

Section 3 – The outcomes framework

The curriculum is structured around **12** core capabilities that define the key clinical and professional components of enhanced pharmacist practice. Each capability integrates a set of outcomes describing the knowledge, skills, and behaviours expected of an entry-level enhanced pharmacist.

Each outcome is supported by a series of indicators, which outline the expected level and scope of performance required to demonstrate the outcome. Learners are not required to provide evidence for every individual indicator; however, their evidence should collectively reflect the full breadth and depth of the outcome. The indicators are illustrative rather than exhaustive, and alternative forms of evidence may be used where appropriate to demonstrate achievement.

The capabilities and their associated outcomes are organised into five overarching domains. These domains align with all RCPHarm post-registration curricula, supporting a continuous development pathway from enhanced to advanced and consultant-level practice.

3.1. Capabilities, outcomes and indicators

Domain 1: Person-centred care and collaboration

An enhanced pharmacist:

C1: Communicates information effectively and with confidence, tailoring approach to meet people’s needs

C2: Takes a holistic, inclusive and person-centred approach to consultations

C3: Collaborates with and supports the wider pharmacy and health and social care team to promote safe and effective care

To demonstrate **entry-level enhanced practice** in this domain, pharmacists must provide **evidence from real-life practice** demonstrating the following **six** outcomes:

Outcome	Indicators of expected level of performance
1.1 Communicates effectively with people receiving care, their carers or advocates, and colleagues	a) Communicates information including about medicines and their use with confidence to people receiving care, their carers or advocates and other healthcare professionals to support safe and effective care. b) Considers the advantages and limitations of different formats of communication for different purposes. Tailors their communication approach to the needs of the recipient(s) using both face-to-face and remote methods (e.g. speech and hearing problems, and different languages, cultures and levels of health and IT literacy). c) Tailors the style, amount, frequency, and content of information to the person to support informed shared decision making relating to the safe and effective use of medicines. d) Enhances health literacy in people from a range of backgrounds by providing tailored information, signposting to relevant information sources, and checking understanding as appropriate. e) Manages challenging communication situations where it is difficult to communicate effectively (e.g. noisy or distressing environments, when using PPE, language barriers, situations involving conflict or with people who are anxious, angry or confused).
1.2 Demonstrates effective consultation skills, exploring the physical, psychosocial	a) Uses a consultation style and structure, informed by recognised consultation models and frameworks, that can be adapted to the person’s needs, and that explores the person’s lifestyle, ideas, concerns, expectations and feelings. b) Uses a range of question types and active listening skills, including recognising and responding to verbal and nonverbal cues, to engage people, ensure they feel valued, and gather information effectively to support shared decision making.

	and medication history for that person, remaining open to what a person might share	<p>c) Explores relevant physical, psychosocial and medicines history, and responds appropriately.</p> <p>d) Explores the person's/carer's/advocate's understanding of the consultation and checks they are satisfied with what has been agreed/recommended and addresses any concerns raised.</p> <p>e) Manages the expectations of the patient and/or advocate that a prescription is always required and encourages self-care where appropriate.</p> <p>f) Recognises and manages the challenges associated with gaining information via patient representatives when patients cannot represent themselves.</p> <p>g) Recognises and manages the physical and psychological impact of any health concern(s), and prescribing decisions on the person and, where applicable, their carers or advocates.</p>
1.3	Adopts a holistic and inclusive approach in consultations and shared decision-making to optimise the safe and effective use of medicines and patient care	<p>a) Respects people's ideas, feelings and beliefs (including religious, cultural and ethical beliefs) without judgement, understanding the impact these may have on shared decision making and prescribing.</p> <p>b) Listens to the person/carer/advocate to help build a rapport with them. Works in partnership with them to negotiate and agree a mutually acceptable personalised management plan that respects their values, beliefs, culture, ethnicity, preferences, health literacy and lived experiences.</p> <p>c) Develops a management plan with the person and/or carer(s) that clearly outlines the anticipated benefits and risks, along with defined monitoring parameters, including appropriate frequency and timescales.</p> <p>d) Reviews and adapts the management plan in response to ongoing monitoring, changes in the person's condition, and their preferences. Checks the person's/carer's understanding and that they are satisfied with the management plan.</p> <p>e) Uses patient decision aids, where appropriate, to support shared decision making and ensures people/carers/advocates have appropriate information about their medicines and management plan</p> <p>f) Respects decisions made by a person with capacity about their medicines, health and care. Where unsure about a person's capacity to be involved in shared decision making, seeks advice from other healthcare professionals and follows best practice in applying relevant legislation and/or local procedures</p> <p>g) Reviews all medicines, considering ongoing need for medicines, response to treatment, medication adherence, evidence-based prescribing, adverse effects, cost-effectiveness and up to date information about medicines (e.g. availability, pack sizes, storage conditions, excipients, costs). Also considers wider determinants of health e.g. social care, domestic situation and environmental factors.</p> <p>h) Considers and discusses the environmental impact of prescribing recommendations and reaches a shared decision with the person (e.g. the carbon footprint of inhalers or the likelihood of a medicine being used as intended).</p> <p>i) Takes steps to address health inequalities within sphere of influence, considering the impact of local demographics, ethnic and cultural diversity when tailoring person-centred care.</p> <p>j) Makes prescribing and/or deprescribing decisions informed by the clinical needs, goals and values of the person.</p>

		k) Reflects on how own biases, values, attitudes and ethics might influence professional behaviours and approach.
1.4	Supports and facilitates continuity of care for each person, including by making prescribing decisions	a) Provides continuity of care, including through making prescribing decisions, and/or by taking other appropriate action.
		b) Considers the person's health concerns, social situation, and potential emerging issues.
		c) Uses a structured approach to document accurate, legible and contemporaneous clinical records; uses NHS-assured digital systems for transferring information securely.
		d) Agrees appropriate monitoring and follow-up arrangements with the person/carer/advocate and/or health and social care colleagues to support the safe and effective use of medicines, trying to always promote patient autonomy.
		e) Ensures the person/carer/advocate knows what to do if they have any concerns about the management of their condition e.g. if their condition deteriorates, if they experience adverse effects from treatment, or if there is no improvement within an agreed timeframe
		f) Supports prompt, accurate and complete information sharing and collaboration with the relevant health and social care teams to ensure an effective transition between healthcare professionals and care settings.
1.5	Supports members of the healthcare team in the safe and effective use of medicines to meet the individual needs of those receiving care	a) Provides advice to other healthcare professionals, both within and outside of the immediate pharmacy team, to support the safe and effective use of medicines.
		b) Adapts practice and approach to work effectively, sensitively, and respectfully with other healthcare professionals.
		c) Anticipates and identifies issues that may arise with people or medicine supply. Proactively collaborates with others across the wider healthcare system to resolve and ensure seamless patient care, including appropriately managing medicines shortages or formulation changes.
1.6	Positively influences patient care by building strong working relationships with other professionals across the care pathway, both within the pharmacy team and across other health and social care professions	a) Actively seeks and/or responds to opportunities to collaborate with others across the care pathway to ensure consistency in the safe and effective use and prescribing of medicines.
		b) Uses professional knowledge to negotiate with, and influence, others in the health and social care team, working in partnership to ensure safe and effective prescribing and patient care.
		c) Respects, and is receptive to, the views and advice of other pharmacy and health and social care professionals, working collaboratively and recognising and valuing diversity within the pharmacy and wider health and social team.
		d) Reflects on positive and challenging aspects of collaborating with others; acts on this reflection to enhance future collaborative approach.

Domain 2: Professional practice

An enhanced pharmacist:

C4: Competently and confidently applies clinical knowledge and skills in practice

C5: Critically evaluates relevant information to inform decision making, managing uncertainty and risk appropriately

C6: Practises professionally within limits of own competence and scope of practice, referring or signposting appropriately

To demonstrate **entry-level enhanced practice** in this domain, pharmacists must provide **evidence from real-life practice** demonstrating the following **six** outcomes:

Outcome	Indicators of expected level of performance
2.1 Competently and confidently uses clinical judgment to make evidence-informed decisions that support safe prescribing and the delivery of care to individuals	a) Applies clinical knowledge and skills to identify, prioritise and optimise pharmacological and nonpharmacological management.
	b) Demonstrates critical thinking by analysing and applying information from multiple sources including the evidence base, local/regional/national guidelines, policies, and formularies.
	c) Tailors approach to account for the condition(s) being treated in terms of natural progression, severity, deterioration, and anticipated response to treatment.
	d) Considers relevant patient factors (e.g. age, pregnancy, breastfeeding, co-morbidities, ability to swallow, religion, ethnicity, social support) and the potential impact on the choice, route of administration, formulation of medicines and adherence.
	e) Considers the application of innovative healthcare technologies including genomic medicine, artificial intelligence, and advanced therapeutic medicinal products to promote the effective use of medicines and to improve patient care.
	f) Engages in self-reflection to evaluate approaches to developing professional confidence.
2.2 Undertakes and/or requests relevant examinations and investigations;	a) Demonstrates clinical reasoning by gathering focused information from clinical examinations and investigations relevant to the person's care and according to the presenting situation.
	b) Accesses and interprets all available and relevant patient records to understand the person's management to date.
	c) Understands the significance of clinical findings and results and acts on these as appropriate and in a timely manner.

	interprets findings to support clinical decision making, i.e. assessment, diagnosis, monitoring and management	<p>d) Applies clinical decision-making tools appropriately e.g. algorithms and risk calculators.</p> <p>e) Formulates appropriate differential diagnoses and applies clinical judgement to arrive at or confirm a working diagnosis, where appropriate.</p> <p>f) Undertakes appropriate physical and/or clinical assessments to inform medicines optimisation, clinical decision-making, and safe patient management within scope of practice.</p>
2.3	Critically evaluates information and clinical guidance to make safe and evidence-informed prescribing decisions and recommendations for individuals and/or populations, effectively managing uncertainty and balancing risks	<p>a) Uses critical appraisal skills to interpret the evidence base and consider its validity and usefulness in a particular context.</p> <p>b) Uses clinical reasoning and professional judgement to decide when to apply the evidence base to clinical decision making and when to challenge its use.</p> <p>c) Uses appropriate information sources to answer medicines-related and clinical enquires from people, carers or advocates, and other healthcare professionals.</p> <p>d) Determines the patient's attitude to risk and discusses risks and benefits at the appropriate level, as part of the shared decision-making process.</p> <p>e) Uses safety netting to ensure systems are in place to provide safe monitoring and follow up; provides and documents the specific advice given to the person and considers written information to reinforce verbal advice.</p> <p>f) Considers use of unlicensed, off-label medicines outside standard practice only when satisfied that an alternative licensed medicine would not meet the person's needs.</p>
2.4	Ensures the cost-effective usage and appropriate stewardship of medicines	<p>a) Undertakes medication reviews to maximise safe and cost-effective prescribing, minimising overprescribing.</p> <p>b) Contributes to the reduction of avoidable medicines waste and otherwise negative environmental impacts of medicines use, and promote safe, cost-effective prescribing practices that optimise patient outcomes and resource use.</p> <p>c) Applies clinical knowledge and professional judgment to ensure medicines and devices are prescribed and/or supplied in a manner that is safe, evidence-based, and cost-effective.</p> <p>d) Ensures prescribing decisions are aligned to relevant local and national guidance on medicines stewardship e.g. to improve antimicrobial stewardship, support substance misuse services.</p>
2.5	Demonstrates professionalism, integrity, and accountability, acting within legal and ethical	<p>a) Considers the risks and consequences of decisions which may impact on the immediate or follow-up care of a person or group of people across the patient journey.</p> <p>b) Engages in a reflective process that encourages scrutiny of professional behaviour, is open to feedback, and demonstrates a willingness to change.</p> <p>c) Justifies and documents deviation from guidelines and policy as appropriate.</p> <p>d) Acts in an open, honest and transparent way with people, carers, families and members of the health and social care team, when safety has (or potentially has) been compromised.</p>

	frameworks and taking responsibility for own decisions	<p>e) Apologises for errors and takes steps to minimise impact and prevent further incidents, reporting incidents/near misses as per organisational policy and challenging poor practice.</p> <p>f) Documents and discusses incidents/near misses with appropriate colleague(s) to improve practice in the future.</p> <p>g) Understands and effectively implements relevant safeguarding procedures, including local and national guidance in relation to each person.</p> <p>h) Recognises and deals with external factors that might unduly influence prescribing (e.g. media, people and colleagues).</p> <p>i) Works within relevant codes of conduct, always keeping patients and the public at the centre of decision making, when interacting or working with pharmaceutical industry partners.</p>
2.6	Practises within the limits of own competence; seeks support when needed, signposting and/or referring to other professionals across the care pathway when appropriate	<p>a) Defines and articulates the limits of own competence and professional scope of practice.</p> <p>b) Knows when and how to use local escalation policies; asks for help and advice in a timely manner or refers to more appropriate colleague(s).</p> <p>c) Manages situations where care is needed out of hours and signposts patients to an appropriate care provider or enables the necessary arrangements e.g. when the GP practice is closed, an on-call service, palliative care service, out of hours services.</p> <p>d) Refers appropriately to members of the pharmacy and wider healthcare team and services across the care pathway when outside of own professional scope of practice or remit; signposts people to others where appropriate.</p>

Domain 3: Leadership & management

An enhanced pharmacist:

C7: Leads the safe and effective use of medicines in their practice setting, proactively driving practice improvements

C8: Demonstrates emotional intelligence, resilience, adaptability and professionalism under pressure

To demonstrate **entry-level enhanced practice** in this domain, pharmacists must provide **evidence from real-life practice** demonstrating the following **four** outcomes:

Outcome	Indicators of expected level of performance
3.1	<p>Role models clinical and professional leadership qualities in their practice setting</p> <p>a) Provides clinical and professional leadership through effective role-modelling, always demonstrating professional integrity.</p> <p>b) Articulates own professional values, beliefs and principles, understanding how they may differ to those of other people and groups.</p> <p>c) Supports less experienced colleagues and/or students to develop professional values and behaviours.</p> <p>d) Is adaptive and flexible in approach to always ensure the safe and effective use of medicines in the pharmacy setting e.g. by acting as the responsible pharmacist or equivalent activities.</p> <p>e) Communicates expectations clearly and delegates tasks appropriately, empowering colleagues whilst always maintaining patient safety through adequate oversight.</p> <p>f) Manages challenge, conflict and difficult situations in a professional manner, encouraging a solutions-focused approach that always places the patient at its centre.</p> <p>g) Contributes to creating an inclusive and healthy workplace culture where everyone feels respected and valued and good physical and mental health is promoted.</p> <p>h) Is curious about approaches used in other pharmacy sectors and in other professions; reflects on this learning to inform own approach.</p>
3.2	<p>Identifies and escalates risks and issues relating to patient safety and</p> <p>a) Proactively reviews processes, systems and practice to improve standards of patient safety, support safe prescribing, and minimise risk.</p> <p>b) Undertakes self-audit related to professional and prescribing practices.</p> <p>c) Reflects on service user feedback and complaints to identify actions to improve patient care.</p>

	care; mitigates and resolves these where appropriate	<p>d) Uses tools such as significant event analysis, applying human factors and/or root cause analysis to investigate prescribing errors, near misses or critical incidents;</p> <p>e) Takes action to mitigate and/or resolve any risks or issues identified through these activities by developing and implementing strategies to avoid and reduce recurrence of medication errors and monitoring the impact of any changes on patient safety.</p> <p>f) Follows procedures for safe working within the pharmacy and/or service and knows how to escalate if they identify unsafe practice or risks to patient safety.</p> <p>g) Raises and escalates concerns in line with organisational policies and is confident to constructively challenge others (including more senior healthcare professionals) where there is an issue with patient safety and/or the quality of care.</p> <p>h) Proactively involved in patient safety activities e.g. responding to safety alerts, reporting adverse events (e.g. Yellow Card reporting).</p> <p>i) Supports the consistent, constructive and fair evaluation of the actions of staff involved in patient safety incidents.</p>
3.3	Leads initiatives to improve working practices and patient care	<p>a) Uses available information, data and evidence to identify where there is opportunity to improve existing or develop new processes and/or services.</p> <p>b) Proactively develops new solutions or approaches to working practices to improve patient experience, safety and/or deliver efficiencies.</p> <p>c) Contributes constructively and collaboratively to developing new services in response to local, national or global strategy, changing population health needs, or organisational objectives and future direction, placing patient safety and optimal use of medicines at the centre of any changes.</p> <p>d) Appropriately influences and challenges others to consider change to improve processes, services and the quality of care.</p> <p>e) Communicates why change will result in positive outcome(s) to gain support and buy in from colleagues.</p> <p>f) Creates a supportive environment which encourages team members to contribute ideas and solutions to improve services, engage in decision making and achieve organisational goals; respects and values team members' contributions.</p> <p>g) Evaluates impact of change and whether it has delivered the expected benefits for patients and services.</p>
3.4	Demonstrates self-awareness and emotional intelligence, maintaining composure and	<p>a) Reflects on own personality, emotions, biases, preferences and prejudices; explores how these may affect own behaviour, decision making, working relationships within the practice setting and the delivery of patient care.</p> <p>b) Anticipates and manages the factors in work, home and the wider environment that influence day to day performance and wellbeing, including ability to perform under pressure.</p> <p>c) Manages a diverse workload effectively whilst maintaining quality and consideration for individuals receiving care.</p>

	resilience under pressure	d) Demonstrates awareness of other people's workload within pharmacy and the multidisciplinary team; assists appropriately and within limits of own competence.
		e) Achieves deadlines for day to day and longer-term tasks through effective time management, hand-over, prioritisation and delegation skills, adapting approach in response to demand and capacity.
		f) Remains productive in uncertain and unpredictable circumstances by changing pace and direction of work, adapting plans and developing new systems and processes to support a logical and calm approach.
		g) Uses personal strategies (e.g. reflection, debriefing, peer or MDT support, engaging with more formal support) to minimise the impact of challenging situations, especially when own behaviours risk impacting on patient safety and delivery of care.
		h) Develops a 'growth mindset', remaining open to learning from setbacks and developmental feedback.

Domain 4: Education

An enhanced pharmacist:

C9: Develops their practice by identifying learning opportunities and reflecting on feedback

C10: Supports the education and development of colleagues

To demonstrate **entry-level enhanced practice** in this domain, pharmacists must provide **evidence from real-life practice** demonstrating the following **four** outcomes:

Outcome	Indicators of expected level of performance
4.1	<p>Plans and engages in structured professional development, learning and reflection</p> <p>a) Undertakes a learning needs analysis (LNA) to identify learning and development needs.</p> <p>b) Develops a development plan with SMART (specific, measurable, achievable, relevant and time-bound) objectives to address learning and development needs identified through the LNA; includes objectives to support the development of a secure scope of practice, including prescribing.</p> <p>c) Actively participates in learning and professional development activities aligned to development plan, including interprofessional learning activities, where possible, to support collaborative practice.</p> <p>d) Keeps up to date with innovative healthcare digital technologies, medicines and practice development to improve practice and patient outcomes.</p> <p>e) Regularly reflects on performance and feedback to identify progress, strengths, areas for development and potential barriers and enablers to overcome these.</p> <p>f) Reflects on how development activities align with career objectives and organisational priorities, demonstrating purposeful and ongoing progression.</p> <p>g) Evaluates success in achieving objectives from development plan, modifying approach accordingly.</p>
4.2	<p>Seeks feedback from colleagues across the pharmacy and wider health and social care teams, patients, carers, and/or advocates; reflects on</p> <p>a) Seeks and is open to receiving feedback on practice from a range of collaborators relevant to their practice context.</p> <p>b) Uses a structured approach to reflect on feedback from a range of collaborators (e.g. Gibbs, Driscoll).</p> <p>c) Makes positive changes to practice based on feedback and reflects on their impact.</p>

	feedback to develop practice	
4.3	Supports others to develop professionally, providing actionable feedback	a) Demonstrates a secure understanding of the foundations of effective supervision, including: <ul style="list-style-type: none"> ○ The purpose of practice and educational supervision, including similarities and differences ○ The importance of clear responsibilities and expectations for effective supervision ○ How to establish a supportive and inclusive learning environment ○ How to communicate effectively with learners ○ How to balance supervision with building learner autonomy
		b) Demonstrates a secure understanding of how to facilitate learner progression through structured support and observation, including: <ul style="list-style-type: none"> ○ How to support learners to undertake a learning needs analysis (LNA) and develop a plan to address their learning needs ○ How to undertake structured direct and indirect observations using appropriate tools (e.g. validated SLEs)
		c) Demonstrates a secure understanding of how to use assessment, feedback, and reflection to drive improvement in learning and supervision, including: <ul style="list-style-type: none"> ○ The purposes of summative and formative assessment ○ How to provide high-quality feedback using appropriate models (e.g. Pendleton's rules, ALOBA, BOOST) ○ How to reflect on own supervision practice and support learners to reflect (e.g. Gibbs, Driscoll)
		d) Applies and reflects on the application of this knowledge to their own role in supporting others in practice by, for example: <ul style="list-style-type: none"> ○ Supporting less experienced individuals to develop their practice through a collaborative learning relationship ○ Supporting others to undertake a LNA, helping them identify strengths and development needs and plan their learning and development effectively ○ Providing timely, constructive and actionable feedback using recognised feedback tools and models ○ Promoting a positive and inclusive learning culture in the workplace
4.4	Delivers effective educational sessions at a team level or beyond	a) Proactively shares expertise with colleagues and/or patients/carers/wider public to promote best practice in the safe and effective use of medicines.
		b) Plans and delivers educational sessions to the pharmacy team and/or to other health and social care professions, drawing on appropriate (healthcare) education models and theory where relevant (e.g. Kolb's experiential learning cycle, SMART learning objectives, Miller's pyramid).

		<p>c) Learns about different approaches to delivering effective teaching & learning to groups and can apply this knowledge to tailor their educational plan and approach to the activity and learners' needs.</p>
		<p>d) Evaluates the effectiveness of education sessions they have delivered by seeking and reflecting on feedback from learners and collaborators; uses this to shape future approach.</p>

Domain 5: Research & evaluation

An enhanced pharmacist:

C11: Understands best practice in relation to research and evaluation activities and critically evaluates the evidence base to inform practice

C12: Leads audit, quality improvement, service evaluation, or research activities and communicates findings effectively

To demonstrate **entry-level enhanced practice** in this domain, pharmacists must provide **evidence from real-life practice** demonstrating the following **4** outcomes:

	Outcome	Indicators of expected level of performance
5.1	Understands best practice in audit, quality improvement, service evaluation and research in healthcare; applies knowledge to own research and evaluation activities.	a) Demonstrates a secure understanding of the differences between audit, quality improvement, service evaluation and research. b) Demonstrates a secure understanding of quality improvement processes and how quality improvement models are used to support this e.g. PDSA cycles. c) Demonstrates a secure understanding of service evaluation to determine the quality, effectiveness, or efficiency of a service, including developing service evaluations questions. d) Demonstrates a secure understanding of research including how to generate research questions and qualitative and quantitative research methods and terminology e.g. by undertaking relevant research modules or e-learning. e) Applies and reflects on the application of this knowledge to own research and evaluation activities. f) Demonstrates a secure understanding of ethical conduct, consent, confidentiality and governance arrangements to ensure research quality and safeguard subjects of research. g) Participates in research activities to gain real-life insight into the research process and develop understanding e.g. acting as a subject in a focus group or interview-based study, or supporting research project recruitment; reflects on the experience to demonstrate understanding.
5.2	Interprets and critically appraises relevant evidence to inform practice,	a) Uses recognised tools (e.g. the CASP, GRADE, risk of bias tools) to interpret and evaluate relevant published literature. b) Plans, presents and leads the discussion of a review of relevant research literature with peers and/or the team e.g. participation in journal clubs or peer review sessions

	sharing findings with peers and/or the team	
5.3	Leads an audit, quality improvement, service evaluation or research project designed to improve patient care, and identifies appropriate next steps based on findings	a) Leads the design and delivery of at least one complete cycle of an audit, quality improvement, service evaluation or research project; Reflects on this to identify and plan for realistic and actionable next steps in the process based on findings.
		b) Acknowledges limitations of the audit, quality improvement service evaluation, or research project.
5.4	Effectively communicates findings from an audit, quality improvement, service evaluation or research project at a team level or beyond	a) Shares findings from an audit, quality improvement, service evaluation, or research project they have led at a team level or beyond e.g. at clinical meetings, through written summaries or, if possible, beyond team level e.g. through poster presentations at conferences.
		b) Clearly describes project, including rationale for design and approach.
		c) Clearly shares findings and recommendations, including their positive implications for patient care and/or service delivery.
		d) Uses appropriate visuals (e.g. charts, graphs, presentation slides) to help communicate findings.
		e) Tailors language and approach to audience.