

...with Jenny Warmington



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How and why did you move into your role as Senior Clinical Trial Pharmacy Technician at CRN West Midlands?

After training as a pharmacy technician in community pharmacy, I applied for a job at University Hospital Coventry and Warwickshire NHS Trust in Coventry, as at the time there was more opportunity for progression for pharmacy technicians in secondary care. Also, I liked the fact that there would be the opportunity to work in an aseptic unit making chemotherapy. After spending a number of years working in the aseptic unit, I applied for a brand new post as a specialist aseptic clinical trials pharmacy technician. This job evolved into a role with the cancer research network. In 2013, I applied for my current post, and the rest, as they say, is history!

What does your role entail on a daily basis?

I enjoy the fact that no two days are the same for me. My job involves sharing of good practice, and supporting my colleagues in pharmacy to be able to deliver research in secondary care. Some days I am office based doing things like project managing, workload planning and replying to emails. Other days I am traveling to secondary care Trusts in the West Midlands to meet new pharmacy staff and welcome them into CRN WM, or deliver training for things like digital resources such as EDGE and the NIHR hub.



I organise regional pharmacy meetings that allow my pharmacy colleagues to network and share best practice on a regular basis and anything else that is needed to aid the delivery of research in the West Midlands. I also support national projects such as the Research and Pharmacy website and discussion forum.

How do you utilise EDGE in your daily role?

I project manage pharmacy EDGE engagement for the pharmacy community in CRN WM. This can involve delivering EDGE training to pharmacy colleagues in local Trusts or creating workflows and entities. We have a CRN WM pharmacy user guide for EDGE which I maintain.

We have heard through the grapevine that you are formalising a group of pharmacy staff to get together and agree on a workflow. What are you trying to achieve here?

CRN WM has a strong pharmacy community who are very involved with developing the use of EDGE as a network. We aim to use EDGE to standardise and share best working practices, and support each other. I manage this project which includes a pharmacy EDGE working group, task and finish days, and communicating with non-pharmacy EDGE users such as R&D colleagues and colleagues working in business development. EDGE is a large part of my job role at the moment.

Through the pharmacy EDGE working group, we plan to create workflows with matching attributes that will reflect best working practices that can then be utilised and adapted for local use by Trusts. The working group comprises of pharmacy EDGE users such as pharmacists, pharmacy technicians, and pharmacy assistants. We are also very fortunate to have the support of non-

pharmacy staff such as R&D staff and CRN WM business intelligence staff to ensure that the pharmacy processes that we develop have value to the wider research community in Trusts. This will ensure that we are able to extract the data that we need from the information that we input into EDGE and to avoid the duplication of data input.

What data and information do you hope to gain from EDGE as a result of your network's engagement within pharmacy?

To date we have created an entity to capture data relating to the opening of studies, and this entity is completed by pharmacy staff at all research active Trusts in CRN WM. This data is then used to give a picture of how we are performing as a network.

We plan to carry on developing workflows and entities to reflect pharmacy processes which we will then use to do things like capacity planning, as well as identifying good working practices and areas for improvement.

What impact do you feel has already been made on pharmacy engagement as a result of using EDGE?

We are fortunate to already have good engagement with the pharmacy research community in CRN WM. An unexpected side effect of EDGE engagement for pharmacy has been the impact on pharmacy and R&D colleagues.

As EDGE is managed by R&D, we have found that relationships between pharmacy and R&D have grown as a result of engaging pharmacy staff with EDGE. EDGE has increased the visibility of pharmacy processes to the wider Trust and allowed pharmacy to better understand wider Trust processes.

Would you be willing to share your attributes and workflows with the EDGE community upon completion? At next year's EDGE Conference, perhaps...?

Absolutely! We are one NHS. I am a strong believer in sharing experiences and resources. I have created a pharmacy EDGE discussion forum in CRN WM for sharing of ideas and local working practices, and to offer support for the use of EDGE in a pharmacy setting. Membership to this discussion forum has the support of the NIHR and will be made available to pharmacy EDGE users in all LCRNs in the very near future. I foresee that this will be the perfect platform for sharing pharmacy working practices in EDGE (as well as making things available in the global library). I'm excited to say that I have been asked to deliver a break out session at the EDGE conference next year, which I am very excited (and nervous!) about.

One hope for the future of EDGE and pharmacy:

That we can take EDGE forward and use it to its full potential. EDGE is much more than a portfolio management system in the fact that it has the potential to transform the delivery of research for pharmacy. I hope that we have the foresight to see this potential and run with it!

One challenge that you think clinical research faces within pharmacy:

The studies that we are facing in pharmacy are increasingly complex with fewer participants. I believe that this is something that will continue with the development of targeted treatments. Pharmacy will need to find ways of absorbing the increased number of studies by working smarter. One way of achieving this is through the integration of EDGE (and sharing best working practices via EDGE).

One great thing that you think clinical research has achieved:

Antiretroviral drugs. I remember the late 1980s and early 1990s vaguely (ahem) when the AIDS crisis was at its peak. I remember how scared I felt that people were dying and we had no idea how to prevent this terrible disease from spreading. Fast forward to today and because of research people with HIV can live a relatively normal life without passing HIV on and with a normal life expectancy. We have post exposure prophylaxis medication that prevents infection. What an achievement.

One thing that always makes you laugh:

Innocent comments from children. I have a 20 year old daughter that used to come out with some absolute corkers. I take great delight in reminding her of them on occasion and they never cease to make me laugh. I also love a good silly joke.

The best thing about living in the West Midlands, and why:

Hobsons cake shop in Stratford on Avon. They sell the best homemade cakes and you can sit by the river Avon to eat them.

That and Coventry is the city of culture for 2021 which means that there are lots of exciting things happening here over the next few years.

And finally, one piece of EDGE functionality that resembles your personality:

That would have to be workflows. I like to organise my life with lists and tick things off as I complete them. If something's not in a list, it simply doesn't get done.