

Pharmacy Services Assistant Mock Simulated Observation with Question and Answer sessions

Level 2

Assessment Brief

You are required to complete 2 simulated tasks to evidence your knowledge, skills and behaviours. Each task will take approximately 20 minutes. After each task, you will be asked follow-up questions for up to 10 minutes.

TASK ONE

Dispensing of medicines (to include the dispensing and issuing of medicinal products)

You will be given a prescription with 4 items to be dispensed. You will need to:

- confirm the validity of each prescription
- correctly enter the patient into the Patient Medication Record (PMR), observing organisational security procedures
- accurately calculate all quantities as required
- correctly label all prescribed items
- accurately pick/assemble all prescribed items
- perform in-process accuracy check
- complete the dispensing process and issue the medication

TASK TWO

Receiving, storing and issuing stock

You will be given an invoice or delivery notice containing 15-20 different medications. You will need to:

- correctly process the delivery information
- safely unpack the items from delivery
- store the items correctly, ensuring stock rotation
- accurately deal with any discrepancies or damaged items if required

If it is not possible for you to simulate the issuing of medication or pharmaceutical stock during the tasks, you will be given the opportunity to explain how you would issue these during the question and answer sessions.

Community Prescription

[Pharmacy Stamp To Pay Please don't stamp over the age box		Age D.O.B	Title, Forename, Surname & Address As per the patient details provided by your employer/training provider
Number of days' treatment N.B. Ensure dose is stated		NHS Number:	
Endorsements	Amoxicillin 500mg Capsules 500mg TDS for 5 days Atorvastatin 20mg tablets 20mg ON 28 tablets Co-codamol 30/500mg tablets 1 or 2 tablets QDS PRN 100 tablets 100 tablets Betamethasone 0.1% cream Apply thinly to legs BD 30g		
Signature of Prescriber J Shah		Date Today	
 on form	As per the GP details provided by your employer/training provider		
NHS	02301821812 FOR TEACHING PURPOSES ONLY		FP10 C

Hospital Prescription

PHARMACY TRANSCRIPTION FORM

Date: Today

Ward: A Ward

Pharmacist/Pharmacy Technician name: **A PHARMACIST**

TIME REQUIRED: 12PM 12:30PM 3:30PM 5PM OTHER (PLEASE STATE):

Patient: First Name, Surname & Address D.O.B NHS Number	Medication, Strength & Form:	Dose:	Frequency:	Quantity to be dispensed:	Dispensed by:	Checked by:
<i>As per the patient details provided on the Portfolio Matrix</i>	Amoxicillin 500mg Capsules	500mg	TDS	5 days		
<i>As per the patient details provided on the Portfolio Matrix</i>	Atorvastatin 20mg tablets	20mg	ON	28 tablets		
<i>As per the patient details provided on the Portfolio Matrix</i>	Co-codamol 30/500mg tablets	1 or 2 tablets	QDS PRN	100 tablets		
<i>As per the patient details provided on the Portfolio Matrix</i>	Betamethasone 0.1% cream	Apply thinly to legs	BD	30g		



**Level
2**

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