General Pharmaceutical Council

Aston University, Overseas Pharmacists' Assessment Programme (OSPAP) interim event report, April 2022



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Event summary and conclusions

Provider	Aston University
Course	Overseas Pharmacists' Assessment Programme (OSPAP)
Event type	Interim
Event date	7 April 2022
Current accreditation period	2021/22 - 2023/24
Relevant standards	Standards for the education and training of non-EEA pharmacists wanting to register in GB, May 2011
Outcome	Continued accreditation confirmed
	The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the OSPAP provided by Aston University should continue to be approved until 2023/24, at which point the provision will be accredited against the new Standards for the education and training of non-EEA pharmacists (date and title TBA).
	Approval is for a maximum intake of 40 students per academic year, based on the planned additional resource that was discussed. Should the provider wish to exceed this number in the future, a change request will need to be submitted for review by the GPhC.
Conditions	There were no conditions
Standing conditions	The standing conditions of accreditation can be found <u>here</u> .
Recommendations	There were no recommendations
Registrar decision	Following the event, the Registrar of the GPhC accepted the accreditation team's recommendation and approved the continued accreditation of the programme until 2023/24.
Key contact (provider)	Rabia Ahmed, Programme Director OSPAP
Course provider representative	Professor Chris Langley, Deputy Dean (External) of the College of Health and Life Sciences and Head of Aston Pharmacy School*
attendees	Mark Brennan, Deputy Head of Aston Pharmacy School*
	Dr Joe Bush, Associate Head (Education), Aston Pharmacy School*
	Rabia Ahmed, Programme Director, OSPAP*
	Gagandeep Degun, Programme Director MPharm

	Natalie Lewis, Education Operations Manager
	Emma Smith, Lecturer, Pharmacy Practice
	Sima Hassan, Lecturer, Pharmacy Practice
	Anna Durkin, Lecturer, Pharmacy Practice
	Debbie Kemp, Lecturer, Pharmacy Practice
	Dr Wendy Leadbeater, Senior Lecturer PPD and IPE
	Naveed Iqbal, Lecturer, Clinical Pharmacy
	Dr Raj Badhan, Lecturer in Pharmacokinetics
	Dr Affiong lyire, Lecturer in Pharmaceutics
	The team also met with a group of seven OSPAP students and graduates
Accreditation team	Professor Steve Howard (Team Leader) Independent Healthcare Consultant, Non- Executive Director, writer and presenter*
	Dr Andrew Sturrock (team member - academic) Principal Lecturer and MPharm Programme Leader, University of Sunderland
	Professor Cate Whittlesea (team member - academic) Professor of Pharmacy Practice, Head of the Research Department of Practice and Policy and Associate Director of Clinical Education, University College London
	Dr Hayley Wickens (team member - pharmacist) Consultant Pharmacist, Genomics and Pharmacogenomics, Central and South Genomic Medicine Service Alliance
	Alexander Moore (team member - pharmacist, newly qualified) Senior Lecturer in Clinical Pharmacy, University of Sunderland and primary care pharmacist
	Liz Harlaar (team member - lay) Independent business consultant
GPhC representative	Chris McKendrick, Senior Quality Assurance Officer (Education) General Pharmaceutical Council*
Rapporteur	Ian Marshall, Proprietor, Caldarvan Research (Educational and Writing Services); Emeritus Professor of Pharmacology, University of Strathclyde
	I

^{*}also attended pre-event meeting on 18 March 2022

Introduction

Role of the GPhC

The General Pharmaceutical Council (GPhC) is the statutory regulator for pharmacists and pharmacy technicians and is the accrediting body for pharmacy education in Great Britain. The GPhC is responsible for setting standards and approving education and training courses which form part of the pathway towards registration for pharmacists. The UK qualification required as part of the pathway to registration for pharmacists who have qualified overseas (non-EEA) is a GPhC-accredited Overseas Pharmacists' Assessment Programme (OSPAP), which is a one-year post graduate diploma.

The GPhC's right to check the standards of pharmacy qualifications leading to annotation and registration as a pharmacist is the Pharmacy Order 2010. It requires the GPhC to 'approve' courses by appointing 'visitors' (accreditors) to report to the GPhC's Council on the 'nature, content and quality' of education as well as 'any other matters' the Council may require. This accreditation event was carried out in accordance with the GPhC's 2011 OSPAP Accreditation Methodology and the course was reviewed against the GPhC's 2011 education standards 'Standards for the education and training of non-EEA Pharmacists wanting to register in Great Britain.'

The powers and obligations of the GPhC in relation to the accreditation of pharmacy education are legislated in the Pharmacy Order 2010. For more information, visit: http://www.legislation.gov.uk/uksi/2010/231/contents/made

Background

The OSPAP commenced at Aston University in October 2004 and was last reaccredited in 2019. On that occasion the team learned that it was the intention to implement an evolved OSPAP course in 2020. Based on this, the then team agreed to recommend to the Registrar of the GPhC to extend the accreditation of the previous iteration of the OSPAP course until September 2020. It also recommended that the OSPAP programme provided by the University should be reaccredited for a further period of three years, subject to one condition. The condition was that the University must provide to the GPhC a detailed curriculum and delivery plan of the 'OSPAP 2020' course by the end of the 2019 calendar year. This was to meet standard 5. This was because the GPhC acknowledged that the University required more time to develop the detail of the new OSPAP curriculum. The present submission indicated that this plan had been implemented in accordance with the above timeline. The revised OSPAP was delivered for the first time, as accredited, in the 2020-21 academic year. The only variations from the planned delivery were those imposed by the effect of the COVID-19 pandemic.

Documentation

Prior to the event, the provider submitted documentation to the GPhC in line with the agreed timescales.

- Appendix 1 Admission and progression data for the last three cohorts
- Appendix 2 Critical evaluation of the progression data in Appendix 1
- Appendix 3 OSPAP Risk Register
- Appendix 4 APS Staff List and vacancies
- Appendix 5 MPharm and OSPAP Assessment Strategy 2021-2022
- Appendix 6 Aston University Equality and Diversity Policy
- Appendix 7 Module Specification for 2021-22
- Appendix 8 Update on meeting condition 12-19 to 05-20
- Appendix 9 Assessment Map 2021-22
- Appendix 10 Organisational and Programme Structures

The documentation was reviewed by the accreditation team and it was deemed to be satisfactory to provide a basis for discussion.

Pre-event

In advance of the main event, a pre-event meeting took place via videoconference on 18 March 2022. The purpose of the pre-event meeting was to prepare for the event, allow the GPhC and the University to ask any questions or seek clarification, and to finalise arrangements for the event.

The event

The event was held via videoconference between Aston University and the GPhC on 7 April 2022 and comprised meetings between the GPhC team and representatives of the OSPAP programme. The accreditation team also met with students currently undertaking the OSPAP along with some OSPAP graduates.

Declarations of interest

There were no declarations of interest.

Schedule

Day 0: Accreditation team private meetings, 6 April 2022

13:30 – 16:00	Private meeting of the accreditation team and GPhC representative	
	Discuss provision and agree final questions and allocation	

Day 1: OSPAP interim event, 7 April 2022

09:00 - 09:30	Private meeting of the accreditation team
09:30 - 11:30	Progress meeting Presentation to cover: Course updates, changes and developments since the last event: Any significant changes or developments Temporary changes due to the pandemic Staffing Restructure Finance and budget Academic regulations Other areas requested by the accreditation team (shared at pre-event) Questions and discussions focused on Standards 1,2,7,8 and 9
11:30 – 12:00	Break and private meeting of the accreditation team
12:00 – 12:55	Admission, progression, monitoring and support meeting Questions and discussions focused on Standards 3, 4, 5 and 6
12:55 – 13:15	Private meeting of the accreditation team
13:15 – 13:45	Lunch break
13:45 – 14:45	Meeting with OSPAP students
14:45 – 15:00	Break
15:00 – 15:35	Learning outcomes session This session focused on Standards 5 and 10
15:35 – 16:30	Private meeting of the accreditation team
16:40 – 16:45	Deliver outcome to programme provider (provider joins zoom meeting at 16:40)

Key findings - Standards for non-EEA pharmacists OSPAP programme providers

Standard 1: Patient and public safety

Standard continues to be met? Yes

No □

The submitted documentation explained that, as at the previous event in 2019, there is a student briefing in Welcome Week. This includes details of mandatory training, workbooks supporting patientfacing sessions, and Fitness to Practise processes. These all continue to be in place for patient safety. In addition, the University has responded to the changing guidance for NHS providers. This is to ensure that students comply with appropriate testing and vaccination policies to safeguard students, patients and members of the public. The current COVID-19 vaccination mandate coordinated by Health Education England is being implemented across the OSPAP programme. School and College policy is constantly updated in line with government policy. The team was told that students are prepared for practice placements via mandatory training with a range of policies, including professional dress, infection control, information governance, pregnancy etcetera. Fit testing is required by some trusts. Supervision is always by registered professionals. Students are told to act always within their competence and to say if they do not know how to undertake a task. Student queries tend to be mainly about dress relating to religious observance; such queries are dealt with well in advance of the placements. There are mechanisms for both students and placement providers to raise concerns. Although the pandemic limited the placement opportunities, professionals visited the School, there were simulated activities and a hospital visit.

The team was told that any changes in University regulations due to the COVID-19 pandemic that would not be acceptable to regulators were not included in the OSPAP regulations. Thus, there had been no compromise with respect to patient safety.

Standard 2: Monitoring, review and evaluation of an OSPAP

Standard continues to be met? Yes

No □

Since the last accreditation event there has been a change from Annual Monitoring to a policy of Continual Monitoring and Enhancement. Programme Level Reviews take place at a minimum of four points throughout the academic year, aligned to release of key datasets. The team was told that points of reflection specific to the OSPAP have been set up. At each review point, the Programme Director generates an Enhancement and Development Action Plan. This is proportionate to the outcome of the review against the performance thresholds. At College level all programmes undertake Continual Monitoring and Enhancement. The University Learning and Teaching Committee has responsibility for reviewing all Enhancement and Development Action Plans. The team was told that it was now near the end of the first cycle of the Continual Monitoring and Enhancement system and that it appeared to be working well. The programme team considered that through constant review it was sufficiently agile to be able to respond quickly to any student needs, for example, familiarity with the virtual learning environment.

The team was told that the degree class of OSPAP students was not critical but that experience of previous practice was highly relevant. The team learned that students have a significant role in the progression and development of the OSPAP. Thus, there are two student representatives from the

OSPAP cohort who engage meaningfully in the committee activities of the School. Feedback from students was said to be cohort-specific, depending on the origin of the students.

Standard 3: Equality, diversity and fairness

Standard continues to be met? Yes ☑ No ☐

The OSPAP Programme Director is one of the College EDI committee representatives and also a member of the University EDI committee. Across the institution there is a range of inclusion and diversity events and campaigns; students are involved in organising and developing events through the Student Union and its societies.

Within the OSPAP curriculum students undertake e-Learning for Healthcare (e-LfH) online training on Equality Diversity and Human Rights as part of their mandatory training within a few weeks of starting the programme. This is supported under the Transition and Contextualisation theme which covers prejudice, discrimination, diversity, and equality. There is a detailed examination of the Equality Act 2010, a summary of the implications of the Rehabilitation of Offenders Act, and a discussion on how to deal with complaints. Students also have an interprofessional learning session with Aston medical, audiology and ophthalmology students on equality and diversity. Sessions explore intercultural communication bringing together experiences of OSPAP students with the UK higher education and healthcare context.

Statistics are gathered for progression and award on the basis of gender, ethnicity, age and disability. The information is available to Programme Directors through a centralised system and is available for use by programme staff during the annual programme review process. The team was told that although data are extracted centrally, the OSPAP cohort is unique demographically, with a low white population and a predominance of female students. The OSPAP and MPharm programmes have broadly similar outcomes in terms of student performance.

Students interviewed told the team that no one within the OSPAP group of students had been marginalised and that all were included in the activities of the programme. The programme staff members were described as being very supportive, especially in terms of advice on the mode of dress for hospital placements.

Standard 4: Selection of students

Standard continues to be met? Yes **☒** No **☐**

Information about application to the OSPAP is provided on the University website. This Includes signposting to the GPhC's information for potential OSPAP applicants. The programme's webpage contains information on fitness to practise requirements, and guidance for potential applicants in choosing between the Postgraduate Diploma and MSc variants, in particular in relation to visa status. Students must possess a pharmacy degree and approval from the GPhC regarding eligibility to undertake an OSPAP. The team was told that the School does not necessarily interview applicants. Because the programme is over-subscribed there is no real selection process, but rather a first come first served process until full capacity is reached. Students must meet English language requirements appropriate to OSPAP study. Eligibility for professional registration overseas is taken as evidence of numeracy capability sufficient for entry to the programme. Within the programme, at an early point, diagnostic testing is used to identify any students who require extra support in a particular area.

There is a competence assessment in calculations during the programme at a level equivalent to that used in the GPhC's Registration Assessment. The team was told that OSPAP students are encouraged to be vaccinated against COVID-19 as per the GPhC recommendation and that students are generally compliant with this requirement.

The University Admissions Team works full-time on student admissions and is supported by the OSPAP Programme Lead. Staff training and development on major changes to the admissions process, to relevant legislation or to policy is co-ordinated centrally. The School verifies the good character of students who are also asked to complete and return a Fitness to Practise Self-Declaration to highlight any potential health or conduct issues, along with a health screening questionnaire. Following the COVID-19 vaccine mandate from Health Education England, full COVID-19 vaccination is a requirement for all students, unless medically exempt. This is being rolled out across both OSPAP and MPharm.

Students interviewed expressed concern that several of the cohort had missed the deadline for Oriel applications, particularly those hoping to undertake their foundation training in hospital pharmacy. Recognising that this is a problem common to all OSPAP providers, the team was told that this is a timing issue and that information for applicants on the website must be current. The team was told that although obtaining hospital foundation training placements was difficult, the OSPAP students from the School had never in the past had an issue getting pre-registration training positions. The School provides support to students through interview practice and links to search for positions outside the Oriel system.

Standard 5: Curriculum delivery and student experience

Standard continues to be met? Yes ■ No □

The team was told that OSPAP 2020 is aligned strongly to the final stage of the University's MPharm curriculum. The submission explained that the OSPAP is a 120-credit model with full integration of teaching and assessment, with patient-centred care including relevant science in therapeutic areas. The teaching was described as being research-informed with research from the School being filtered into the programme. To alleviate problems associated with overload for OSPAP students, there is no formal teaching on Fridays to allow students to catch up with the taught material. Students interviewed described the programme as being intense but extremely useful. Students and OSPAP graduates praised the design and delivery of the programme and appreciated its greater clinical nature than the courses they had taken previously.

The team learned that there are two overarching elements of the programme each with a range of content-specific themes. The Transition and Contextualisation element which represents one-third of the programme deals with the transition from practice as overseas pharmacists to the OSPAP and onwards to foundation training and UK practice. Contextualisation prepares students for the context of UK healthcare, including legislative, regulatory and governance frameworks for care under the NHS. The remaining two thirds of the programme is Integrated Person-Centred Care which covers the themes of drugs to market; enteral and parenteral drug delivery; personalisation of pharmaceuticals; inflammation and immunity; musculoskeletal and CNS; cardiovascular, respiratory and renal; and GI and endocrine systems. The latter element is designed to build on the prior experience and education of the OSPAP students.

The team noted that the use of a modified Angoff method had been introduced for OSCEs in 2020-21 and was told that its introduction had not changed pass rates, although some OSPAP students had

required a second attempt to pass. Most OSPAP students had not experienced flipped classrooms or OSCEs before and they were described as challenging initially for them, but had turned out well. The use of virtual OSCEs during the pandemic had proved beneficial organisationally, allowing students to be rotated more easily than in the in-person situation. Students told the team that they had been concerned initially about online assessments but that mock assessments had allowed them to practise and get feedback. The team noted that around 20% of OSPAP students had not completed the programme in 2020-21 but was told that these students were now trailing in the current year. Both OSPAP and MPharm deferring students can re-take the relevant assessment at the next opportunity, with reassessment organised as early as possible. The team was told that all summative assessments will take place on campus in 2021-22 except the viva voce examination. Thus, online assessments will be invigilated on campus. The team was also told that the portfolio activities had been extended to mirror the GPhC-style system, along with clear guidance, careful structuring, and formative assessment and feedback.

Attendance at classes is monitored by a tap-in system, allowing tutors to track their tutees. This was described as not being an issue with OSPAP students who are highly engaged with the programme. The team was told that engagement covers not only attendance, but interaction with the library and virtual learning environment.

OSPAP students engage in interprofessional learning alongside medical, optometry and audiology students in an interprofessional equality, diversity and inclusion event which is assessed through the student portfolio. They also learn with students in the final Stage of the MPharm programme to deepen and consolidate their existing clinical knowledge and skills to manage complex conditions in patients with diverse medical and social histories. Students interviewed told the team that they would have appreciated more contact with the MPharm students. There are three binding horizontal strands of Collaborative Practice, Person-Centred Care, and Deliberative Practice, the last to develop thoughtful, considerate healthcare practitioners, provide cohesion in the programme. The OSPAP recognises the scientific strengths that OSPAP students generally bring as part of their existing qualification and integrates this with the evidence base underpinning population health and clinical care. In addition, there is a focus on the latest developments in drugs and formulation science, so that students are fully up to date at the point of graduation.

The team was told that the virtual delivery during the COVID-19 pandemic had been helpful for OSPAP students, with the University helping students by providing equipment, including laptops. It is planned to retain asynchronous lectures although there will also be synchronous lectures. Simulation patient contact activities during the pandemic had also proved useful in preparing students for in-person patient contact. Nevertheless, a common theme in the interview with students was that students would have appreciated more placements with the opportunity to interact with real patients.

Standard 6: Support and development for students

Standard continues to be met? Yes **☒** No **☐**

The team was told that the current OSPAP student cohort is 35 and that the OSPAP Programme Director operates an open door policy and knows all the students well. Students interviewed praised highly the support offered. They had found the previous experience of the Programme Director as an OSPAP student extremely useful. OSPAP students are inducted into the programme during Welcome Week and through the early part of the course. They are given an overview of the OSPAP including what to expect and what is expected of them, and an introduction to the Library and library

resources. Students interviewed also appreciated advice on careers and immigration issues. There is discussion of professional Identity in relation to the GPhC's Standards for Pharmacy Professionals. Diagnostic testing enables students to self-identify areas of strength and weakness to help focus learning. Students who require additional support are encouraged to attend sessions that develop IT skills. Students are signposted to the Centre for English Language and Communication for support with academic writing early in the programme.

OSPAP student support includes Personal Tutor support by registered pharmacists, access to academic and professional role models, continuing professional development, careers and employability, including ongoing support for alumni, and visa support. Students told the team that tutors were supportive and available for consultation at short notice. Portfolio activities have been extended to a full GPhC-style revalidation exercise that provides structure to the personal tutoring support. Students write a personal development plan, which forms the basis of initial discussions with their Personal Tutor around learning and development needs.

Standard 7: Support and development for academic staff

Standard continues to be met? Yes **☒** No **☐**

The documentation stated that the University provides a range of training courses for staff. Staff members book onto courses through the staff portal and a number of courses are mandatory These include fire safety, equality, diversity and inclusion, and GDPR training. The mandatory courses include assessment elements with minimum performance targets and the team was told that renewal training takes place when required. Line managers are able to view staff participation records for the University training courses via the University's HR management system. A "My development conversation" has been rolled out across the University which was described as useful for the development of new staff members, and for senior staff to fit in to the College needs.

Support and development for staff includes support from line managers, balanced workloads taking into account teaching, research, administrative and development needs. There is encouragement to attend relevant conferences, internal and external training opportunities, formal mentoring, and support for early career researchers. All staff members have mandatory HEA requirements. The team learned that the Deputy Head assesses the requirements of new staff, stressing the evidence base for teaching and the importance of peer partner mentorship. It was highlighted that there is not an OSPAP-specific teaching team but that any staff member may teach on the programme. There are recorded sessions on the Oriel process for the benefit of staff and students. The team was told that the single module approach adopted for both the MPharm and the OSPAP has helped to bring staff members together and that the School does not differentiate between pharmacist and non-pharmacist staff.

There has been a restructuring of support for staff development in terms of teaching and learning. The Centre for Learning Innovation and Professional Practice (CLIPP) has been reformed as The Education Team under the leadership of the Pro-Vice-Chancellor for Education. The mission of The Education Team is to enhance students' learning experiences and the working lives of staff through the provision of personal and professional development opportunities, exploitable pedagogic research, and a proactive approach to quality enhancement.

The team was told that none of the workload models tested has been totally successful and that workload is managed through the committee structure and line managers. During the COVID-19 pandemic the University had provided computers and office furniture to staff members working from

home along with training and welfare support. Line managers had adopted a flexible approach and joint appointment staff members had been released for their NHS work.

Standard 8: Management of an OSPAP

Standard continues to be met? Yes **⋈** No **□**

The OSPAP Programme Director is a GPhC-registered pharmacist with a background in hospital pharmacy with experience in the design, organisation and delivery of both undergraduate and postgraduate pharmacy programmes. The team was told of the comprehensive committee structure in the School, with student representation on most committees. The OSPAP and MPharm have a shared Programme Committee, reflecting the closely integrated nature of the programmes. This is supported by Staff-Student Committees, and the Programme Committee reports to the Pharmacy Education and Students Strategy Committee. The Pharmacy Education and Students Operations Committee comprises line managers and key operational leads for the School and aims to oversee operational support for education and student support activities in the Pharmacy School.

Standard 9: Resources and capacity

Standard continues to be met? Yes ☑ No ☐

The documentation explained that student number intakes to the 2020-2021 academic year remained at the levels required for budgetary stability. Owing to teacher-assessed grades for A-Levels, and the popularity of healthcare programmes at the University, intake numbers to programmes within the College, including the OSPAP, were greater than in previous recent years. Owing to this increase in numbers, and the associated increased income from student fees, the College released funding for three additional posts within the Pharmacy School. This forms part of a current recruitment exercise within the School. The team was told that in addition to the new posts, two new contracts had been agreed for replacements of staff members, with another two at an advanced stage of negotiation. The School is committed to having a suitable number of pharmacists on the staff with the number pharmacists increasing from 27 at the point of the last reaccreditation to 31 currently. There has also been increased capital investment for teaching, including additional clinical simulation facilities due to open later in 2022. The facilities include a high-fidelity acute care simulation room, equipped with recording facilities, a debrief room and control room. In addition, funding will be used to purchase a wide range of other training equipment such as single task trainer simulation equipment for use in a new simulation training facility within the College. Students interviewed agreed that the facilities available to them were more than adequate, including computers, library and available books.

The team was told that the new college structure had allowed a closer relationship with the Aston Medical School. Staff members from the schools work in tandem, for example, in neuroscience workshops. The Medical School has proved very responsive to needs of the Pharmacy School, proving expertise in specific clinical areas. The potential moving forward was stressed, citing sharing expertise and resources on, for example, public health, ethics and prescribing.

Standard 10: Outcomes for non-EEA pharmacists wanting to register in Great Britain

Standard continues to be met? Yes ☑ No ☐

The team was satisfied that all 58 outcomes relating to Standard 10 continue to be delivered at the appropriate level. The team had scrutinised the learning outcomes in discussions with the staff in meeting 4. Rather than examining each of the 58 outcomes, six outcomes (10.1.a, 10.1.c, 10.1.h, 10.2.1.b, 10.2.2.c and 10.2.4.e) were selected for detailed discussion; the Aston University staff members had been informed of the outcomes to be discussed before the meeting. For each of the six outcomes scrutinised the evidence provided by the discussions with the staff gave the team confidence that these outcomes will continue to be met at the required level; the team was confident that all other outcomes will be similarly met. Thus, the team was satisfied that Standard 10 continues to be met.

10.1.a Recognise ethical dilemmas and respond in accordance with relevant codes of conduct (shows how)

The team was told that early on in the programme OSPAP students are introduced to the GPhC Standards for Pharmacy Professionals and key concepts of UK pharmacy. Legal and ethical issues are introduced, exploring barriers that pharmacists feel might exist. Scenarios with respect to consent and confidentiality are discussed, drawing on GPhC standards and guidance. An ethical decision-making tool is used with examples from public health on rationing of services. There is a workshop on negligence and the issue of following the law or not. After the final workshop there is a short written piece before a final viva voce assessment on legal issues and decision-making.

10.1.c Recognise personal health needs, consult and follow the advice of a suitably qualified professional, and protect patients or public from any risk posed by personal health (does)

This learning outcome is discussed early on in the Welcome Week, including fitness to practise issues concerning health. There is engagement with occupational health requirements and screening for vaccinations with respect to attendance at placements where students have to abide by trust rules. The issue of pregnancy during placements is covered. Assessment is through tutor meetings when declarations in student portfolios are examined, along with demonstration of compliance with the learning outcome under supervision in practice.

10.1.h Engage in multidisciplinary teamworking (knows how)

OSPAP students engage in interprofessional learning alongside medical and audiology students in an interprofessional equality, diversity and inclusion event with is assessed through the student portfolio. Students also encounter other healthcare professionals in placement observations of practice and in simulated sessions dealing with other professionals, assessed by OSCE. The team was told that an element of integrated person-centred care includes an element of novel advanced drug delivery, led by research-active staff members. Students in groups of five address and critique statements to answer problems. Students write a care plan for a case-based assessment focussing on how to communicate to other healthcare professionals, for example, nurses or doctors.

10.2.1.b Access and critically evaluate evidence to support safe, rational and cost-effective use of medicines (shows how)

The team was told that OSPAP students already have some experience of this outcome from their previous education or experience. The concept of evidence-based medicine is introduced at library sessions dealing with guidelines and contextualisation. Alongside lectures on decision-making which consider grey evidence, students are supported through undertaking quizzes which builds confidence before engaging with decision-making. The working of the UK system of healthcare is explained as part of fusing the OSPAP students into the UK process. Workshops on the gastrointestinal tract, central nervous system and endocrinology are used to bring the evidence to life, stressing that pharmacists deal with people via a patient-centred approach. Thus, communication has to be audience-specific. In pharmaceutics students examine critical evidence and consider reliability of data through a systematic critical analysis to inform practice. Assessment is by case-based assessments and OSCEs.

10.2.2.c Instruct patients in the safe and effective use of their medicines and devices (shows how)

The team was told that there are 13 medicines supply classes which build on communication skills, including verbal and non-verbal communication. This concentrates on giving the correct information to patients. This is reinforced by avoiding the use of jargon in workshops. The team was told that OSPAP students come to the programme with a range of experiences. Examples of BNF cautions are used in role-play exercises with feedback. There is a visit to a Boots community pharmacy to observe a real-world scenario in which the time aspect of patient communication is highlighted. There are 1:1 sessions with complex prescription items with feedback provide on a group basis. All the above flows into the OSCEs where communication skills, empathy and logic of decision-making are assessed. In addition, there are elements of written communication assessed in the case-based assessments.

10.2.4.e Support the patient in choosing an option by listening and responding to her concerns and respecting their decisions (shows how)

The team was told that the medicines supply sessions involve listening to patients and giving advice or providing a product. This is put into practice in simulated communication classes with actors or staff members acting as patients. Side effects of medicines are discussed along with advice on non-traditional medicines. Lifestyle choices are considered with a debrief at the end of the session. Cultural issues including restricted diets are discussed and the case-based assessment must take into account patient needs. Students can reflect in their portfolio on their decision-making. In this respect it was said that some OSPAP students enter the programme with preconceptions and that it is important to consider balanced decision-making. For example, keeping to the rules versus a more flexible approach. Finally, it was stressed that pharmacists must know the science behind any decisions that are made.

