Pharmacist frontiers – unlocking career opportunities beyond the dispensary

Early career pharmacists are concerned about a perceived oversupply of pharmacists in the workforce coupled with poor job prospects, according to a survey conducted by the Early Career Pharmacist Working Group. In this special Pharmacy Horizons report by Peter Waterman, pharmacists report on their career movements and suggest how ECPs can give themselves an edge in the job market.

Polarised debate on career prospects

The debate over the size and distribution of the pharmacy workforce has gained momentum recently with the reintroduction of pharmacists on to the Skilled Occupation List to determine professional migrant intake numbers.

However, opening up entry to overseas pharmacists has put the spotlight on the current situation in Australia where there are two quite polarised schools of thought on the workforce – one school believes there is an oversupply of pharmacists, the other that there is a maldistribution (i.e. an oversupply in cities and an undersupply in rural and regional areas).

The Pharmacy Workforce Planning study, a project under the Fourth Community Pharmacy Agreement, notes there are currently 16 schools of pharmacy offering pharmacy degree programs.

‘Over the last 22 years, from 1985–2007, pharmacy school graduate numbers have steadily grown (with the exception of 1999), with a more spectacular growth over the last decade,’ the study notes.

‘In 1985 there were 338 pharmacy graduates; in the most recent year of graduation (2007) there were 1,427 pharmacy school graduates. Since 1997 graduate supply has more than doubled. Since 2003, pharmacy course completion (graduation) numbers have been heavily tipped towards female graduates, with just over or near to 50% more female pharmacy course completions each year. The number and gender balance of current and projected pharmacy school enrolments indicates the recent graduate supply trends will continue.’

Another way to examine those figures comes from Professor Roger Nation of Monash University who has written in the Journal of Pharmacy Practice and Research that these 16 pharmacy schools service a population of a little over 21 million people – around 1.3 million people per pharmacy school.

‘This figure is substantially lower than other countries: the USA has around 3 million people per pharmacy school; Canada around 3.3 million people per pharmacy school; the UK around 2.5 million people per pharmacy school; and New Zealand around 2.1 million people per pharmacy school (two pharmacy schools across the two islands),’ he wrote.

‘A decade ago when Australia had six pharmacy schools and a population of 20 million, there were around 3.3 million people per pharmacy school. This figure is remarkably similar to the current figure in the USA and Canada despite the increase in the number of pharmacy schools in North America. Unbelievably, the current Australian figure of around 1.3 million people per pharmacy school may be lowered even further since there is the prospect of more Australian universities opening schools of pharmacy.’

Last month the Pharmacy Board of Australia released data showing that as at 30 June this year there were 23,231 general registration pharmacists, 1,888 interns and 7,778 students. At the end of 2006, the figure stood at 15,337 pharmacists.

Former PSA President Warwick Plunkett has been vocal in the debate on the pharmacy workforce...
and has written, ‘The answer to this dilemma perhaps lies in getting the profession’s key stakeholders together – and working together – to plan and implement strategies designed to ensure a viable and sustainable future for the profession. The future of pharmacy is far too important to be left to the vagaries of university balance sheets. We need a fresh approach. Greater liaison between universities, federal health policy makers and the pharmacy profession is needed to inform the sustainable growth of pharmacy graduates.’

‘There is no doubt that the expanded professional business model that PSA has been advocating for community pharmacy and the discovery of the cost-effective impact that more hospital pharmacists could play in the institutionalised health-care settings will require more pharmacists in the future. In July, Professor William Charman (Dean, Faculty of Pharmacy and Pharmaceutical Sciences, Monash University) wrote to the pharmacy media. ‘At Monash, we are focused on educating and inspiring well-trained, high-quality pharmacy graduates to contribute to Australian healthcare in community and hospital settings. We encourage and support our graduates to diversify their employment opportunities outside these traditional fields of practice to areas such as the pharma industry, consulting and government service.’

His letter went on to say, ‘At Monash, we remain concerned about the proliferation of pharmacy schools in Australia and believe that the current number (or worse still, an expanded number for which there is no rationale or community need) is not sustainable.’

A constant in the debate has been the recognition of the lack of any formal mechanism involving pharmacy schools and the profession to determine the sustainable market for pharmacists.

In his letter, Professor Charman said, ‘Monash is concerned about the number of pharmacy graduates in the Australian workforce, and the current lack of clarity, future planning and governance.’

Mr Plunkett said there was a clear need for the pharmacy schools, the profession and stakeholders to meet regularly to examine the workforce and the numbers of graduating pharmacists.

‘I don’t think we can go on producing graduates at the rate we are, which means that every second pharmacy in Australia will need to employ an extra pharmacist to simply absorb the new graduates,’ he said.

‘Quite clearly that can’t happen so we need to plan better, and have better control. The future of the profession depends on it.’

Pharmacists tell their stories

A survey of early career pharmacists conducted by the PSA Early Career Pharmacist Working Group (ECPWG) in 2010 revealed significant concerns about a perceived oversupply of pharmacists in the workforce coupled with poor job prospects.

According to ECPWG chair Justin Lee, the recently released survey results are consistent with views obtained by ECPWG representatives through direct contact with ECPs and various media outlets.

‘On many occasions, the ECPWG has been invited to join in the debate concerning the perceived oversupply of pharmacists,’ Mr Lee said.

‘While many, often conflicting, points of view have been publicly made by pharmacists of significant stature within the profession, few have offered solutions to allay these fears. Admittedly, this is a difficult issue that no single solution is likely to address. After much discussion, the ECPWG decided to take a proactive approach and commence a workforce project to investigate career opportunities for pharmacists beyond the community and hospital pharmacy setting,’ he said.

Mr Lee said a list of pharmacists working in non-traditional roles across the country was compiled and a number of them were approached and interviewed about their career journey and asked to suggest how the ECPWG could better promote career opportunities to ECPs.

‘This activity proved to be an extremely valuable exercise and ECPWG representatives were often left inspired by the many stories of calculated risk, personal development and perseverance,’ Mr Lee said.

This article is the starting point for an insightful series of features on pharmacists practising to the furthest extent of what we normally think a pharmacist does.

‘The pharmacists interviewed in this article only represent a fraction of the pharmacists we approached. Following this article, it is intended that a new interview with a different pharmacist from our database will be featured through a variety of PSA media at regular intervals.

‘It is unlikely that ECPs will be able to follow directly in the footsteps of these pharmacists; this is not the purpose of this activity. Rather, we hope that ECPs are able to learn from these experiences and seek ways of improving their skills so that they are better equipped to pursue similar opportunities. As time progresses we hope that the name Pharmacist Frontiers becomes synonymous with career opportunities.’

Don’t pigeon-hole yourself – just apply

The secret for young pharmacists looking for work is simple: apply. In all areas of health care, you may just be surprised where your skills may take you. You have to go out and challenge other people’s expectations of what a pharmacist can add to the workforce.

This is the advice of Stefanie Johnston, who started her career in community pharmacy before joining the Perth North Metro Medicare Local (formally Osborne GP Network) as an HMR and NPS facilitator in October 2007.

Stefanie says many pharmacy students pigeon-holed themselves into looking for hospital and pharmacy jobs because those were the skills they left university with, or the skills they thought they left university with, and were often unaware of other pathways available to them.

‘But I think that the work I do now has greatly extended my skills base and I have learned a lot in project management and staff management,’ she says.
Stefanie says on-the-job training was a big component of working at a network/divisional level and she found she was constantly learning new things, including policy writing, reporting and service delivery.

‘This constant learning curve has helped me grow professionally and I am now working at the network in the Executive Officer – Clinical Services role. I now ‘team lead’ all staff providing clinical services, and am involved in the organisation’s clinical governance.’

While managing pharmacies Stefanie extended her education by qualifying as an accredited pharmacist.

‘When I first started at the network I was working one day a week in community pharmacy. On gaining accreditation, I was fortunate enough to be able to start delivery of residential medication reviews and continue to do so. This was a great way for me to include a clinical component to my current employment.’

With current changes in the Primary Health Care area and the development of Medicare Locals, this is a key time for pharmacy to be involved at all levels of the interprofessional health care team.

‘The interns I now interact with are far more eager to look outside traditional areas of pharmacy and have a broader range of skills, which gives them more opportunities, and more confidence to utilise their skills as they emerge into the workforce,’ she says.

‘Pharmacists have great common sense and these skills may be imbedded in us all. By moving out of traditional areas of pharmacy I was able to develop and utilise these skills in a number of different forums.’

Stefanie says that by looking beyond traditional areas, young pharmacists can find work which may challenge their ideas of pharmacy but still be rewarding.

‘We are used to finding jobs because we know someone or see an ad that doesn’t really need us to put together a formal application,’ she says.

‘When I applied for my current job they sent letters to all pharmacists in Western Australia and only three people applied. I think a lot of people are put off by having to formally apply for a job and fill out applications forms. But now when I talk to people they are amazed at how interesting my job is and they are very surprised that it is a role for a pharmacist.

‘I have found the network a great place to work and my understanding of multidisciplinary teams and primary health care has increased immensely.

‘The NPS role is a great way for pharmacists to be employed in the networks. The training and support provided are fantastic and facilitators love their role.’

The profession doesn’t owe you a living

A mistake some young pharmacists make when joining the workforce is adopting the attitude that the profession owes them a living.

This is the view of pharmacist Mark Dunn who has used his background to enter into the specialist area of Pharma publishing while also working for the Tasmanian State Government and providing locum services.

‘I am currently working as the AusPharm publisher/editor; as a pharmacist at the state government Alcohol and Drug Service in Hobart; as a pharmacist at the Pharmaceutical Services Branch of the Tassie Health Department; and as an occasional locum in community pharmacy,’ Mark says.

‘That’s a fairly broad area of interest and I encourage people to think outside the square when looking towards work after graduating. Also, I think there is a bit of a sentiment out there amongst some young pharmacists that the profession owes them a living.

‘It’s never been easy to get started in business.

‘As someone said on AusPharmList a few years back, “Success is mostly a function of how hard you work and how much risk you’re prepared to take”.

Mark says that with regard to the popular AusPharmList, the idea came about when he was the owner of a (relatively) remote rural pharmacy in 1995; the internet offered a way for pharmacists in similar situations to have professional contact with their peers.

‘This notion seems to have been correct as, following a January 1996 launch, the membership has now grown to over 9,000,’ he says.

‘In 2004 I saw an opportunity to publish a daily news-sheet as part of a reworking of the way the AusPharmList discussion group worked. This was financed for us by sponsors. As part of this AusPharm joined forces with Tony Wiss,’
When she sold and moved to the Murraylands in South Australia until 2003 Kirrily co-owned and operated a pharmacy in the Adelaide Hills to work with the Green Dispensary Group of Pharmacies. She has a special interest in, and a desire to help, people with diabetes, so she undertook qualifications to become the first credentialed pharmacist diabetes educator in Australia.

She now works with Diabetes SA as an educator and also as an accredited pharmacist/credentialed diabetes educator in Mt Barker. Being credentialed means that Kirrily has her own Medicare provider number and can bill services to Medicare and private health funds. She can also sign off NDSS forms, is involved in Enhanced Primary Care and Team Care Arrangements.

I think the opportunities for young pharmacists are out there and there really are a vast range of them,” Kirrily says.

Professional services offer great potential. For instance I went into diabetes because often patients are lost in the system. As pharmacists we are 10 times more likely than other health professionals to see people with diabetes and this puts us in an ideal position to help them manage their condition if we have the right skills.’

Kirrily said looking for a job that involved helping patients treat and manage disease states offered challenging and rewarding career options.

‘I really think young pharmacists have to think outside the square of community and hospital pharmacy,’ she says. ‘It is important to have an interest in disease states and a desire to specialise in the area and to help people with those conditions. You need to seek out the qualifications required to move into those fields.’

Kirrily, however, warns against becoming too specialised in any one area.

“One of our great strengths as pharmacists is that we have skills across a range of areas. In my case, for instance, they cover diabetes, devices, nutrition and so on. If young pharmacists nurture those skills and add to them they really are setting themselves up with the strengths and skills base to move into just about any field they want to.’

Kirrily said keeping an eye open for opportunities was also important because the career options available were not always immediately apparent.

“There are a lot of Government programs for instance that need pharmacists, such as asthma, diabetes and so on,” she says. “The emphasis on nutrition also opens up areas outside of traditional avenues.

“There are great challenges in the push for more preventive health options and the need to keep people healthy rather than just treat and manage them when they are ill or have a condition. Don’t be afraid to apply for these positions that are outside the square because often they are the very jobs that prove the most rewarding and most satisfying.”

Kirrily recommends that pharmacy school officials start moving from the current strong emphasis on owning/managing options of pharmacy.

“They need to place a lot more emphasis on the role the pharmacist can play in preventive health and professional services,” she says.

Find opportunities outside the comfort zone

Young pharmacists have many avenues of opportunity outside the traditional community pharmacy sector; they just need to be aware of them and know where to look for them.

This is the view of Luke Kerlsake of Pharmaceutical and Medical Professionals, who believes that in today’s environment it is more important than ever to look outside ‘comfort zone’ opportunities.

Mr Kerlsake said young pharmacists should examine areas of pharmacy which were often overlooked, including clinical research, regulatory/scientific affairs/drug safety, medical information, data management and sales.

Clinical research was an attraction because it involved managing designated clinical trials including investigator selection, analysis of potential patient recruitment, preparation of trial related documentation (protocols, case report forms, investigators’ brochures, consent documents,
letters of agreement, confidentiality agreements, and organising ethics committee submissions with follow through to ensure a successful outcome.

‘Clinical research pharmacists are also often the point of first contact when investigators/site personnel inquire about patient inclusion/exclusion criteria for ongoing trials,’ he said.

‘They are also responsible for maintaining project files including ethics committee approvals; curricula vitae of investigators and study personnel; clinical investigators’ brochures; protocols; case report forms instructions; consent documents; clinical trial material shipping orders; start-up meeting attendance documentation; letters of agreement; lab reference ranges; all investigator and site correspondence; and schedules of payment.’

In the regulatory affairs area, pharmacists were often tasked with assisting in the preparation of documentation including regulatory submissions to the TGA, drafting product information, consumer information, literature searches to support submissions, TAGL product analysis, changes in manufacturing, pack sizes, CMI and PI development, packaging changes, MIMS notification and other regulatory activities.

‘They also ensure that all other adverse event data (trial, literature and spontaneously reported) is entered into regulatory databases within the timeframes specified and that the appropriate regulatory authorities are notified,’ Mr Kerslake said.

‘A career in medical information will require the pharmacist to provide balanced, evaluated information and advice on the clinical use of medicines to both external customers (pharmacists, GPs, specialists, nurses, patients and consumer groups) and internal customers (sales and marketing, health economics, corporate affairs).

‘They will constantly review published literature and company data to keep up to date with current product issues and review advertising and promotional material to ensure Code of Conduct compliance.’

Data management was another area where pharmacists could look and where their duties might involve responsibility for collecting, coding, processing, validating and analysing patient data from clinical trials.

‘They also develop Case Report Forms (CRFs) and data collection tools while developing data validation and analysis plans, and managing data entry and coding of clinical data,’ he said.

‘Sales is often an overlooked area for young pharmacists. In sales the pharmacist has responsibility for developing the sales of the company’s products in the assigned territory through full coverage of all contacts and by becoming a value-added partner to the health care professionals.

‘These will include pharmacies, wholesalers, hospitals, specialists and general practitioners. They deliver superior sales presentations to customers by fully planning each call with specific objectives, maintaining the customer’s interest, overcoming objections positively, reframing product features into customer benefits and the competent use of relevant literature.’

Mr Kerslake said one of the most important messages for young pharmacists was that if at first they did not succeed in their chosen employment field, they should seek a position that would give them knowledge for future roles.

‘You should also enhance your industry and professional knowledge while waiting for your opportunity to arise. You should develop a working knowledge of all areas such as clinical research, regulatory, medical information, sales and marketing, and join industry associations (ARCS, specialist groups). You should attend conferences and also consider part-time study.’

Think beyond the traditional

Moving from one area of pharmacy to another has provided Carolyn Winkler with a wealth of experience, as well as a rewarding and satisfying career in her chosen profession.

‘I started working in community pharmacy and with two small children we moved to rural NSW where I bought my first pharmacy,’ she says. ‘The opportunity arose to open a second pharmacy out of town where a large retirement village was being built.’

When the children were nearly in secondary school the family moved back to Sydney where Carolyn again worked in retail pharmacy until she decided that a change in direction was needed. That change of direction saw Carolyn move into the Government sector when she was appointed to the position of Pharmaceutical Advisor for Pharmaceutical Services Branch of the NSW Health Department.

‘After a couple of years I felt that I needed a new challenge and decided that working in the pharmaceutical industry would supply that challenge,’ Carolyn says.

‘My first role was as Regulatory Affairs Manager for Bayer Consumer Healthcare. The Marketing Manager decided that I should help launch the products that I had been able to register and I did my first TV and radio interviews.

‘I realised that I wasn’t cut out for a regulatory role and I was very excited when I was head hunted for a more marketing scientific role.’

Carolyn says she followed that position by securing a range of senior management roles including that of Medical Marketing Manager at Pharmacia and later Pfizer.

‘I was responsible for Asia Pacific and I really enjoyed travelling to many countries and learning how to launch products in those countries.

‘The challenges continue to this day and I love every minute of it.’

Thinking beyond the traditional employment areas of community and hospital pharmacy can provide rewards for a career, and the pharmaceutical industry is one where young pharmacists can often find exciting and challenging careers.

‘If someone is interested in working in the pharmaceutical industry, I would suggest taking on a role either in regulatory affairs, as a medical information pharmacist, doing pharmacy education programs or perhaps as a medical representative,’ Carolyn advises.

She recommends that early career pharmacists look for assistance when job hunting or seeking ways to improve their career prospects.
‘When I started I didn’t even know how to write my CV so I got help to do that. I think it is important that young pharmacists realise that they need these skills to get jobs outside the traditional areas.

‘You also have to be ready for the interview. They ask the most incredible questions and in some jobs you are also given a psychological test, which can be daunting.

‘I have undertaken a couple of these psychometric tests. They test verbal ability, numerical ability and general intelligence. Then there is a personality profile assessment which identifies people whose personal values match those values of the organisation.’

Carolyn says preparing young pharmacists with the life skills to help face such situations would broaden their career prospects.

‘I really recommend that young career pharmacists thinking of looking outside community or hospital careers equip themselves with the necessary tools to be able to apply for these jobs. It’s not just CV and interviewing skills that may give you an edge. Getting some basic skills in the areas in which you are looking can also improve your chances of success.

‘A good example is the Australian Research Collaboration Service (ARCS) which runs a three-day course for Regulatory Affairs on how therapeutic goods are developed, registered and marketed and what legislative controls underpin such activities, and who regulates what. It could be in prescription medicines, over-the-counter, complementary medicines or medical devices industries,’ she says.

Make the leap

Michael Fitzsimons spent 10 years as a community pharmacist before seeking a change of career direction.

‘I just decided that community pharmacy was not for me. I guess I was something of a late bloomer in terms of moving into a non-traditional career area of pharmacy,’ Michael says.

He is now Pharmaceutical Inspector with the ACT Government. On the way to this position has worked as the Policy Manager at Medicines Australia, as Assistant Director, Medication Management and Secretary, Repatriation Pharmaceutical Reference Committee of the Department of Veterans’ Affairs, and as the Education and Research Pharmacist at PSA.

‘These are certainly all non-traditional areas but I think it is important for young pharmacists to realise that they are equipped and trained even for these areas, as well as a wide range of other career options.

‘Our training provides the necessary skills to look for career opportunities outside the community or hospital pharmacy dispensary where being a registered pharmacist is necessary or extremely helpful. The hardest thing for me was actually making the leap to do something different.’

‘I think my career path is a good example of how you need to be open-minded about what you can do,’ Michael says. ‘After the initial leap from community pharmacy into the PSA, I realised that my pharmacy training equipped me for a whole range of other career paths.’

‘Young pharmacists need to realise there are other areas like the pharmaceutical industry where great opportunities for pharmacists exist, particularly in medicine regulation, health economics and product education and detailing. And for those wanting a little more adventure, the pharmaceutical industry also provides great scope for international experience.

‘Young pharmacists looking to work in the Government should also examine what cadetships are available to help them get into the public sector.’

Michael also emphasises that the culture of ‘us and them’ between traditional and non-traditional areas is a nonsense which is thankfully breaking down.

‘There was a lot of misinformation out there about other career paths like the pharmaceutical industry or government sectors, and if you took one of these career paths you were often accused of going to the “dark side”. It’s not like that. Certainly, there are different philosophies and work cultures, but you are still a pharmacist no matter whether you are in a hospital or a community pharmacy, or working in a government department.

‘Also, I have been blessed that my career in the public service and Medicines Australia coincided with some significant changes to the Pharmaceutical Benefits Scheme, and I was personally involved in the development and implementation of the PBS Reforms in 2007 and the Australian Government – Medicines Australia Memorandum of Understanding in 2010.’

Michael recommends that all young pharmacists think more broadly about their career path and seriously consider non-traditional pharmacy roles and make the leap.

‘That’s the hardest part. That first step takes a lot of strength,’ he says. ‘But once you have made the decision you will never look back. There are just so many exciting opportunities for young pharmacists out there.’

Stop looking under P for pharmacy

Former Head of the School of Pharmacy/Professor of Pharmacy at Griffith University Nerida Smith believes the secret for young pharmacists looking for work is to look outside the square and ‘grab opportunities as they arise’.

‘You really have to have the courage and faith in yourself to go through the doors that are open, and there are many open doors to a diversity of career options for young pharmacists,’ she said.

‘For young pharmacists, their dream job may not be their first job; they may have to start at the bottom and work their way up to where they want to be in the long term.

‘But you have to look at where the opportunities are. For instance, we’re not exactly getting our doors beaten down by people wanting to do PhDs in practice and clinical areas but to me these are no-brainer opportunities. There will always be work in academia. In future years – who will staff the pharmacy schools
here and overseas? The bulk of the academic staff is ageing (like me!) – who will replace them? It is very hard to find PhD qualified staff in the practice/clinical areas.’

Professor Smith said by broadening their horizons, young pharmacists would find jobs, and often find exciting careers outside of the traditional area they may have thought they were limited to.

‘My advice is that when looking for work you have to stop just looking under ‘P’ for pharmacy,’ she said.

‘Why not look at work in the regulatory and government policy areas? How about health education? There really is a wealth of diverse opportunities out there but you may just have to think outside of hospital or community pharmacy to begin with. It may mean adding to your base pharmacy qualification to open up new career directions, and travelling to where jobs are available.

‘Your degree will always mean you can return to the traditional areas at some stage if you want to.’

Professor Smith said to reach her current position she ‘started at the bottom and worked my way up’.

‘I began by tutoring and many years of lecturing before I attained the position I now have but that just shows that you have to be willing to work your way up. I have moved in and out of pharmacy, pharmacology and toxicology, both overseas and in Australia. You can’t expect to leave university with your degree and be young, inexperienced but only willing to start at the top or not travel to where the jobs are. It doesn’t work that way.

‘Your degree will open up a lot of doors and as one shuts, another will open. Go through the door that is open and use it as a stage in your career.’

Professor Smith also had advice for those planning on undertaking PhD.

‘Do your Honours (or Masters) then a PhD full-time, while you are young, fit, unencumbered, enthusiastic and able to accept being poor. Your rewards will come later. Your PhD will open doors to jobs and opportunities otherwise closed off to you.

‘Be ready to change your career direction, and take up opportunities as they come to you – it may mean travelling and stepping out of your comfort zone. Put your hand up to serve on committees and boards. Don’t be afraid to lead via service and be prepared to put in some hard work – but it is fun and rewarding when working with like-minded colleagues.’

Another tip Professor Smith offered was to find a mentor.

‘I had great senior pharmacist and toxicologist mentors in NZ – they are still my mentors today.’

Seek, ask and network

Ideas and suggestions from pharmacy schools on how to look for work outside the normal channels would be a great help for graduates, National Manager – Dermatology at Ascent Pharmaceuticals Rachel McAdam says.

In her own case, Rachel says, it took five years behind a dispensing counter to realise that was not the way she wanted to spend the rest of her career.

‘Pharmacists tend to have this perception that once they have their degree and leave their training they just head into a hospital or community pharmacy setting,’ she says.

‘I think we need to introduce ideas early in their training to encourage them to broaden their views of where they can go when they leave university. We need to plant the seed early on in their training.

‘When I wanted to look elsewhere for my career I realised how much it would have helped me if I had some ideas of the alternatives available earlier on in my training.’

Rachel advises young pharmacists to look for career alternatives and to use continuing education to find areas of interest.

‘As pharmacists we have the opportunity to be part of different educational programs and I was lucky to find a great interest in dermatology which I pursued when I saw an ad in that area.

‘So my advice to young pharmacists is that when you find an area of interest and see an opportunity in that area, go for it. Don’t hold back. You have to seize the opportunities as they arise.

‘I also think we need to equip young pharmacists with better skills to apply for jobs outside the usual areas. We tend to come out of university with great clinical skills but the profession is one that doesn’t often use formal interviews and so on for people when they are going for a job.

‘At times it can be a simple case of showing your credentials and having a cup of coffee with a pharmacy manager to secure a job.’

Rachel says that it came as a rude shock to see how different it was in the ‘real’ world. ‘I was really surprised at how different it is in industry. I applied for the job I have and it was a process of four interviews before I secured it.

‘Some jobs require interviews before panels and I don’t think many pharmacists are well equipped for these.

‘There is an intense level of interrogation outside of hospital and community pharmacy when it comes to applying for a job. I think it would be invaluable if we built into our course the delivery of skills in areas such as CV writing, interview techniques and so on.’

Another area, according to Rachel, where pharmacists might need training is in promoting their skills outside the clinical area.

‘You have to be able to sell yourself. The degree is all important of course but you also have to have the personality, the track record and the skills – and know how to sell all these things and get these across during an interview.

‘A new area I have seen develop in recent times is that of professional services manager where a pharmacist may be employed by a group to oversee the pharmacy operations of the group. These may involve dispensing, budgeting, staff management and a whole range of skills which are outside of what up to now we may have regarded as normal pharmacist duties.

‘Seek, ask and network at every opportunity!’