



Independent
prescribing
course

University of Cumbria

Report of a reaccreditation event

June 2019

Event summary and conclusions

Provider	University of Cumbria
Course	Independent prescribing programme
Event type	Reaccreditation
Event date	12 June 2019
Reaccreditation period	September 2019 – September 2022
Relevant standards	GPhC education and training standards for pharmacist independent prescribers, January 2019
Outcome	Approval The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the pharmacist independent prescribing programme provided by the University of Cumbria should be reaccredited for a further period of three years.
Conditions	There were no conditions.
Standing conditions	Please refer to Appendix 1
Recommendations	No recommendations were made
Maximum number of all students per cohort:	36
Number of pharmacist students per cohort:	5-20 (30 maximum in London)
Number of cohorts per academic year:	Five
Registrar decision	Following the event, the Registrar of the GPhC accepted the accreditation team's recommendation and approved the reaccreditation of the programme for a further period of 3 years.
Key contact (provider)	Claire Callaghan, Senior Lecturer, Programme Lead Non-Medical Prescribing Programmes
Reaccreditation team	Professor Chris Langley (event Chair), Professor of Pharmacy Law & Practice and Head of the School of Pharmacy, Aston University; Associate Dean, Taught Programmes, School of Life and Health Sciences. Mrs Susan Bradford, Non-Executive Director, South Western Ambulance Service NHS Foundation Trust, Solicitor (non-practising)

	Professor Andy Husband, Head of School and Professor of Clinical Pharmacy, Newcastle University
GPhC representative	Mrs Philippa McSimpson, Quality Assurance Officer, GPhC
Rapporteur	Mrs Jane Smith, Chief Executive Officer, European Association for Cancer Research

Key findings

Part 1 – learning outcomes

During the event the team reviewed all 32 learning outcomes relating to the independent prescribing course. To gain additional assurance the team also tested a sample of six learning outcomes during a separate meeting with the provider (see ‘learning outcomes tested at the event’ below) and was satisfied that all 32 learning outcomes would be met during the course to the level required by the GPhC standards. Please see **appendix 2** of this report for the detailed list of learning outcomes.

Learning outcomes tested at the event

4	Demonstrate appropriate history-taking techniques through effective consultation skills
	Level: ▶ Does
Accreditation team’s commentary	
<p>The provider explained that during induction all students attend a session on the consultation which outlines different consultation models, communication skills and red flags. Students are expected to engage with this aspect early on as it provides the foundation for much of the course. Later in the course, some clinical skills sessions are delivered specifically to pharmacists.</p> <p>All students do an early piece of work on consultation skills in which they are required to demonstrate their understanding as well as their competence. This learning outcome is tested summatively at the Does level during the period of learning in practice and in the university-based skills assessment.</p> <p>The teaching and assessment requirements of the learning outcome are met.</p>	
6	Support individuals to make informed choices that respect people’s preferences
	Level: ▶ Does
Accreditation team’s commentary	
<p>This learning outcome is covered in consultation skills sessions and in sessions on shared decision-making. It is also covered in teaching about the legal aspects of prescribing. Students are taught to understand the importance of ensuring that they have all the information that they need in order to prescribe safely. For example, in sessions on adverse drug reactions, students are told about the need to find out about any medications or herbal remedies that patients may have recently stopped taking, as well as those they are currently taking. The need to ensure that appropriate information is given to patients about using their medications is also covered.</p> <p>The learning outcome is assessed at the Does level.</p> <p>The teaching and assessment requirements of the learning outcome are met.</p>	

7	Demonstrate a critical understanding of their own role and the role of others in multi-professional teams
	Level: ▶ Does
Accreditation team's commentary	
<p>The provider told the team that students have taught sessions on scenarios they might encounter in practice in their prescribing role. The multidisciplinary nature of the course is an advantage in delivering this learning outcome; students are able to learn from each other and from staff who also have a variety of professional backgrounds. Students are prepared for supplementary prescribing roles which can form part of a wider clinical management plan and are taught that they need to be legally and professionally aware of the roles and responsibilities of the healthcare team.</p> <p>The learning outcome is assessed through the portfolio and during the period of learning in practice.</p> <p>The teaching and assessment requirements of the learning outcome are met.</p>	
10	Recognise and manage factors that may influence prescribing decisions
	Level: ▶ Does
Accreditation team's commentary	
<p>The provider stated that this learning outcome is very broad and is covered throughout the course. In consultation skills sessions the importance of listening to the patient and determining their preferences is underlined. In pharmacology sessions, students are taught to look at different patient groups and to note that prescribing decisions will vary accordingly, for example for children or the elderly. In legal sessions, the issue of off-licence medicines and the preference to use licensed products is covered, along with the need for a compelling evidence base if guidance is not followed and the need to make cost-effective prescribing decisions.</p> <p>The learning outcome is assessed through the portfolio and in the practical skills assessment when students are asked to justify their prescribing decision.</p> <p>The teaching and assessment requirements of the learning outcome are met.</p>	
19	Demonstrate clinical and diagnostic skills in clinical setting appropriate to their scope of practice
	Level: ▶ Does
Accreditation team's commentary	
<p>The provider explained that at the point of application, students are asked to declare their scope of practice. Throughout the course they are encouraged to develop a small personal formulary related to this scope of practice. They also keep a detailed log of their observations and their practise of clinical skills which is submitted in advance of their skills assessment. The assessment is then tailored to assess the student's skills in a setting appropriate to their scope of practice.</p> <p>The team asked if the provider had lacked the expertise needed to assess skills in a particular area of practice and was told that this had not yet been an issue. If it arises in the future, then the provider will call on expertise available across the University.</p>	

The teaching and assessment requirements of the learning outcome are met.

31 Demonstrate appropriate consultation skills to get information from individuals who are either unaware of or guarded about their health needs, to inform safe prescribing

Level: ▶ Does

Accreditation team's commentary

The team noted that there is some overlap between this learning outcome and others tested at the event. The provider explained that students are taught to make every contact with a patient count. In addition to the consultation skills teaching described at Learning Outcomes 4 and 6, students are taught the importance of explaining to patients the consequences of not taking prescribed medication.

The teaching and assessment requirements of the learning outcome are met.

Key findings

Part 2 - Standards for the education and training of pharmacist independent prescribers

1 - Selection and entry requirements

The team was satisfied that all six criteria relating to the selection and entry requirements will be met. Two criteria require minor amendments. (See Appendix 3 for criteria)

The programme has been reviewed in response to the new GPhC standards and has been mapped to the standards and revalidated by the University.

Admissions criteria are made clear to potential applicants and are applied consistently and appropriately. All entry requirements are met before the start date of a course on which an applicant is enrolled. The provider contacts applicants to discuss their application if they have concerns or queries. However, in many cases, the admission criteria make it clear to students whether they will be eligible for the course; students not meeting the criteria tend not to apply.

The suitability and relevance of pharmacist applicant's clinical and therapeutic experience is reviewed by pharmacist members of the course team. Very few independently-funded students apply to join the course. For those applicants who do not have a line manager, the provider asks for a professional reference and one from a pharmacist. Applicants tend to contact the provider to discuss their application in advance which allows for options to be explored on a case-by-case basis.

The provider's website (although not the programme specification nor the application form) states that evidence of successful study at Level 6 within six years of the course start date is required for admission to the programme. Many pharmacists will not meet this requirement, but the provider explained that this is a standard University requirement and that the course team has flexibility to accept students who do not meet this requirement as long they have evidence of having completed CPD or training courses.

The programme specification will be updated to reflect the fact that pharmacists registered with the PSNI are eligible to apply. This is already made clear in the application form. In addition, the programme specification states that "Applicants with a record of fitness to practise issues are not eligible for this course". This has been written with conduct issues in mind, but could be interpreted as unnecessarily excluding those with health issues, so the wording will be reviewed.

2 - Equality, diversity and inclusion

The team was satisfied that all five criteria relating to the equality, diversity and inclusion will be met.

The principles of equality and diversity are taken into account in course design and delivery. The University has an equality and diversity training package for staff, and the provider ensures that equality and diversity issues are addressed in the course material. For example, in pharmacology classes medicines containing ingredients that might not be acceptable for some patients are used, and students are encouraged to consider these issues when prescribing.

The student population in Cumbria reflects the local population, which is predominantly white, although students do work in some of the larger cities which are more ethnically diverse, as is the London student population.

Adjustments are made to course delivery to help students with specific needs to meet the learning outcomes, but all students must meet the learning outcomes.

3 - Management, resources and capacity

The team was satisfied that all six criteria relating to the management, resources and capacity will be met.

The course is delivered by the same staff at each of the three locations at which it is taught; while this requires flexibility from staff, the University is committed to supporting staff to travel, to ensure consistency and parity. The facilities available at each of the three sites are comparable. Parity across the online environment is also maintained via reviews of material in operational team meetings.

Staff members are clear about their roles and are supported to develop. All new members of staff are supported to take a teaching qualification. The risks of staff absence have been mitigated with the appointment of a second pharmacist to the course team. In addition, other staff members across the University have previously worked on prescribing programmes and are available to step in to support the course if required. The students who the team spoke to said that members of staff are available when needed and answer queries promptly. Students have access to appropriate resources and said that the balance of face-to-face and online teaching is good.

The commitment of the DPP to supervise the development of the student's clinical practice with patients, and to assess and certify the student's achievement of competence is confirmed as part of the application process. Further information regarding the role they are undertaking is provided in the webfolio resource provided to DPPs prior to the course start date.

Interactions between the provider and DPPs are robust. The provider offers two evening workshops for DPPs during the induction week. Not all DPPs attend as many are experienced in the role. Those who do attend are engaged and make positive contributions. In London the majority of DPPs are based in primary care and the provider has advised students to learn from other members of the primary care team, rather than relying solely on their DPP.

4 - Monitoring, review and evaluation

The team was satisfied that all six criteria relating to the monitoring, review and evaluation will be met.

The programme sits within the Department of Nursing, Health and Professional Practice. It is subject to an annual monitoring process, consisting of a report prepared by the programme team which is reviewed at Departmental University level. The report contains an action plan to ensure that issues are addressed in a timely manner. External Examiners' reports are provided to each Module Assessment Board to which student assessed work is presented and also inform the annual monitoring report.

The team noted that the failure rates in the annual monitoring reports are quite high and asked the

provider to comment. The provider said that the majority of those who fail are nurses or paramedics who are more likely to struggle with the academic component of the course. Pharmacists find the reflective aspects of the course more challenging but are supported with an early piece of written work in this area which is formatively assessed and which provides them with feedback to help them improve. The students that the team spoke to said that formative assessment feedback was helpful to them and was provided promptly.

The programme team uses student feedback in the continuing development of the programme. Student feedback is received through programme evaluation, Programme Partnership meetings and also the wider network of NMP Leads within the north-west region. Some students have raised concerns about feedback and assessments and the provider will better manage students' expectations about the timelines for feedback. The provider will also signpost feedback more comprehensively. When feedback is given it is bespoke to the individual student's piece of work.

The programme is regularly updated to take account of changes in legislation or practice guidelines. For example, a new session on controlled drugs has recently been introduced as a result of changes in legislation. Future planned changes include the move to DPPs; the provider will prepare for that broader role so that DPPs are fully informed and supported, especially if they are taking on the role for the first time.

5 - Course design and delivery

The team was satisfied that all ten criteria relating to the course design and delivery will be met. One criterion requires minor amendments.

The course is delivered via a mix of face-to-face teaching equivalent to 26 days, directed online learning and through the period of learning in practice. It is expected that this will be supported by private and self-directed study including the development of a personal formulary, a practice log and clinical skills practice record, enabling students to build on their background knowledge and experience and acquire competence in prescribing in the clinical context in which they will be prescribing. Overall learning time is estimated at 400 hours of learning.

100% attendance is expected at taught sessions. Non-attendance is followed up and reviewed on a case-by-case basis depending on the student's circumstances and on which session has been missed. If students miss online work, then they are required to catch up.

Formative assessment is provided through in-class or online activities such as presenting draft assignments, work in progress, and writing prescriptions. Formative assessment is also an integral part of learning in practice with review of competency achievement supported by conduct of a supervised clinical consultation undertaken at the mid-point of the course.

Summative feedback is brief for students who pass, but more detailed for those who fail. When students who fail receive their provisional result they are invited to meet their personal tutor and once the marks confirmed they are given a date for resubmitting their work. All fail outcomes are reviewed by the external examiner. If students fail a second assessment, there is no further resit opportunity, but students can apply to re-enrol on the programme, subject to the approval of the programme team. The team would discuss the reasons for failure with the student and would ensure that they had funding and DPP support in place before re-admitting a student.

The provider has embedded a range of service user feedback resources in the curriculum including the introduction of the 'Hello, my name is...' national campaign and the 'me and my medicines' initiative to promote the sharing of information about medicines in order that medicines can be used more effectively. Student views on the document produced for use by 'me and my medicines' have been mixed, but it has been useful in prompting discussions about patient involvement.

Students are reminded during Induction of their role and accountability as a registrant of the GPhC whilst a student on the programme and are expected to adhere to the standards for pharmacy professionals (GPhC, 2017) in addition to the University's Student Code of Conduct and Adjudication Procedures.

The submission contains references to the GPhC 'Standards of Professional Practice and Behaviour'. This is not a GPhC document and references should be corrected to the GPhC's 'Standards for Pharmacy Professionals'.

6 - Learning in practice

The team was satisfied that all five criteria relating to the learning in practice will be met.

Supervised learning in practice time is an integral part of the programme and runs concurrently with theoretical learning throughout the programme. Pharmacist independent prescribers in training are expected to complete 90 hours of learning in practice. Students are responsible for identifying a DPP who will support their learning in practice. DPPs must demonstrate that they meet the criteria for eligibility as a DPP and complete a self-assessed practice placement audit.

Although more than one person may be involved in supervising students in practice, the DPP will assume primary responsibility for the supervision, and is responsible for signing off competence. Therefore, the DPP is required to support the learning and assessment of students for a minimum of 30 hours.

7 - Assessment

The team was satisfied all eleven criteria relating to the assessment will be met. One criterion requires minor amendments.

The course is assessed via:

- a practical skills assessment which requires the completion of a record of learning and the demonstration of competence in practice. The competencies are those identified by the Royal Pharmaceutical Society (2016) as the competencies required by all prescribers for safe and effective prescribing practice. This assessment takes place in the context of the student's own clinical practice;
- a set exercise which consists of a practical demonstration of prescribing skills and viva voce assessment. The oral aspect of the assessment looks for an understanding of the ethical and legal issues associated with the consultation and gives the student an opportunity to justify their prescribing decision. This assessment is undertaken in the context of the quality assurance processes of the University; and
- a portfolio. The written portfolio requires the demonstration of knowledge and understanding applied to the practice area for each of the Programme Learning Outcomes. The portfolio requires students to complete clearly defined tasks in a structured format. Well defined academic criteria are used to assess specific sessions and there is internal discussion and review to ensure parity, as well as a formal process for moderating and second marking.

All components of assessment must be completed successfully, normally within one year. In exceptional circumstances, completion of the programme is permitted within a two-year period.

The team asked how the provider quality assures the assessments undertaken by the DPP and was told that this is achieved partly at the point of application by ensuring that the DPP is suitable and meets the eligibility criteria. The provider has regular contact with DPPs and links the student's experience in practice to their in-house assessment by using the practice experience to inform the development of the

practical skills assessment. The team suggested that assessment decisions would be strengthened with the addition of a further University assessment to ensure consistency across the student cohort.

The submission states that DPPs with a concern about a student's progress are 'encouraged' to contact the provider. The provider will review this wording to clarify that DPPs *must* contact the provider if they have concerns.

8 - Support and the learning experience

The team was satisfied that all four criteria relating the support and the learning experience will be met.

Students are supported to achieve the learning outcomes. The students who the team spoke to said that they felt supported by academic staff and by their DPPs. Although there are no scheduled meetings with personal tutors, they are available when needed. Students said they would know how to raise concerns about the course or about any aspect of their period of learning in practice.

Staff and DPPs are made aware of the GPhC's guidance on tutoring and supervising pharmacy professionals in training.

9 - Designated prescribing practitioners

The team was satisfied that all five criteria relating to the designated prescribing practitioners will be met.

The entry criteria for the programme identify that "Applicants must have an identified Designated Prescribing Practitioner (DPP) who meets the criteria for eligibility as a DPP. Currently, eligibility is as for a Designated Medical Practitioner (DMP) (National Prescribing Centre, 2005)". If the provider wishes to use other prescribers as DPPs once the RPS guidance is published later in 2019, they must submit a request to the GPhC and will be asked to provide a submission to demonstrate how the programme meets standard 9.

The provider is in the process of establishing an approach to receive feedback from students at the end-point of their course regarding the performance of DPPs as supervisors and assessors. The provider is currently engaged with the North West Non-Medical Prescribing Education Group to explore an agreed approach to the provision of feedback in the region.

Appendix 1 - Standing conditions

The following are standing conditions of accreditation and apply to all providers:

1. The record and report include other comments from the team, and providers are required to take all comments into account as part of the accreditation process. The provider must confirm to the GPhC that required amendments have been made.
2. The provider must respond to the definitive version of the record and report within three months of receipt. The summary report, along with the provider's response, will be published on the GPhC's website for the duration of the accreditation period.
3. The provider must seek approval from the GPhC for any substantial change (or proposed change) which is, or has the potential to be, material to the delivery of an accredited course. This includes, but is not limited to:
 - a. the content, structure or delivery of the accredited programme;
 - b. ownership or management structure of the institution;
 - c. resources and/or funding;
 - d. student numbers and/or admissions policy;
 - e. any existing partnership, licensing or franchise agreement;
 - f. staff associated with the programme.
4. The provider must make students and potential students aware that successful completion of an accredited course is not a guarantee of annotation or of future employment as a pharmacist independent prescriber.
5. The provider must make students and potential students aware of the existence and website address where they can view the GPhC's accreditation reports and the timescales for future accreditations.
6. Whenever required to do so by the GPhC, providers must give such information and assistance as the GPhC may reasonably require in connection with the exercise of its functions. Any information in relation to fulfilment of these standing conditions must be provided in a proactive and timely manner.

Appendix 2 – Learning outcomes

Independent prescribing programme learning outcomes

Domain - Person-centred care

Upon successful completion of the programme, a pharmacist independent prescriber will be able to:

1 Recognise the psychological and physical impact of prescribing decisions on people

Level: ► *Knows how*

2 Understand and meet their legal responsibilities under equality and human rights legislation and respect diversity and cultural differences

Level: ► *Does*

3 Take responsibility for ensuring that person-centred care is not compromised because of personal values and beliefs

Level: ► *Does*

4 Demonstrate appropriate history-taking techniques through effective consultation skills

Level: ► *Does*

5 Demonstrate and understanding of the role of the prescriber in working in partnership with people who may not be able to make fully informed decisions about their health needs

Level: ► *Shows how*

6 Support individuals to make informed choices that respect people's preferences

Level: ► *Does*

Domain - Professionalism

Upon successful completion of the programme, a pharmacist independent prescriber will be able to:

7 Demonstrate a critical understanding of their own role and the role of others in multi-professional teams

Level: ► *Does*

8 Recognise their own role as a responsible and accountable prescriber who understands legal and ethical implications

Level: ► *Does*

9 Apply relevant legislation and ethical frameworks related to prescribing, including remote prescribing and the handling and sharing of confidential information

Level: ► *Shows how*

10 Recognise and manage factors that may influence prescribing decisions

Level: ► *Does*

11 Apply local, regional and national guidelines, policies and legislation related to healthcare

Level: ► *Does*

12 Reflect on and develop their own prescribing practice to ensure it represents current best practice

Level: ► *Does*

13 Apply an understanding of health economics when making prescribing decisions

Level: ► *Shows how*

14 Understand the clinical governance of the prescriber, who may also be in a position to supply medicines to people

Level: ► *Knows how*

15 Recognise other professionals' practice and raise concerns related to inappropriate or unsafe prescribing by other prescribers

Level: ► *Shows how*

Domain - Professional knowledge and skills

Upon successful completion of the programme, a pharmacist independent prescriber will be able to:

16 Apply evidence-based decision-making in all aspects of prescribing

Level: ► *Does*

17 Manage the risks and benefits associated with prescribing decisions

Level: ► *Does*

18 Demonstrate the application of pharmacology in relation to their own prescribing practice

Level: ► *Does*

19 Demonstrate clinical and diagnostic skills in clinical setting appropriate to their scope of practice

Level: ► *Does*

20 Create and maintain appropriate records which ensure safe and effective care and align with relevant legislation

Level: ► *Does*

21 Identify relevant investigations and interpret results and data in their prescribing practice

Level: ► *Does*

22 Utilise current and emerging systems and technologies in safe prescribing

Level: ► *Does*

23 Identify and respond to people's needs when prescribing remotely

Level: ► *Shows how*

24 Apply the principles of effective monitoring and management to improve patient outcomes

Level: ► *Does*

25 Recognise and manage prescribing and medication errors

Level: ► *Shows how*

26 Recognise the public health issues in promoting health as part of their prescribing practice

Level: ► *Does*

Domain – Collaboration

Upon successful completion of the programme, a pharmacist independent prescriber will be able to:

27 Work collaboratively with others to optimise individuals' care, understanding their roles in the prescribing process

Level: ► *Does*

28 Recognise their own role and responsibilities, and those of others, in safeguarding children and vulnerable adults

Level: ► *Knows how*

29 Recognise when and where to refer people appropriately

Level: ► *Shows how*

30 Collaborate with people to encourage them to take responsibility for managing care

Level: ► *Does*

31 Demonstrate appropriate consultation skills to get information from individuals who are either unaware of or guarded about their health needs, to inform safe prescribing

Level: ► *Does*

32 Recognise when to seek guidance from another member of the healthcare team or an appropriate authority

Level: ► *Does*

GPhC accreditation criteria for pharmacist independent prescribing programmes

Standard 1 – Selection and entry requirements

Selection processes must be open, clear and unbiased, comply with relevant legislation and ensure that applicants meet course entry requirements.

- 1.1 Selection criteria must be clear and must include meeting all the entry requirements in these standards.
- 1.2 Selectors must apply the selection criteria consistently, in an unbiased way and in a way that meets the requirement of relevant legislation.
- 1.3 Course providers must provide clear guidance on the type of experience a pharmacist should have before applying to the course. This guidance must be available to applicants before they make an application.
- 1.4 Course providers, when considering applications, must evaluate the suitability and relevance of the applicant's clinical and therapeutic experience (which the pharmacist must demonstrate in their application) against the requirements of the course.
- 1.5 A course provider must fully evaluate each application and decide if the applicant has sufficient and relevant experience to begin a course to train as an independent prescriber. If the course provider decides that there is insufficient relevant experience, they must reject the application, clearly setting out the reasons behind this decision.
- 1.6 Course providers must ensure that all the entry requirements have been met before the start date of a course on which an applicant is enrolled.

Standard 2 – Equality, diversity and inclusion

All aspects of pharmacist independent prescribing education and training must be based on and promote principles of equality and diversity and comply with all relevant legislation.

- 2.1 The principles of equality and diversity must be embedded in, and promoted through, course design and delivery.
- 2.2 Equality and diversity data must be used when designing and delivering courses and the learning experience.
- 2.3 Reasonable adjustments must be made to course delivery to help pharmacist independent prescribers in training with specific needs to meet the learning outcomes.
- 2.4 Teaching, learning and assessment can be modified to meet 2.3 but learning outcomes cannot.
- 2.5 Course design and delivery must ensure pharmacist independent prescribers in training understand their legal responsibilities under equality and human rights legislation.

Standard 3 – Management, resources and capacity

Courses must be planned and maintained through transparent processes which must show who is accountable for what. The education and training facilities, infrastructure, leadership, staffing and staff support must be sufficient to deliver the course.

- 3.1** All courses must be supported by a defined management plan which must include:
 - a schedule of roles and responsibilities in learning, teaching and practice environments;
 - lines of accountability in the learning, teaching and practice environments;
 - defined structures and processes to manage delivery, and
 - processes for identifying and managing risk
- 3.2** There must be agreements in place outlining the roles and responsibilities of everyone involved in delivering a course.
- 3.3** Learning agreements must be in place with the pharmacist independent prescriber in training covering all learning, teaching and practice environments outlining roles and responsibilities and lines of accountability.
- 3.4** In all learning, teaching and practice environments, there must be:
 - appropriately qualified and experienced professionals
 - enough staff from relevant professions to deliver the course and support the learning of pharmacist independent prescribers in training
 - sufficient resources available to deliver the course
 - facilities that are fit for purpose, and
 - access to appropriate learning resources
- 3.5** Everyone involved in managing and delivering the course must understand their role and must be supported to carry out their work effectively.
- 3.6** Each pharmacist independent prescriber in training must be supported as a learner in learning and practice environments. There must be mechanisms in place for designated prescribing practitioners to liaise with course providers regularly about the progress of a pharmacist independent prescriber in training in learning and practice environments.

Standard 4 – Monitoring, review and evaluation

The quality of a course must be monitored, reviewed and evaluated in a systematic and developmental way.

- 4.1** All relevant aspects of a course must be monitored, reviewed and evaluated systematically. When issues are identified they must be documented and addressed within agreed timescales.
- 4.2** There must be a quality management structure in place that sets out procedures for

monitoring and evaluation, with timescales, including who is responsible for reporting, review and taking action where appropriate.

- 4.3 There must be procedures in place to monitor and evaluate the standard of teaching, learning and assessment to ensure that quality is maintained across all learning environments.
- 4.4 Course monitoring and review must take into account the health and care environment to ensure that courses remain up to date and reflect current practice.
- 4.5 Feedback from pharmacist independent prescribers in training must be embedded in monitoring, review and evaluation processes.
- 4.6 The providing institution must have validated the course before applying for GPhC accreditation.

Standard 5 – Course design and delivery

Courses must develop the behaviours, required skills, knowledge and understanding to meet the outcomes in Part 1 of these standards through a coherent teaching and learning strategy.

- 5.1 There must be a course teaching and learning strategy which sets out how pharmacist independent prescribers in training will achieve the outcomes in Part 1 of these standards.
- 5.2 Courses must be designed and delivered in a way which integrates and builds on the pre-existing knowledge, skills and practice of pharmacists in training as pharmacist independent prescribers.
- 5.3 All course providers must have pharmacy professionals, including pharmacist independent prescribers, involved in the design and the delivery of the course.
- 5.4 Course providers must engage with a range of stakeholders, including patients, the public, course commissioners and employers, to refine the design and delivery of the course.
- 5.5 Courses must be updated when there are significant changes in practice, to ensure they are current.
- 5.6 Pharmacist independent prescribers in training must only undertake tasks in which they are competent, or are learning under supervision to be competent, so that patient safety is not compromised.
- 5.7 Pharmacist independent prescribers in training must be supervised using agreed mechanisms in all clinical practice environments to ensure safe person-centred care is delivered at all times.
- 5.8 Course regulations must be appropriate for a course that leads to professional annotation. That is, they must prioritise patient safety, safe and effective practice and clinical skills.
- 5.9 There must be systems in place to ensure that pharmacist independent prescribers in training understand what fitness to practise mechanisms apply to them. All course

providers and employers must have procedures to deal with fitness to practise concerns.

- 5.10** Causes for concern about a pharmacist independent prescriber in training, designated prescribing practitioners or the learning environment must be addressed as soon as possible and in such a way that the cause for concern is dealt with.

Standard 6 – Learning in practice

Courses must enable the pharmacist independent prescriber in training to develop the behaviours and the required skills, knowledge and understanding to meet the outcomes in Part 1 of these standards in learning in practice settings.

- 6.1** Part of the course for pharmacist independent prescribers in training must take place in clinical settings with direct access to patients – these are ‘learning in practice’ settings.
- 6.2** In the learning in practice settings identified in 6.1, pharmacist independent prescribers in training will prescribe under the supervision of a designated prescribing practitioner.
- 6.3** If more than one person is involved in supervising a pharmacist independent prescriber in training, one independent prescriber must assume primary responsibility for their supervision. That person will be the designated prescribing practitioner for the pharmacist independent prescriber in training.
- 6.4** Course providers must approve the designated prescribing practitioner and agree that they have the core competencies to carry out the role effectively.
- 6.5** The designated prescribing practitioner is responsible for signing off a pharmacist independent prescriber in training as being competent as a pharmacist independent prescriber.

Standard 7 – Assessment

Courses must have an assessment strategy which assesses the professional behaviours and the required skills, knowledge and understanding to meet the outcomes in Part 1 of these standards. The assessment strategy must assess whether the practice of a pharmacist independent prescriber in training is safe and clinically appropriate.

- 7.1** Courses must have an assessment strategy which ensures that assessment is robust, reliable and valid.
- 7.2** Course providers are responsible for ensuring that all learning outcomes are assessed fully, using appropriate methods, and that teaching and learning is aligned with assessment.
- 7.3** Patient safety must be paramount at all times, and the assessment strategy must assess whether a pharmacist independent prescriber in training is practising safely.
- 7.4** Monitoring systems must be in place in all learning environments. The systems must assess the progress of a pharmacist independent prescriber in training toward meeting the learning outcomes in Part 1 of these standards. They must ensure that the practice of a pharmacist independent prescriber in training is safe at all times.

- 7.5** Agreements must be in place between course providers and designated prescribing practitioners that describe the roles and responsibilities in the assessment of pharmacist independent prescribers in training.
- 7.6** Assessments must be carried out by appropriately trained and qualified people who are competent to assess the performance of pharmacist independent prescribers in training.
- 7.7** Irrespective of their location, all assessments must be quality assured by course providers.
- 7.8** Pharmacist independent prescribers in training must receive regular, appropriate and timely feedback on their performance to support their development as learners.
- 7.9** Assessment regulations must be appropriate for a course that leads to professional annotation. On completion of the course, pharmacist independent prescribers must demonstrate that their practice is safe and prioritises patient safety.
- 7.10** Pharmacist independent prescribers in training must pass all summative assessments before being signed off.
- 7.11** As a result of 7.10, and on patient safety grounds, compensation or condonation are not allowed on courses for pharmacist independent prescribers in training.

Standard 8 – Support and the learning experience

Pharmacist independent prescribers in training must be supported in all learning environments to develop as learners during their training.

- 8.1** A range of mechanisms must be in place to support trainees to achieve the learning outcomes in Part 1 of these standards, including:
- induction
 - effective supervision
 - an appropriate and realistic workload
 - personal and academic support, and
 - access to resources
- 8.2** There must be mechanisms in place for pharmacist independent prescribers in training to meet regularly with their designated prescribing practitioner and others to discuss and document their progress as learners.
- 8.3** There must be clear procedures for pharmacist independent prescribers in training to raise concerns. Any concerns must be dealt with promptly, with documented action taken where appropriate.
- 8.4** Everyone supporting pharmacist independent prescribers in training must take into account the GPhC's guidance on tutoring for pharmacists and pharmacy technicians in their work as appropriate.

Standard 9 – Designated prescribing practitioners

Designated prescribing practitioners must be fit to undertake that role and must have appropriate training and experience.

- 9.1** Course providers must have appropriate mechanisms for ensuring that designated prescribing practitioners are fit to be the supervisors of pharmacist independent prescribers in training.
- 9.2** Prospective designated prescribing practitioners must have:
- active prescribing competence applicable to the areas in which they will be supervising
 - appropriate patient-facing clinical and diagnostic skills
 - supported or supervised other healthcare professionals, and
 - the ability to assess patient-facing clinical and diagnostic skills
- 9.3** Course providers must provide training for designated prescribing practitioners on:
- the pharmacist independent prescribing role
 - the course for pharmacist independent prescribers in training on which they will be working, including its learning outcomes
 - the role of designated prescribing practitioners in the course
 - assessing the performance of pharmacist independent prescribers in training
 - giving feedback to pharmacist independent prescribers in training
 - supporting pharmacist independent prescribers in training, and
 - raising concerns
- 9.4** Course providers must support designated prescribing practitioners when they are acting in that role.
- 9.5** Course providers must provide designated prescribing practitioners with feedback about their performance as prescribing supervisors and arrange extra training, support and development as necessary.

Pre-requisites for entry to a pharmacist independent prescriber programme

- Before enrolling pharmacists on a pharmacist independent prescribing programme, programme providers must ensure applicants meet our pre-requisites for entry.
- Pharmacists must identify an area of practice in which they will learn to become an independent prescriber. It must be an area in which they have worked and understand.
- Pharmacists must also be able to demonstrate they have relevant clinical/therapeutic experience, to support their prescribing training before they enter onto a pharmacist independent prescribing programme. The suitability and relevance of their experience will be verified as part of the application process.
- Programme providers must ensure they set robust entry requirements that both meet their own programme requirements to pass the programme as well as that of the GPhC.
- Pharmacists must have at least two years' appropriate patient-orientated experience in a relevant UK practice setting post registration