

Real-life story - Julie Horslen

Julie had been interested in medicine since she was young. Some of her family members worked for the NHS and she always loved hearing about their work helping patients.



Julie Horslen Pharmacist

Employer or university Prestwood Pharmacy

Salary range Unknown

How I got into the role

I really enjoyed science at school, particularly chemistry and biology, and I was keen to help others so decided that pharmacy would be a good way to apply my interest in science.

In the 1980s not many universities offered pharmacy as a course, but the University of Aston in Birmingham had a vibrant cancer research department which captured my interests and that is where I chose to study for my BSc.

I started working at an independent community pharmacy where I completed my pre-registration training. I took on a lot of responsibility straight away, and continued to learn a great deal about business management, customer service and medicines.

I worked for several community pharmacies after that, and even completed more formal management training for a larger pharmacy chain. I then became a locum myself, which provided a very flexible working arrangement - vital for me since I had started a family.

My next job was working as a clinical pharmacist in a job share at Wycombe General Hospital. There was a larger community of pharmacists there to engage with which was exciting, and I also completed a clinical diploma during my time there. In time I returned to locum work, as it was there that I was able to have more direct contact with patients. In 2000 I had the opportunity to buy a pharmacy from a previous employer of mine, an opportunity which I was quick to take up!

What I do

I work closely with my local NHS trust and feel that pharmacy is more integrated with the rest of the health providers as a result.

The services we offer have increased too. We now offer emergency contraception, Chlamydia testing, a stop smoking service, flu vaccinations and blood pressure testing ? all of which are greatly received.

The new medicines service we now offer is another successful service. Research shows that 30-50% of patients who start a new medication for long term conditions like asthma or high blood pressure are not taken correctly.?

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The best bits and challenges

There have been many changes since I took ownership of my own pharmacy. The biggest change was when the NHS introduced a new pharmacy contract in 2005. The most significant changes this brought were the addition of new services that pharmacists could formally provide to customers. These services include medicines use reviews, where patients can talk through their medicines with the pharmacist to get a better understanding of why they have been prescribed them and how to get the most out of them.

I had a patient who was prescribed an inhaler for asthma. After a week they told me the new inhaler wasn't working correctly. On further questioning I realised that the patient was also taking a non-steroidal anti-inflammatory (NSAID) they had bought over the counter for a knee condition. It was this drug that was making the patient wheezy, not that the inhaler was failing, and, once I changed the patient's pain relief medication, the wheeziness ceased, and the inhaler was no longer necessary.

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