Qualification Unit

This unit forms part of a regulated qualification.

Unit Title: Operational Planning, Resources and Budgeting

Unit Reference Number: L/652/4203

Level: Five (5)

Credit Value: 6

Minimum Guided Learning Hours: 40

Learning Outcome (The Learner will):	Assessment Criterion (The Learner can):
1. Understand operational planning principles and requirements within pharmaceutical technical services	1.1 Evaluate the purpose and components of operational planning within pharmaceutical technical services
	1.2 Evaluate approaches to demand forecasting, capacity planning and workflow optimisation
	1.3 Assess operational risks and their implications for service delivery
	1.4 Evaluate the contribution of operational planning to service continuity and resilience
2. Be able to plan and coordinate resources within pharmaceutical technical services	2.1 Assess staffing requirements against operational demand and competency needs
	2.2 Evaluate equipment availability, utilisation and maintenance requirements to support operational planning
	2.3 Develop resource arrangements to support the effective management of materials and supplies
	2.4 Produce a resource plan that balances operational requirements with quality, safety and efficiency
3. Be able to apply budgeting and financial management principles within pharmaceutical technical services	3.1 Interpret budgetary and financial information relevant to pharmaceutical technical services
	3.2 Analyse operational costs and identify factors influencing financial performance

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	3.3	Evaluate opportunities to improve cost-effectiveness without compromising quality, safety or regulatory compliance
	3.4	Develop budgetary recommendations informed by operational and financial evidence
4. Be able to contribute to operational improvement and service optimisation	4.1	Analyse operational performance information to identify improvement opportunities
	4.2	Apply appropriate improvement methodologies to develop an operational improvement proposal
	4.3	Evaluate the potential or actual impact of an operational improvement initiative
	4.4	4.4 Communicate operational priorities and improvement recommendations to relevant stakeholders

Indicative Content	
LO1	1.1 must include operational objectives; service and production requirements; planning timescales; interdependencies between activities, resources and performance; relationship between operational planning, quality, safety and regulatory compliance. 1.2 must include demand forecasting; capacity and workload assessment; workflow mapping; identification of bottlenecks and constraints; evaluation of approaches to improving operational efficiency. Other examples include demand and capacity modelling, workload analysis and process flow mapping. 1.3 must include identification and assessment of operational risks; potential effects on staffing, equipment, materials, workflow and service delivery; selection of proportionate risk controls. Other examples include equipment failures, staff shortages, supply interruptions and changes in service demand. 1.4 must include business continuity planning; operational dependencies; contingency arrangements; prioritisation of critical activities; maintenance of quality and regulatory compliance during disruption.
LO2	2.1 must include staffing levels; workload requirements; skill mix; competence and training requirements; identification of staffing gaps or constraints; implications for safe and effective service delivery. Other examples include workforce plans, competency matrices, shift arrangements and workload projections. 2.2 must include equipment capacity and availability; utilisation; planned maintenance; equipment lifecycle considerations; implications of equipment constraints for operational performance and service continuity. 2.3 must include material and consumable requirements; stock availability; inventory control; supplier and supply-chain risks; measures to maintain

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	continuity of supply and minimise waste. Other examples include stock-level reviews, reorder arrangements, expiry-date management and contingency supply planning. 2.4 must include identification and prioritisation of staffing, equipment and material requirements; resource constraints; allocation or scheduling proposals; justification of decisions; consideration of quality, safety, compliance and operational efficiency.
LO3	3.1 must include budget structures and cycles; cost centres; capital and revenue expenditure; financial forecasting; interpretation of relevant financial reports and budgetary information. 3.2 must include identification and analysis of cost drivers; budget variance; resource utilisation; financial implications of waste, rework and inefficiencies. Other examples include staffing costs, consumables, equipment maintenance, rejected products and production losses. 3.3 must include assessment of cost-saving or efficiency opportunities; cost-benefit considerations; impact on operational performance, product quality and patient safety; justification of financially and operationally appropriate recommendations. 3.4 must include interpretation of budgetary requirements and financial information; identification of resource priorities; development of justified budgetary proposals; consideration of affordability, financial governance and monitoring arrangements.
LO4	4.1 must include evaluation of operational data; identification of inefficiencies, bottlenecks and performance concerns; use of relevant measures and quality indicators; prioritisation of improvement needs. Other examples include throughput, turnaround times, resource utilisation, waste, service delays and quality performance indicators. 4.2 must include selection and application of suitable improvement methods; analysis of the identified problem; development of proportionate improvement actions; consideration of implementation requirements. Other examples include Plan–Do–Check–Act (PDCA), Lean principles, process mapping and waste-reduction approaches. 4.3 must include assessment of anticipated or achieved outcomes; relevant performance and quality measures; potential unintended consequences; implications for efficiency, compliance, quality and service delivery; identification of further improvement needs. 4.4 must include identification of stakeholder information needs; clear communication of operational priorities, resource implications and proposed changes; justification of recommendations using relevant evidence; consideration of feedback and implementation responsibilities.

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Assessment Requirements

Assessment must demonstrate the application of operational planning, resource management, budgeting and service improvement knowledge and skills within pharmaceutical manufacturing, aseptic services or pharmacy technical services environments.

Learners must demonstrate Level 5 analytical and evaluative capability, including the ability to interpret operational and financial information, assess resource requirements, evaluate risks and develop justified recommendations.

LO2, LO3 and LO4 require evidence of applied skills. Learners must produce resource and budgetary recommendations and apply appropriate operational improvement approaches.

Assessment may draw on authentic workplace activities or realistic scenarios supported by suitable operational, resource and financial information.

Learners are not required to hold formal budgetary authority, manage staff, approve expenditure or independently implement organisational changes.

The qualification does not confer occupational competence or professional management authority in its own right.

Assessment guidance

Evidence may include:

- Evaluations of operational planning arrangements
- Demand and capacity analyses
- Workflow maps and bottleneck assessments
- Operational risk assessments
- Staffing and competency requirements analyses
- Equipment utilisation and maintenance reviews
- Materials and stock management plans
- Integrated resource plans
- Budget analyses and variance reports
- Cost-effectiveness evaluations
- Operational improvement proposals
- Performance monitoring and improvement evaluations
- Presentations or communications to relevant stakeholders
- Professional discussions supported by technical evidence

LO1 – Operational planning

Learners should evaluate operational planning approaches within a realistic pharmaceutical technical services context.

Assessment should include consideration of demand, capacity, workflow and operational risks, together with the relationship between planning, quality and regulatory compliance.

Learners should demonstrate how operational arrangements can maintain service continuity during disruption.

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LO2 – Resource management

Learners must assess staffing, equipment and material requirements and develop a resource plan for a defined operational context.

The assessment should provide sufficient information to require consideration of competing demands, resource constraints and operational priorities.

Learners should justify the proposed arrangements and demonstrate how these support effective and compliant service delivery.

Actual responsibility for staffing decisions, procurement or resource allocation is not required.

LO3 – Budgeting and financial management

Learners must interpret financial information and develop justified budgetary recommendations.

The assessment should include realistic financial data, such as budget reports, projected costs, resource expenditure or variance information.

Learners should consider financial efficiency alongside quality, patient safety and regulatory requirements.

For AC 3.4, the learner may produce recommendations for a budget or resource allocation decision rather than an entire departmental budget.

LO4 – Operational improvement

Learners must analyse operational performance information and develop an improvement proposal using an appropriate methodology.

The assessment should require consideration of measurable outcomes and potential effects on service efficiency, quality and compliance.

However, assessment should require learners to consider how the proposed change would be implemented and communicate their recommendations to appropriate stakeholders.

Actual implementation evidence may be used where available.

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