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## Event summary and conclusions

<table>
<thead>
<tr>
<th><strong>Provider</strong></th>
<th>University of Brighton</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Course</strong></td>
<td>Master of Pharmacy (MPharm) degree</td>
</tr>
<tr>
<td><strong>Event type</strong></td>
<td>Interim</td>
</tr>
<tr>
<td><strong>Event date</strong></td>
<td>9 June 2021</td>
</tr>
<tr>
<td><strong>Current accreditation period</strong></td>
<td>2020/21 - 2022/23</td>
</tr>
<tr>
<td><strong>Relevant standards</strong></td>
<td>Future pharmacists Standards for the initial education and training of pharmacists, May 2011</td>
</tr>
</tbody>
</table>

### Outcome

Continued accreditation confirmed

The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the MPharm degree provided by the University of Brighton should continue to be approved until 2022/23, at which point the provision will be accredited against the Standards for the initial education and training of pharmacists 2021.

### Conditions

There were no conditions.

### Standing conditions

The standing conditions of accreditation can be found [here](#).

### Recommendations

No recommendations were made.

### 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 2022/23.

### Key contact (provider)

Dr Prabal K (Charley) Chatterjee, MPharm Course Leader, Principal Lecturer

### Accreditation team

Professor Chris Langley (Team Leader) Professor of Pharmacy Law & Practice and Head of the School of Pharmacy, Aston University; Deputy Dean, College of Health and Life Sciences

Dr Adam Todd (Team member-academic) Reader in Pharmaceutical Public Health, School of Pharmacy, Newcastle University

Dr Katie Maddock (Team member-academic) Head of School of Pharmacy, Keele University

Mairead Conlon (Team member-pharmacist) Representation Pharmacist for UCA-NI Ltd (Ulster Chemists’ Association) and part-time Community Pharmacist
<table>
<thead>
<tr>
<th>Role</th>
<th>Name and Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team member-pharmacist recently registered</td>
<td>Rebecca Waton&lt;br&gt;Community Pharmacist – MG &amp; AD Burdon Ltd (Cromie Pharmacy), Academic Tutor – Sunderland University</td>
</tr>
<tr>
<td>Team member-lay</td>
<td>Dr Cathy O'Sullivan&lt;br&gt;Workforce Development Consultant</td>
</tr>
<tr>
<td>GPhC representative</td>
<td>Damian Day, Head of Education, GPhC</td>
</tr>
<tr>
<td>Observer</td>
<td>Dr Fran Lloyd&lt;br&gt;(accreditation member in training), Associate Postgraduate Dean, NI Centre for Pharmacy Learning and Development, Queen’s University Belfast</td>
</tr>
<tr>
<td>Rapporteur</td>
<td>Dr Ian Marshall&lt;br&gt;(rapporteur) Proprietor, Caldarvan Research (Educational and Writing Services); Emeritus Professor of Pharmacology, University of Strathclyde</td>
</tr>
</tbody>
</table>

### Introduction

#### Role of the GPhC

The General Pharmaceutical Council (GPhC) is the statutory regulator for pharmacists and pharmacy technicians and registered pharmacies and is the accrediting body for pharmacy education in Great Britain (GB). The GPhC is responsible for setting standards and approving education and training courses which form part of the pathway towards registration for pharmacists. The GB qualification required as part of the pathway to registration as a pharmacist is a GPhC-accredited Master of Pharmacy degree course (MPharm).

This interim event was carried out in accordance with the GPhC’s 2011 *MPPharm Accreditation Methodology* and the course was reviewed against the GPhC’s 2011 education standards *Future Pharmacists: Standards for the initial education and training of pharmacists*.

The GPhC’s right to check the standards of pharmacy qualifications leading to annotation and registration as a pharmacist is the *Pharmacy Order 2010* ([http://www.legislation.gov.uk/uksi/2010/231/contents/made](http://www.legislation.gov.uk/uksi/2010/231/contents/made)). 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.
Background

The MPharm at the University of Brighton is now delivered by the School of Applied Sciences. The MPharm programme was reaccredited for six years in December 2014; there were no conditions or recommendations. An interim event took place on 6-7 March 2018 following which the team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the MPharm degree provided by University of Brighton should continue to be accredited for the remainder of the accreditation period, subject to two conditions. These were that then School of Pharmacy and Biomolecular Sciences was required to

i. monitor progress of all students admitted to the course with qualifications beneath the standard admission criteria, including those admitted through the Foundation Year, and continue to review the admissions policy and its alignment to external indicators. This is to meet criterion 4.2. This was because of the team’s concern about the low entry qualifications specified for the Foundation Year, and the fact that Brighton graduates currently perform relatively poorly in the Registration Assessment.

ii. review its assessment strategy to ensure that it upholds the standards of a professionally accredited course, supports integration, and is based upon best practice in the context of assessment of healthcare professionals; this was to meet criteria 2.1.a, 2.1.b, 5.7, 5.9, 5.10 and 5.11. This was because of a systems failure in the resit assessments in 2017/18 as a result of a range of uncoordinated actions with no clear lines of responsibilities leading to, for example, duplication of examination questions from the main diet, and a lack of scrutiny of the papers both internally and by the external examiner.

In light of these conditions, the accreditation team agreed to revisit the School in the academic year 2018/19 to review the implementation of the changes, especially relating to assessment in the MPharm, as well as in relation to the monitoring of student progress. Accordingly, a monitoring event was held at the University of Brighton on 30 May 2019. The accreditation team agreed to recommend to the Registrar of the GPhC that the MPharm degree provided by the University should continue to be accredited for the remainder of the accreditation period, subject to two conditions and one recommendation. The conditions were:

i) The team noted that a module could be passed with some assessment components being failed, which is compensation by another name. It is a condition that this policy is reviewed and, if it is not changed, a rationale is provided to explain how it contributes to the maintenance of standards on an accredited course leading to registration as a healthcare professional. The University’s attention was drawn to accreditation criterion 5.9, which states: “... as a general principle, all assessments must be passed. This means that condonation, compensation, trailing, extended re-sit opportunities and other remedial measures should be extremely limited, if they are permitted at all ...”. The deadline for notifying the GPhC of the outcome of this condition was 1st December 2019.

The team also remained concerned about student progression through the course. There were also concerns about the potential impact on the School of Pharmacy & Biomolecular Sciences of its possible involvement of the teach-out of the University of Sussex MPharm.
That the admissions strategy, as well as support for and attainment of students, are reviewed in light of low progression metrics, which are high in all years. This condition, which was to meet criterion 4.2, would be considered in depth at the next reaccreditation.

In addition, the Registrar of the GPhC added the following conditions:

(a) Given the atypical entry profile for the 2018-2019 academic year, provide the GPhC with an annual, anonymised breakdown of progression data for each student in this cohort until graduation in 2021-2022. Data must distinguish between students on the B230 MPharm degree and those on the B231 MPharm degree (with integrated foundation year). The annual deadlines would be 1st December (that is, 1st December 2019 for an analysis of the 2018-2019 entry cohort and so on).

(b) As so few students admitted with A levels met the stated grade for the B230 MPharm degree in 2018, provide the GPhC with the University’s policy on MPharm contextual offers and a rationale for why each student who did not meet the stated tariff was admitted. The rationales must be anonymised. This condition is to ensure that accreditation criterion 4.2, that applicants are ‘meeting academic and professional entry requirements’, is being met. The deadline for this was 17th January 2020.

(c) Provide the GPhC with an analysis of the impact admitting so many students on to its B231 MPharm degree (with integrated foundation year) has had and may continue to have on course delivery, particularly student support. This condition is to gauge how accreditation standard 2, ‘Students … must be supported to develop as learners and professionals during their initial education and training’, is being met. The deadline for this is 17th January 2020.

The team recommended additionally that a Brighton-Sussex teach-out lead should attend Sussex events to speak on behalf of the University of Brighton. This related to standard 9 in order to protect the interests of the University of Brighton MPharm students and the teaching staff.

Documentation

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

Appendix 1 – Admissions and Interviewing Policy

Appendix 2 - Aggregate applications data and entry profiles for the last three academic years (including the current academic year)

Appendix 3 - Critical evaluation of the applications data and entry profiles in Appendix 2
Appendix 4 - Aggregate progression data for the three cohorts by: Entry qualification(s), Sex, Age, Ethnicity and Disability

Appendix 5 - Critical evaluation of the applications data and entry profiles in Appendix 4

Appendix 6 – MPharm Risk Register for the Next Two Academic Years

Appendix 7 – MPharm Course Staff List, April 2021

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 by videoconference on 24 May 2021. 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**

Due to the Covid-19 pandemic, the GPhC modified the structure of the event so that it could be held remotely. The event was held via videoconference between the University of Brighton and the GPhC accreditation team on 9 June 2021 and comprised meetings between the GPhC accreditation team and representatives of the MPharm programme.

**Declarations of interest**

Professor Langley told the team that a member of his staff was an external examiner at the University of Brighton.

Rebecca Waton told the team that she works in the same School of Pharmacy as one of the University of Brighton external examiners.

**Schedule**

<table>
<thead>
<tr>
<th>Day 1 – 9 June 2021</th>
<th>Meeting number</th>
<th>Meeting</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>1</td>
<td>Private meeting of the accreditation team</td>
<td>09:00 – 09:30</td>
</tr>
<tr>
<td>2.</td>
<td>2</td>
<td>Progress meeting</td>
<td>09:30 – 11:30</td>
</tr>
<tr>
<td>3.</td>
<td>3</td>
<td>Private meeting of the accreditation team</td>
<td>11:30 – 11:45</td>
</tr>
<tr>
<td>4.</td>
<td>4</td>
<td>Admission, progression, monitoring and support meeting</td>
<td>11:45 – 12:25</td>
</tr>
<tr>
<td>5.</td>
<td>5</td>
<td>Private meeting of the accreditation team</td>
<td>13:30 – 13:45</td>
</tr>
<tr>
<td>6.</td>
<td>6</td>
<td>Significant pedagogical developments presentation</td>
<td>13:45 – 14:25</td>
</tr>
<tr>
<td>7.</td>
<td>7</td>
<td>Student meeting</td>
<td>14:45 – 15:45</td>
</tr>
</tbody>
</table>

To include students in all years of the MPharm
8. Private meeting of the accreditation team 15:45 – 16:45
9. Deliver outcome to programme provider 16:45 – 17:00

Attendees

Course provider

The team met with the following representatives of the University:

<table>
<thead>
<tr>
<th>Name</th>
<th>Designation at the time of accreditation event</th>
<th>Meetings attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Lara Barnes</td>
<td>Senior Lecturer</td>
<td>2, 9</td>
</tr>
<tr>
<td>Dr Charley Chatterjee</td>
<td>Principal Lecturer</td>
<td>2, 4, 6, 9</td>
</tr>
<tr>
<td>Rachel Clarke</td>
<td>Schools Operation Manager</td>
<td>2</td>
</tr>
<tr>
<td>Professor Michael Cross</td>
<td>Visiting Professor</td>
<td>2</td>
</tr>
<tr>
<td>Dr Neil Crooks</td>
<td>Principal Lecturer</td>
<td>9</td>
</tr>
<tr>
<td>Professor Graham Davies</td>
<td>Senior Academic Lead</td>
<td>2, 9</td>
</tr>
<tr>
<td>Mike Ellis-Martin</td>
<td>Senior Lecturer</td>
<td>2, 9</td>
</tr>
<tr>
<td>Dr Stewart Glaspole</td>
<td>Clinical Lecturer</td>
<td>2, 4, 6, 9</td>
</tr>
<tr>
<td>Dr Matt Ingram</td>
<td>Principal Lecturer</td>
<td>2, 4, 9</td>
</tr>
<tr>
<td>Professor Debra Humphris</td>
<td>Vice-Chancellor</td>
<td>2</td>
</tr>
<tr>
<td>Dr Alison Lansley</td>
<td>Principal Lecturer</td>
<td>2, 6, 9</td>
</tr>
<tr>
<td>Professor Andrew Lloyd</td>
<td>Pro-Vice-Chancellor, Academic Operations</td>
<td>2</td>
</tr>
<tr>
<td>Dr Angela Macadam</td>
<td>Associate Dean (Academic Operations)</td>
<td>2, 4, 6, 9</td>
</tr>
<tr>
<td>Ruth Muinde</td>
<td>Student Guidance and Support Tutor</td>
<td>4</td>
</tr>
<tr>
<td>Dr George Olivier</td>
<td>Principal Lecturer</td>
<td>4</td>
</tr>
<tr>
<td>Dr Ananth Pannala</td>
<td>Principal Lecturer</td>
<td>2, 4, 6, 9</td>
</tr>
<tr>
<td>Dr Angelo Pernetta</td>
<td>Associate Dean (Education and Student Experience)</td>
<td>2, 4, 6, 9</td>
</tr>
<tr>
<td>Dr Greg Scutt</td>
<td>Clinical Principal Lecturer</td>
<td>4, 6</td>
</tr>
<tr>
<td>Dr Kirsty Smallbone</td>
<td>Dean, School of Applied Sciences</td>
<td>2, 4, 6, 9</td>
</tr>
<tr>
<td>Professor Martin Smith</td>
<td>Associate Dean (Research and Enterprise)</td>
<td>2</td>
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<tr>
<td>Professor John Smart</td>
<td>Professor of Pharmaceutical Sciences</td>
<td>2, 6, 9</td>
</tr>
<tr>
<td>Helen Watts</td>
<td>Clinical Placements Administrator</td>
<td>2, 9</td>
</tr>
<tr>
<td>Dr Mark Yeoman</td>
<td>Reader</td>
<td>2, 9</td>
</tr>
</tbody>
</table>
Key findings

Standard 1: Patient and public safety

The submission documentation indicated that some fundamental changes have been made to the MPharm course to promote patient and public safety since the monitoring visit in May 2019, including strengthened checks at the recruitment stage. Health checks are carried out by an external occupational health company, allowing the monitoring of applicants’ progress and make decisions on applicants if required. Applicants now have to obtain their DBS/overseas police check during the application process; any convictions, cautions or warnings are flagged to the School for consideration by the admissions tutor and fitness to practise lead. At enrolment students are made aware of the expectations around their behaviour and conduct during the Welcome Week. Students undertake an on-line assessment on the Standards for Pharmacy Professionals and their application every year for the first three years of the MPharm course and must obtain 80% in order to proceed onto the next year. Students are made aware of fitness to practise (FtP) during a lecture in their first week where they are presented with a number of scenarios to exemplify various issues around FtP and professional behaviour. All students are supervised by academic staff when undertaking laboratory/workshop-based activities and during their research project in the final year. When on placement students are supervised by pharmacists, teacher-practitioners or academic staff with relevant clinical expertise. Students undertake mandatory training before placements, including dress code, health and safety, confidentiality and hand-washing. On placements, students have a designated member of practice staff to ensure a safe and supportive environment for learning. The team was told that there is a firm set of guidelines for professional behaviour during placements and OSCEs, with students having to have camera switched on during virtual placements so that staff members could observe their behaviours. The team was told that the teaching team was confident that it could identify any unsafe answers or practice during the COVID-19 pandemic and that the 10-11% fail rate had been within normal boundaries. The team was told that students are informed about plagiarism and the academic misconduct process.

Standard 2: Monitoring, review and evaluation of initial education and training

The submission stated that since the last event in May 2019, several changes have been introduced to the MPharm course, both based on student, staff and stakeholder feedback and in response to issues highlighted by the GPhC. The MPharm Course Leader has overall responsibility for the organisation and running of the course and reports directly to the Dean. Each year of the MPharm course has an Assistant Course Leader with responsibility for the modules within that year. Each module has a Module Leader who has organisational responsibly for that module with regards to timetabling, teaching, assessment and quality assurance, with Case Leaders responsible for the organisation of cases including their associated day-to-day running of lectures, practical classes and workshops. Students are made aware of the University Student Contract which outlines what is expected of students and what will be provided in terms of the quality of teaching, learning and assessment.
Specifically, this covers academic quality and regulations and the rights and responsibilities of students as members of the University. The performance of the course is assessed annually by the School Quality and Standards Committee (SQSC) which reports to the Dean. The University performs periodic review of all courses every 5 years, unless it might be required to perform it sooner for a particular course. The last periodic review for the MPharm course was in September 2017. The course is monitored at various points throughout the academic year to obtain feedback from the students which is collated by Module Leaders who review the feedback and initiate necessary changes. The team queried the reason for the external examiners to have written a collective letter to the University in 2020 and was told that the examiners had struggled to access information that they needed because of technological issues; these issues have now been resolved. The team was told that the performance of the School’s MPharm graduates in the GPhC Registration Examination had been well below the sector average in recent years but that in the March 2021 Registration Examination there had been an 87% pass rate for Brighton graduates, a substantial improvement.

**Standard 3: Equality, diversity and fairness**

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

The submission confirmed that the University adheres to The Equality Act (2010). Course leaders are expected to explore relationships between student admission, performance and progression and ethnic origin, gender, age, etc. within the annual course monitoring and evaluation report and to highlight any emerging issues. All MPharm staff members undertake mandatory equality and diversity training including courses provided by external providers, and all staff members involved in interviews of prospective applicants undertake unconscious bias training. The MPharm course has a focus on designing and developing inclusive modules, delivering accessible and inclusive learning and teaching experiences and creating inclusive assessments; one development of this was the introduction of anonymous marking for coursework to supplement the anonymous marking of exams. Students are also educated on health inequalities throughout the course. The team was told that the School is exploring the decolonisation of the curriculum and is using raising awareness sessions. The team was told that the progression rate over the past two years has improved to high 80/90% and that there have been no discernible differences between different groups of students. Similarly, the number of high degrees awarded has not changed much over the years.

**Standard 4: Selection of students and trainees**

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

Information on applying for the MPharm degree is provided on the University website which includes additional information on mandatory professional requirements, including a satisfactory DBS disclosure and satisfactory health declaration/clearances. The Admissions Tutor and the Deputy take overall responsibility for admissions onto the course and are supported by the University admissions team; the selection process is designed to be open, fair and complies with relevant legislation. It ensures that students are fit to practise at the point of selection. The grade offer of ABB/BBB is made to A-level applicants, which must include at least two sciences, one of which must be chemistry. In addition, applicants must, as a minimum, have GCSE English grade B/5 and GCSE maths grade B/5. The University has a high number of applicants from Access courses applying to join the MPharm; the grade offer is a pass with a minimum 60 credits overall, including 24 credits at distinction in biology
and chemistry and a minimum 45 credits at level 3, with 30 credits at distinction. For international students, the English language requirement for the course is IELTs 7.0 overall with a minimum of 6.5 in all four elements. No recognition is given to prior learning. The team was told that all applicants are interviewed, using values-based decision-making as a recruitment tool; the current online interviewing allows interviews to be conducted at mutually convenient times and at no cost to the applicant. The teaching team opined that applicants that have obtained A-level grades at CCC or equivalent will be able to prosper on the course with appropriate academic support. Applicants who fall below this minimum requirement are instead offered a place on the MPharm with Integrated Foundation Year. The team was told that Pharmacy did not go into Clearing in 2020 and was surprised to learn that some late applicants offering AAA had been directed into the MPharm with Integrated Foundation Year.

Standard 5: Curriculum delivery and student experience

The submission explained that until 2012, the MPharm was structured as a traditional module-based course with some modules shared with other courses such as BSc Pharmaceutical Sciences. Following reaccreditation in December 2014, a new course structure was introduced with the first three years delivered via a case-based approach in which the three major areas of Pharmacy (Pharmaceutical Science, Pharmacy Therapeutics and Pharmacy Practice) are fully integrated with learning spiralling as cases progress both within a year and from year to year. There are now plans to develop the course further over the next year before the next reaccreditation to adapt the MPharm course to the new GPhC IET standards. In each year, cases are taught within three 30-credit modules containing between 2 and 5 cases becoming progressively more complex and challenging as the course progresses. The team was told that the case studies include inspirational talks from local people and that there is a big increase in confidence of the students. There is also a 30-credit Clinical Skills module which includes tutorials, a range of community and hospital placements, completion of logbooks, assessment of calculation skills and clinical skills via OSCEs. From January 2021, the third national lockdown required all teaching activities to be moved on-line, although some lab sessions were run face-to-face with priority being given to training in essential skills. OSCEs, module exams and resits and exam boards continued to be held remotely. The team learned that the placements comprise two half days in community pharmacy, including at Boots Brighton, in Year 1, three half-day clinic visits in Year 2, one week in hospital pharmacy in Year 3 and four days in hospital and three days in community in Year 4. Due to the COVID-19 pandemic, a virtual ward round activity was developed to replace face-to-face clinical placements. However, final year students were able to undertake a placement at a local hospital, on a voluntary basis, where capacity and health and safety requirements were met. The team was also told that most students had received some clinical experience before the lockdown. Satisfactory completion of the first year of study qualifies students for a University Interact award, a counter assistant qualification recognised by the National Pharmacy Association, which also supports employability. In the final year of the course there is a 60-credit Preparing for Practice module which focuses on developing the students’ clinical and problem-solving skills to a level appropriate for pre-registration practice. There is also a 40-credit individual research project and two student-selected 10-credit modules. Interprofessional education (IPE) involves face-to-face learning initiated in Year 1 of the course and culminating in an IPE conference in Year 4 (see Pedagogical Developments 2 below for details). Assessments include coursework, examinations comprising MCQs, SAQs and LAQs in all years through to literature review, dissertation assessment,
poster presentation and *viva voce* based on a research project in the final year. Students must pass clinical skills modules which include OSCEs and calculation assessments before being allowed to progress into the next year of the course; there is a specific numeracy assessment strategy (see Pedagogic Developments 1 below for details). The team learned that the number of OSCE stations has been increased from eight to ten in order to improve reliability and to ensure that learning outcomes are assessed in multiple stations. The OSCEs have been moved online during the pandemic with simulated patients in the University using Microsoft Teams, and including a *viva voce* station. Since 2019, students starting the course must pass all assessed components within a module; condonement, compensation and trailing of compulsory and mandatory modules are not permitted. During the COVID-19 pandemic assessments have been conducted online with time-limited examinations held within a 24-hour period to accommodate students sitting the examinations overseas. The team was told that in 2020 a benchmarking exercise, comparing individual students’ marks with those from the previous year, had been conducted with marks being raised if lower than in the previous year unaffected by COVID-19. Benchmarking will not be carried out in the current year but as part of the University’s Safety Net policy introduced for this academic year, generic mitigation will remain in place for the remainder of the academic year and a Mitigating Circumstances due to Unrepresentative Performance (MCUP) policy has been introduced allowing students to retake any assessments which may have been adversely affected by COVID-19. The team was told that the teaching team is confident that students meet all the learning outcomes, with marks similar to pre-pandemic levels. The team was also told that an algorithm would be used to determine degree classification taking into account the marks of the best 80 of the 120 credits adjusted for credit sizes in each of Years 3 and 4.

**Standard 6: Support and development for students and trainees**

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

As part of the introduction package, the Course Leader provides information specifically for MPharm students such as an introductory video, information and links to resources such as the Royal Pharmaceutical Society and the British Pharmaceutical Students’ Association and the GPhC, and a short task. New students also meet key staff such as the Year 1 ACL, their personal academic tutor and the School Support and Guidance Tutor (SSGT) who provides pastoral care and advice and was highly regarded by students interviewed. The team was told that teaching staff have regular meetings with Year 1 students. As well as University and School sessions, e.g. enrolment, Tier4 visa support, various sessions are organised throughout the induction week allowing new students to meet other students on the course and University. Students interviewed described the overall support they had received during the COVID-19 pandemic as incredible. Throughout the course, support is provided to students via their personal academic tutors who meet them regularly during tutorials and can be e-mailed directly if required. The team was told that there are six to eight students per tutorial group and that group tutorials can be followed up with 1:1 tutorials. Tutorials form part of the Skills Modules in Years 1-3 and the results of exercises undertaken during tutorials are written up and submitted as reflective statements as part of the student’s CPD portfolio. There is an 80% minimum attendance requirement for tutorials and students who do not attend are followed up by tutors; online engagement can be monitored using Panopto and Teams. During the course students can represent the course by being elected as a Student Representative for their year. Three are elected
for each MPharm year including one as a Numeracy Representative. The team was told that students had been concerned about the online OSCEs and that the School had made several videos to explain the process and organised a question and answer session. Students said that they had enjoyed some of the elements of the online teaching and that the recorded material had been particularly useful for commuting students. Students agreed that the changes introduced as a result of the COVID-19 pandemic had been well handled and that the recorded lectures had been particularly helpful and are followed by weekly live sessions. OSCEs and virtual placements were said to have worked well online but students opined that workshops and laboratory sessions worked better on a face-to-face basis. All years had had some opportunity to attend optional face-to-face sessions if they were able.

**Standard 7: Support and development for academic staff and pre-registration tutors**

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

Staff members have an annual Staff Development Review (SDR) with a senior member of academic staff/section lead/line manager which covers the previous year’s activities and plans for the year ahead. All staff members that make a significant contribution to the MPharm are expected to undertake at minimum an experiential visit of half a day a year in a practising pharmacy setting, in order to allow them to contextualise their teaching. Staff members complete mandatory on-line courses in Health and Safety Dignity at Work, Equality and Diversity in Practice, Information Security and the Prevent Duty in Higher Education and Student Wellbeing. New staff members attend an induction workshop and undergo an induction programme with their direct line manager, usually the Subject Lead, and are appointed two mentors from the experienced staff team, one for research and one for teaching for at least the first two years of their appointment. Non-pharmacy staff members will be required to attend an Orientation Workshop where the roles of the pharmacist, code of conduct for pharmacists etc., are explained. In addition, non-pharmacist teaching staff and pharmacists who have not been patient-facing for three years will be required to undertake an experiential visit to either a community pharmacy or to a pharmacy department in a hospital accompanied by a teacher-practitioner. For a normal 1.0FTE, 20 percent of workload is allocated for research and staff members have typically around 120 hours of student contact in an academic year; the workload model and allocation of duties allows time for CPD.

**Standard 8: Management of initial education and training**

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

Since the last reaccreditation event in 2018, a major restructure of the University Schools has been in progress since October 2019 and will be in place for the start of next academic year. From January 2021, the School of Pharmacy and Biomolecular Sciences merged with part of the School of Environment and Technology to form a new School of Applied Sciences containing a range of subject areas including Pharmacy, Biomedical & Molecular Sciences and Geography, Earth & Environment. The Head of School is now identified as the Dean of the School of Applied Sciences, who reports to the Associate Pro-Vice Chancellor (Academic Operations), and the Vice Chancellor. The Dean of the School is assisted in their role by three Associate Deans for Academic Operations, Education and Student Experience, and Research and Enterprise. The team learned that the Pharmacy subject area is in turn divided into three subgroups; Medicines Use, Pharmacology and Microbiology, and Pharmaceutical Sciences. The team was told that the role and appointment of the Academic Director of Pharmacy
who will oversee the day-to-day running of the Pharmacy subject area provision within the School is currently under review; the appointee will sit on the School Academic Board. It is expected that the final structure will be in place by 1 August 2021 in time for the start of the next academic year 2021-2022. The MPharm Course Leader is responsible for the day-to-day running of the course, future planning and working with the GPhC and answers directly to the Associate Dean for Education and Student Experience of the School. The Course Leader is assisted in this role by four ACLs who each look after one year of the course. The ACLs oversee the work of the Module Leaders who, for Years 1-3, monitor the work of Case Leaders. The team agreed that the leadership and provision was much improved from that at the previous few GPhC visits.

**Standard 9: Resources and capacity**

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<th>Standard continues to be met?</th>
<th>Yes ☒</th>
<th>No ☐</th>
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The School has attained its targets for MPharm student numbers since the last accreditation, which together with research grant success, means that it has been relatively insulated from financial pressures and the team was told that its budget is secure. The Vice Chancellor told the team that applications were up across the University and that Pharmacy did not cross-subsidise other areas. Projected student numbers for the 2021-2022 academic year remain healthy and in line with previous years. The team was told that the expectation is that half of the Year 1 cohort will emanate from the 5-year MPharm with Integrated Foundation Year with the other half being direct entries into the 4-year MPharm; overall, 40% of the cohort will be A-level entrants. The new School structure delivers a protected resource allocation model to ensure delivery of the course to the desired standard.

Resource allocation to the School is based on student numbers and the type of course delivered. Income generated above target by recruitment of additional international/full-fee students is retained by the School after deduction of central overheads. Within the School, resource allocation is based on a transparent algorithm based on student numbers and theory/practical split. The course tuition fee set for the MPharm course ensures adequate resource for the programme and additional income generated by the course above target is used to support the course. The current allocations of teaching duties are based on approximately 40 academic staff members involved with teaching the MPharm course; the team was told that the student/staff ratio for the current year was 17.7:1.

Approximately 11 members of staff are UK pharmacy graduates and contribute to tutoring and act as professional mentors. Since the last GPhC event, the team was told that four members of academic staff have left and all have been replaced, along with three part-time staff members having their fractional FTE increased. The team was told that there has been the appointment of a pre-registration year teacher-practitioner to provide support over 3 years from Year 3 Oriel applications through Year 4 and on to MPharm graduate support during pre-registration year in response to the unsatisfactory performance of Brighton MPharm graduates in previous GPhC registration assessments. A new post has also been advertised for a Senior Lecturer in Medicine Use who will lead on the development of prescribing skills and physical assessment in line with the introduction of the new GPhC IET standards this year. The team was told that further developments will include building new links with the Brighton and Sussex University Hospital and NHS Trust, development of a Medicines Reconciliation Project and development of a Dispensing Hub.
**Significant pedagogic developments**

**Example 1: A Numeracy Strategy for MPharm Students**

**Objective**
To improve the performance of Brighton MPharm graduates in the numeracy component of the GPhC registration assessment.

**Pedagogic underpinning**
The overarching pedagogic strategy is one of formative assessment, reflection, action planning and peer support.

**Design**
The approach uses an evidence based Vygotskian method employing the algo-heuristic theory of instruction. All students sit a diagnostic professional numeracy assessment at the start of the year linked to a standard text³. Students receive a performance profile of their strong and weak areas and complete a numeracy action plan which serves as a learning guide for the upcoming year of study.

This action plan is implemented during short 15 min ‘numeracy spots’ during workshops throughout the year. Numeracy quizzes, and videos of example question solutions delivered via My Studies promote further engagement with calculation practice throughout the year. The reflective element of the numeracy action plan is discussed with the student at their end of year OSCE. All students then sit a summative numeracy assessment. These examinations closely match the GPhC paper 1 assessment, and the pass mark is set at 70% for all years (some attenuation of difficulty is achieved using scaffolded help points and question blueprinting). Peer support is encouraged, with students organising study groups to prepare for the examination. Each year has elected numeracy ambassadors, who feedback any concerns or ideas to the numeracy team to further strengthen the strategy.

**Results**
The strategy has significantly improved the 4th year summative numeracy assessment and Oriel results, with a change in Oriel ranking from 26/30 in 18/19 to 17/31 in 19/20. An undergraduate project carried out in 2019, compared how students felt about the effectiveness of the new teaching strategy with previous methods. Almost double the number of 3rd years (new strategy) to 4th years students stated that there was adequate numeracy teaching provided by the School.

**Conclusion**
It is hoped that these improvements will propagate to the GPhC registration assessment results. The numeracy team are committed to continue to drive the strategy, with evidence-based changes where necessary, to embed professional numeracy as a critical skill within each year of the MPharm degree.

The team was told that the numeracy representatives are seen as elevated peers, “More Knowledgeable Others” and are important for the communication between the tutor and different years of the course. The approach was said to give students ownership as a lot of students struggle with numeracy. Scientific and professional (patient outcomes) numeracy are separated.
Example 2: Interprofessional Education for MPharm Students

Objective: Developing Interprofessional Education on the Masters Degree in Pharmacy

Pedagogic underpinning: Interprofessional Education (IPE) is an important component of education and training for all health and social care professionals. Such activities provide opportunities for learning about the roles of other professional groups and their strengths and attributes; its purpose is to promote ‘collaborative practice’ for patient benefit (Framework for Action on Interprofessional Education & Collaborative Practice WHO 2010). The school has developed an IPE programme across the University, using the principles of case (problem)-based learning, adult learning, exchange based learning and the contact hypothesis to underpin our learning programme.

Design: From a project starting in 2013 the school has developed a four-year programme. In year 2018/19 the programme began with the theme of ‘student well-being’ in year 1, then ‘managing a patient’s condition’ in years 2 and 3, onto the ‘service user experience’ in the final year. Year 1 students attended a conference focussed on student wellbeing in education for professional practice. This consisted of a services market stalls (e.g., the Samaritans, Mind, community officers, ‘living library’) and workshops, two of which students could select to attend. In year 2, students worked on case studies in teams of approximately 3 medical and 3 pharmacy students. This is run via an Edublog site to ensure all students can all access the information. Students watch a consultation video that requires individual actions and/or responses prior to their first face-to-face team meeting, where they compare notes. At this point, they also receive results of the patient’s diagnostic tests. Students are given a further two weeks to create the patient’s care plan, continuing discussions virtually, usually via social media such as WhatsApp. Teams present their patient cases and care plan at the second meeting to staff and students from across their year, allowing for wider discussion. In Year 3 the programme runs in a similar way but with more complex cases. In Year 4 there is an IPE conference for all students who are studying on health and social care-related courses consisting of 3-4, one-hour workshops involving ‘service users’, their experiences, and how multidisciplinary team-working can enhance this; there are also further sessions on well-being and resilience. Engagement with the IPE exercise for MPharm students is assessed as part of the CPD entries the IPKAS2 (PY264), IPKAS3 (PY364) and Preparing for Pharmacy Practice (PYM62) modules. Failure to engage or meet deadlines for team decisions counts as coursework absence / non-attendance.

The plan in 2020/21 was affected by lockdown restrictions and this year we focussed on piloting online IPE activities in year 3 and 4, using Microsoft Teams. In the year 3 event we ran case-based learning activities similar to preceding years. In year 4 there will be a virtual conference (April 28th) with workshops together with a plenary lecture. Examples workshops are ‘Engage and Create Dementia training’, ‘Shades of Mental Health’, ‘Young adults with Cancer - Shine Cancer Support’, and Charcot Session. The link to the Year 3 IPE Edublog site is (https://blogs.brighton.ac.uk/ipe3/).

Results: Student feedback and the reflective statements demonstrate that pharmacy students get much from undertaking teamwork in multidisciplinary groups. In their reflections it is clear that they better understand their role in the health and social care team, the roles of others, and how this could affect the patient/service user experience.

Conclusion: The University of Brighton has a well-functioning IPE programme, to be fully resumed after lockdown restrictions are over. Further work will be required to continue developing it in the coming years.
There was some concern about changes at the Medical School and the team was told that the Medical School had withdrawn from the Year 2 IPE. Podiatry and Physiotherapy were said to be enthusiastic to do IPE with MPharm students. The team was told that Pharmacy would like to revert to face-to-face IPE activities but was unsure if and when this could be realised. This will be revisited at a later GPhC visit.

Example 3: Using feedforward to develop clinical decision-making skills

Objective and Pedagogic underpinning

The education of pharmacy students in clinical knowledge and skills has generally adopted a model where feedback on performance is typically provided at a time when students are practising a skill or applying knowledge to a scenario during a workshop or clinical placement. Traditionally, feedback following a summative assessment is limited to reporting a grade or a percentage to a student, with the noted absence of information on how a student can address gaps in their performance. The process of reflecting on performance in an assessment, identifying the required standards and goals, and producing a plan to meet those targets is termed feed-forward.

Design

Over the past five years the school has created a simulated ward round (SWR) assessment where final year students, working in teams, are presented with an acutely unwell simulated patient and have to make a series of clinical interventions to improve their care. As a result of Covid-19 restriction the school has also developed a virtual ward round experience, where clinicians discuss patient cases in small groups, in conjunction with a series of role plays. In teams, students then make decisions about the ongoing management of the patient. In both of these exercises we dedicate a substantial proportion of time to a post-scenario/ post assessment debrief, where the student’s decision-making process is dissected, and mapped against the skill level the school would expect to see in clinical practice. Facilitators, and students then draw up a plan to help students meet those gaps to prepare them for further future assessments, and more importantly, clinical practice.

The school has also recently developed a personalised feedback and feedforward initiative following written examinations in all Year 1, 2 and 3 examinations. The system uses a relational database which aligns individual exam questions to discreet learning outcomes and then brings the student’s marks for each learning outcome together to provide an indication of mastery or achievement of the outcomes. Each student is then sent a personal email in which the structure of the exam is explained, the learning outcomes addressed in the exam are listed and the student’s performance against each learning outcome articulated. The student is also given the cohort average marks for each learning outcome and for the exam as a whole so that they are able to form a judgement of their own performance when compared with standard achieved by their peers. The student’s personal tutor is copied into the email so that they are able to discuss individual performance with their tutees and discuss a development into the future.

Results and conclusions

Students have found both initiatives to be extremely beneficial, and regularly report the SWR to be a highlight of the degree. Data suggest that the feed-forward debriefing sessions in the SWR is beneficial in helping student to develop their own problem-solving and decision-making skills, with a significant increase in scores on a Likert scale following the debrief.
The team was told that all students receive feedback and that the personal tutor is copied in for follow-up with weaker students and module leaders can organise feedback sessions if students request them.