	Obtain and interpret patient's knowledge, understanding, willingness to change and information on previous weight loss attempts, in order to meet their information needs	1.3 The pharmacist will provide support and advice to the patient for the condition being treated Obtain and interpret patient's knowledge and understanding in order to meet their information needs.		Case Example Completion of CPPE open learning programme and assessment 'Weight Management' Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format)
Medicines Information Accurate and appropriate medicines information is communicated		1.3 The pharmacist will provide support and advice to the patient for the condition being treated (Any written or verbal information given about medicines should be communicated in a manner that is suitable for the patient.)	1i) Able to counsel and advise clients appropriately and sensitively through effective communication and relationship building skills	Case Example Attendance at PCT commissioned workshop covering Level 2 (such as CPPE local solutions format) and successful completion of role play assessment
Provision of written information Appropriate information is provided	Written information to support verbal advice should be available and provided in a manner suitable for the patient. Use relevant information	1.3 The pharmacist will provide support and advice to the patient for the condition being treated (Written information to		Copies of leaflets available or given to patients List of useful internet sites passed on to patients

	sources (leaflets, internet etc). Information should enable the patient to make informed choices about their care and condition. The PCT may provide appropriate leaflets.	support verbal advice should be available and provided in a manner suitable for the patient. Use relevant information sources (leaflets, internet etc). Information should enable the patient to make informed choices about their care and condition. The PCT may provide appropriate leaflets (3.13)).		List of local related services Completion of CPPE open learning programme and assessment 'Weight Management' Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format)
Identification of medicines management problems Medicines management problems are identified	The influence of medication on overweight and obesity should be assessed.	Any problem the patient may have in taking the medicine should be identified via the assessment and medication history.	2l) Understands the pharmacotherapy for the full range of available medication and appropriate clinical guidance	Case Example Critical Incident
Prioritisation of medicines management problems Medicines management problems are accurately prioritised	The consultation may identify major and minor issues. The pharmacist should prioritise these.	The consultation may identify major and minor issues. The pharmacist should prioritise these.	2n) Able to demonstrate knowledge of the clinical content of the relevant Patient Group Direction(s)	Case Example
Use of Guidelines Current clinical guidelines are applied as appropriate	Interventions should be based on current guidelines	3.3 The pharmacist must be aware of and operate within local protocols 3.10 Where national guidelines exist for a therapeutic area, these should be taken account of.	1g) Aware of the effectiveness of the range of behavioural support (e.g. cognitive behavioural therapy and motivational techniques) and medication (e.g. NICE and other national guidelines). 2l) Understands the pharmacotherapy for the full range of available medication and	Copy of Guideline (or executive summary) Case example where guidance applied Provides a review of available medication and appropriate clinical guidance (e.g. NICE).

			appropriate clinical guidance (e.g. NICE).	
Resolution of medicines management problems Takes appropriate action to resolve or refer medicines management problems	If appropriate, medication influencing overweight and obesity should be managed.		2l) Understands the pharmacotherapy for the full range of available medication and appropriate clinical guidance 2n) Able to demonstrate knowledge of the clinical content of the relevant Patient Group Direction(s)	Case Example
Record of contributions Appropriate documentation of the intervention is completed	Records of consultation should be made to ensure continuity of care.	3.6 The pharmacy must maintain appropriate records to ensure effective ongoing service delivery and audit. The PCT should provide a framework for recording relevant information (3.11)	2m) Understands and is able to apply the medico-legal aspects of medicine provision in accordance with a patient group direction.	Case Example Service proforma Completion of CPPE open learning programme and assessment on 'Patient Group Directions'
Assessing outcomes of contributions Outcomes of contributions are appropriately assessed	Pharmacists will need to assess their contribution in order to tailor the level of support to the patient's needs and respond to changes over time.	Data is submitted as requested by the PCT for evaluation in line with suggested service quality indicators (4.1-4.6)		Copy of information on service provision e.g. audits, patient satisfaction survey
		Interpretation for supply of medicines under a PGD (i.e. for a level 2 service)		
Personal Competency Cluster	Interpretation for Service¹	Interpretation for supply of medicines under a PGD² (i.e. for a level 2 service)*	Link to HAG Competencies for Provision of a WMS³	Examples of Evidence for a Portfolio

Efficiency Uses time efficiently	Allow enough time in the consultation to provide information and answer questions.	Able to meet the service waiting time; provides the service in a timely way.		Service audit
Communication with (client/carer and health professionals and PCO) Communication is clear, precise and appropriate	Effective communication during the consultation is required in order to: -assess the person's view of the diagnosis and why they have gained weight -ask about their diet and activity levels, and beliefs about eating, activity and weight -Find out what they have already tried and what they have learnt from this -assess readiness to make changes and confidence in making changes -give people information on any tests -deliver behavioral interventions	3.2 The pharmacist must have sensitive, client-centred communication skills. 3.7 The pharmacist may need to share relevant information with other healthcare professionals and agencies.	1i) Able to counsel and advise clients appropriately and sensitively through effective communication and relationship building skills. 1j) Able to undertake brief interventions and motivational interviews with the aim of supporting behavioural change. 1k) Understands how to deal appropriately with lapses during treatment	Witness statements Case example where communication was difficult Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format) Attendance at PCT commissioned workshop covering Level 2 (such as CPPE local solutions format)and successful completion of role play assessment
Multi-disciplinary Team Recognises the value of other health professionals and uses appropriate channels for referral	Pharmacists need to know the roles of other health professionals and service providers in weight management to ensure referral is correctly applied.	3.7 The pharmacist may need to share relevant information with other healthcare professionals and agencies. 1.3 The pharmacist will refer to other health and social care providers where appropriate Pharmacists need to know the roles of other health professionals and service providers to ensure	1f) Appreciates the value of skill mix in delivering a pharmacy based WMS	Local Referral Pathways/services Case example where referral was made Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format) Attendance at PCT commissioned workshop

		referral is correctly applied.		covering Level 2 (such as CPPE local solutions format) and successful completion of role play assessment Completed CPPE e-learning on skills mix (available from June 2010)
Confidentiality Maintains confidentiality		3.7 Data may need to be shared, in line with local and national confidentiality and data protection arrangements.	2m) Understands and is able to apply the medico-legal aspects of medicine provision in accordance with a patient group direction	Premises accreditation record Critical Incident Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format) Attendance at PCT commissioned workshop covering Level 2 (such as CPPE local solutions format) and successful completion of role play assessment Completion of CPPE open learning programme and assessment on 'Patient Group Directions'
Recognition of Limitation Recognises limitations	As for referral	3.5 Pharmacists must act within their competence.	1h) Understands how to select the most appropriate treatment and referral pathways to other primary/secondary care	Example of when advice was sought from a colleague Example of CPD where

			specialist services where necessary	performance gap identified Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format) Attendance at PCT commissioned workshop covering Level 2 (such as CPPE local solutions format) and successful completion of role play assessment
Quality and Accuracy of documentation Legally required info is documented	Completion of service documentation, recording of information on the PMR and recording of information for the patient.	3.6 The pharmacist must maintain appropriate records to ensure effective ongoing service delivery and audit. Records should be made using the framework for recording provided by the PCT (3.11)	2m) Understands and is able to apply the medico-legal aspects of medicine provision in accordance with a patient group direction	Copy of a sample proforma Completion of CPPE open learning programme and assessment on 'Patient Group Directions'
Legislation	Data protection	3.5 The pharmacist must sign and retain a copy of the PGD. There may be laws relating to the specific client group e.g children; Data protection.	2m) Understands and is able to apply the medico-legal aspects of medicine provision in accordance with a patient group direction	Critical Incident Completion of CPPE open learning programme and assessment on 'Patient Group Directions'
Confidence Inspires Confidence	The results of the annual patient survey will provide an indication of patient confidence			Results of annual patient survey

Responsibility for patient care Takes responsibility for patient care	Duty of care to counsel/refer clients.	Duty of care to counsel/refer clients.		Critical Incident Case Example
CPD	The service should be delivered by and appropriately trained professional	3.4 The pharmacist must undertake any local training that the PCT may require them to.		CPD record (i.e. plan and record entry relating to EHC)
Problem Solving Cluster	Interpretation for Service¹	Interpretation for supply of medicines under a PGD² (i.e. for a level 2 service)*	Link to HAG Competencies for Provision of a WMS³	Examples of Evidence for a Portfolio
Accesses Information Able to access information from appropriate information sources	These may be clinical information about the patient or information about other services. The information provides the basis for completing the client assessment	These may be clinical information about the patient or information about other services. The information provides the basis for completing the client assessment and supply of the medicine.	1a) Understands the epidemiology of obesity in the UK. 1g) Aware of the effectiveness of the range of behavioural support (e.g. cognitive behavioural therapy and motivational techniques) and medication (e.g. NICE and other national guidelines).	Case Example Critical incident (e.g. out of date)
Up to date information Keeps information needed on a day to day basis up to date	Pharmacists should ensure they have access to the current version of any details for referral, guidelines, intervention advice etc.	Pharmacists should ensure they have access to the current version of any details for referral, guidelines, intervention advice etc.	6.3) Can use the necessary monitoring equipment (e.g. to measure HbA1c, lipids, blood glucose) and understands the benefits and limitations of these measurements.	CPD record

Pathophysiology Knowledge of pathophysiology		3.2 The pharmacist must have adequate knowledge of the medical condition for which the medicines are being supplied and/or administered.	2l) Understands the pharmacotherapy for the full range of available medication and appropriate clinical guidance (e.g. NICE).	CPD record
Pharmacology Able to discuss how drugs work		The pharmacist will require underpinning knowledge of the condition and its treatment.	2n) Able to demonstrate knowledge of the clinical content of the relevant Patient Group Direction(s).	CPD record
Side effects Able to describe the major side effects of drugs				Completion of underpinning knowledge course (e.g. CPPE)
Evaluates information Able to evaluate information gathered	The pharmacist will need to evaluate the information gathered from the patient and from any physical assessment and other tests in order to determine the appropriate action.		1e) Able to assess a person's readiness to lose weight and willingness to modify behaviour to achieve and maintain the appropriate target 1h) Understands how to select the most appropriate treatment and referral pathways to other primary/secondary care specialist services where necessary	Case example Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format) Attendance at PCT commissioned workshop covering Level 2 (such as CPPE local solutions format) and successful completion of role play assessment
Problem identification Able to identify problems	This could be related to the patient's initial willingness to change, or their response over time		1k) Understands how to deal appropriately with lapses during treatment	Case example
Ensures resolution of problem	Resolution in this context is about dealing appropriately with the problem. Full resolution may not be possible			Case example

Management and Organisation Cluster	Interpretation for Service¹	Interpretation for supply of medicines under a PGD² (i.e. for a level 2 service)*	Link to HAG Competencies for Provision of a WMS³	Examples of Evidence for a Portfolio
Standard Operating Procedures Uses relevant and up to date procedures for practice	Pharmacist will need to have SOPs in place for the service	3.3 The pharmacist must be aware of and operate within local protocols Pharmacists will need to show they can apply the service to the specification and have SOPs in place for the service	2m) Understands and is able to apply the medico-legal aspects of medicine provision in accordance with a patient group direction	Examples of SOPs used for the service Completion of CPPE open learning programme and assessment on 'Patient Group Directions'
Working environment Implements legal and professional requirements for working environment	The part of the pharmacy used for provision of the service must provide a sufficient level of privacy and safety	3.1 The part of the pharmacy used for the provision of the service provides a sufficient level of privacy and safety and meets other locally agreed criteria.		Premises accreditation record
Risk management Documents critical incidents and forwards to appropriate organisations	Recording of critical incidents relating to delivery of the service	Recording of critical incidents relating to supply of medication.		Completed critical incident documentation
Service Quality Looks to improve the quality of the service offered	Audit	4. Suggested quality indicators (Quality measures met as detailed in the service specification. Participation in new developments as advised by the PCT)		Service Audit
Service Reimbursement Uses relevant reference sources to ensure	Pharmacists will follow the reimbursement process as detailed in the service	Pharmacists will follow the reimbursement process as detailed in the service		Completion of service reimbursement proforma

appropriate and accurate reimbursement	specification	specification		
Prescribing budgets Interprets how prescribing affects prescribing budgets		2.2 Provide medicines at NHS expense for those exempt from prescription charge.		
Linked Organisation Can describe the key organisations that affect service delivery	Linked organisations for referral and support	Linked organisations for referral and support		Local Referral Pathways/services Attendance at PCT commissioned workshop covering Level 1 (such as CPPE local solutions format) Attendance at PCT commissioned workshop covering Level 2 (such as CPPE local solutions format) and successful completion of role play assessment
Staff Training Ensures staff are competent to undertake the tasks allocated to them.	Staff involved in the provision of the service must have relevant knowledge and be appropriately trained in the provision of the service.	3.2 The pharmacy contractor has a duty to ensure pharmacists involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service. Training of counter staff on the service and their roles in delivering it		Example of training information provided Witness statement of staff observation SOP describing staff roles Review of own and staff competence against roles
Pharmaceutical procurement Describes how pharmaceuticals can be	Knows how to source resources for tests to be undertaken and any other equipment required.			Copy of SOP Critical Incident

sources and sources them in a timely manner				
Supply problems Supply problems are resolved promptly	Pharmacists need to be aware of how to access alternative sources of the tests and other equipment in the case of supply difficulties.	2.2 Make medicines available via PGDs where there would otherwise be problems in accessing the medicines easily or promptly. (Stock levels of the medicine need to be maintained to ensure service continuity)		Critical incident with stock
Stock management Ensures stock is managed	Stock levels of tests and other equipment required for patient assessment need to be maintained to ensure service continuity.	2.2 Make medicines available via PGDs where there would otherwise be problems in accessing the medicines easily or promptly.		Copy of SOP Critical Incident

¹ National Institute for Health and Clinical Excellence. Clinical Guidance 43. Obesity. Guidance on the prevention, identification, assessment and management of overweight and obesity in adults and children. NICE, December 2006. Available at <http://guidance.nice.org.uk/CG43>

² EN13. NHS Community Pharmacy Contractual Framework Enhanced Service – Patient Group Directions (PGD) (Supply and/or Administration of Medicines under a PGD) December 2007

³ Harmonisation of Accreditation Group (HAG) “Competencies and Training Framework: Provision of a Weight Management Service (WMS) [with or without supply of POMs under PGD]” Version 1 February 2009

* The HAG Competencies and Training Framework encompasses two levels of service: Level 1 (provision of an WMS without the supply of POMs) and Level 2 (where the WMS utilises patient group directions for the supply of POMs). Core competencies are defined for a Level 1 service (described in this document as 1a – 1k etc). Additional competencies are described for provision of a Level 2 service (described in this document as 2l – 2m etc).

⁴ Available at <http://www.pharmacymeetspublichealth.org.uk/publichealthresources.html>