

Health Champion Qualification

NEW opportunity to receive a part-funded course for up to 2 members of your team

DISTANCE-LEARNING WITH IN-PHARMACY ASSESSMENT ***LIMITED COURSES AVAILABLE***

Every Healthy Living Pharmacy (HLP) requires a full-time equivalent¹ qualified Health Champion who has attained the Royal Society for Public Health's Level 2 Award in Understanding Health Improvement. The role of Health Champion is an important one and is normally undertaken by a member of the medicines counter team or healthcare assistant.

Following a series of funded revision and assessment workshops, NHS England Wessex team and Health Education England (HEE) Wessex are extending their commitment to support community pharmacies become Healthy Living Pharmacies (HLP). This opportunity is for those who have not been able to attend a face-to-face event.

The NHS recognises the difference HLPs can make to the health and wellbeing of the communities they serve and are funding a Health Champion distance-learning programme with in-pharmacy assessment, provided by HLP specialists Pharmacy Complete. A contribution of £20 (excl. of VAT and processing fee) will be made by the contractor (normal RRP is £85 excl. VAT).

Individuals will be sent an engaging workbook and mock assessment. Once they are confident they can pass the assessment, the named invigilator requests the formal RSPH papers from Pharmacy Complete, and the assessment is undertaken in-pharmacy under the invigilator's constant supervision. Once successful, the candidate receives a certificate and badge.

Who should become a Health Champion?

This training is for up to TWO prospective Health Champions for each pharmacy, assuming no previous attendance in the first series. If you want more individuals in the programme then this may be possible depending on availability; there will be a preferential charge of £75 + VAT. Please contact connect@pharmacycomplete.org for more information.

Terms and conditions for the funding

- Distance-learning must be completed by 14 October 2017 indicated by a request for assessment by this date; if this is not done then an additional charge for the course will be made to the contractor (additional £55 + VAT)
- The assessment must be returned to the Centre by 21 October 2017
- A charge of £21.22 (includes booking fee, excludes VAT) must be made at booking
- A retake fee of £35.00 + VAT will apply if the candidate is unsuccessful
- Maximum of 2 learners per pharmacy (includes the event programme)
- Enrolment details must be received fully completed (see overleaf)
- Courses are limited and so we refuse the right to decline enrolment once the programme has filled or expired

Closing date for enrolment is 30 September 2017

¹ Minimum 35 hours

Order and Payment Form

Please complete all sections clearly in capitals and return to us as below with an enrolment form for each candidate.

Your pharmacy			
Pharmacy name			
Pharmacy address			
Pharmacy Postcode			
Pharmacy tel. number			
Pharmacy email			
Your order			
Item	Contractor contribution*	Number of courses	Total contribution
Health Champion Course	£21.22		
Please charge the following card with the total amount			
Credit card number			
Expiry date		CVV code	
Name on card			
Signature		Date	

* exclusive VAT @ 20%

We accept payment by all credit card providers as stated on our website. Payment is deducted once we have processed your order. If your payment cannot be authorised or cleared for any reason we will be in contact. Once the order has been processed the destruction of your details will be done securely and you will receive a receipt from PayPal.

Registered number: 05141768 VAT Number: 844 2342 40

A copy of this document and the enrolment forms should be sent to Pharmacy Complete:

- Scan and email: connect@pharmacycomplete.org
- Fax: 01962 670159
- Post: Southgate Chambers, 37-39 Southgate Street, Winchester SO23 9EH

Enrolment Form Health Champion distance learning

Please complete all elements of the form below for each candidate, in capitals and return to us as below.

Pharmacy							
Pharmacy name							
Pharmacy postcode							
Prospective Health Champion (1st)							
Full name and details Legal name as it will appear on certificate	First name		Surname				
	Mr/Miss/Ms/Mrs		Date of Birth:				
	Gender:		Male/Female				
Email of student							
Ethnicity							
Disability	Disability?		Registered Disabled?		Support required?		
	Yes	No	Yes	No	Yes	No	
Prospective Health Champion (2nd)							
Full name and details Legal name as it will appear on certificate	First name		Surname				
	Mr/Miss/Ms/Mrs		Date of Birth:				
	Gender:		Male/Female				
Email of student							
Ethnicity							
Disability	Disability?		Registered Disabled?		Support required?		
	Yes	No	Yes	No	Yes	No	

I wish to enrol the above individuals on the Pharmacy Complete Understanding Health Improvement Level 2 Award distance-learning course and will be responsible for invigilating the RSPH formal assessment in-pharmacy. I understand that the assessment must be requested and completed by 14 October 2017 and the assessment returned to us by 21 October 2017. Ensure you sign the Data Protection consent before returning.

Signature	
Pharmacist / Registered Technician's name	
GPhC number	
Date	

Data Protection consent:

Please note we would like to support your team member directly and will contact them regularly by email and possibly phone to encourage their learning.

Under UK and European Data Protection legislation, data from which living individuals can be identified are classed as 'personal data'. The handling of personal data must comply with legal requirements covering such things as the way in which this information is acquired, how it is processed and the extent to which it is disclosed or transferred to others.

Pharmacy Complete needs to store data about you and your course progress.

The data you provide on this form will be used by Pharmacy Complete for administrative and statistical purposes. By submitting your personal data, you are giving your consent for it to be used for these purposes. It will be used in accordance with the relevant legislation, including the Data Protection Act 1998. If you have any questions about the use of the data collected here or other personal information, please contact Pharmacy Complete on 01962 828710.

Please fill in this form and return it to Pharmacy Complete to consent to us storing your data electronically.

I hereby give my consent to the storage of personal information about me and my course progress. I understand that this information may remain available and in storage after I have finished my training.

Name of candidate (1)	
Signature of candidate	
Date	
Name of candidate (2)	
Signature of candidate	
Date	

Name of invigilator	
Signature of invigilator	
Registration number	
Date	

Thank you and we hope you enjoy your learning. Do contact one of us at the Centre if you need any further assistance.