General Pharmaceutical Council

Overseas Pharmacists' Assessment Programme (OSPAP)

University of Brighton

Report of a reaccreditation event
March 2018

Event summary and conclusions

Provider	University of Brighton
Course	Overseas Pharmacists' Assessment Programme (OSPAP)
Event type	Reaccreditation
Event date	7-8 March 2018
Accreditation period	2014/15 – 2020/21
Outcome	Approval with conditions The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the OSPAP provided by the University of Brighton should be reaccredited for a further period of three years, subject to one condition. At the last reaccreditation visit in 2015, the team had recommended that the School should undertake a thorough and robust review of the OSPAP programme to reflect the changes in the MPharm degree; this review was to include quality assurance and the structure of the programme to enhance integrative learning, inter-professional education, practice activity (including placements) and patient exposure. While recognising during the present event that there have been some enhancements, the OSPAP has not progressed as much as expected. When the accreditation team returns in the next academic year, progress in meeting the condition will be reviewed, along with progress of the OSPAP in meeting the 2015 team's recommendations.
Conditions	1. The School must align the quality assurance of assessment of the OSPAP to the changes that are going to be implemented in the MPharm degree; these changes are to ensure that the standards of a professionally accredited course are upheld, that integration is supported, and that best practice is applied in the context of assessment of healthcare professionals. This is to meet criteria 2.1a, and 2.1b.
Standing conditions	Please refer to Appendix 1
Recommendations	No recommendations were made.
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)	Mrs Beth Phillips, Principal Lecturer in Pharmacy Practice, OSPAP Course Leader
Accreditation team	Professor Andrew Husband (Team Leader), Professor of Clinical Pharmacy and Head of the School of Pharmacy, Newcastle University

	Professor Anthony Smith (Academic), Vice-Provost Education and Student Affairs, University College London
	Dr Adam Todd (Academic), Reader in Pharmaceutical Public Health. School of Pharmacy, Newcastle University
	Professor Helen Howe (Pharmacist), Retired hospital Chief Pharmacist
	Mr Scott Downham (Pharmacist – recently registered), Clinical Pharmacist
	Ms Leonie Milliner (Lay member), Chief Executive, Association for Nutrition
	This was the same team that conducted the MPharm Interim visit (6-7 March 2018); this is relevant to the discussions under standard 2.
GPhC representative	Ms Joanne Martin, Quality Assurance Manager, GPhC
Rapporteur	Professor Brian Furman, Emeritus Professor of Pharmacology, University of Strathclyde

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 as a pharmacist is a GPhC-accredited Master of Pharmacy degree course (MPharm). This reaccreditation event was carried out in accordance with the GPhC's 2011 MPharm 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. 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.

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 University of Brighton OSPAP, along with the MPharm, is delivered by the School of Pharmacy and Biomolecular Sciences. The OSPAP was initially accredited by the Royal Pharmaceutical Society of Great Britain (RSGB), the then regulatory body, in 2005, with subsequent re-accreditations by that body in 2006 and 2009. In 2012, the programme was re-accredited by the General Pharmaceutical Council, with no conditions or recommendations, and was again reaccredited in 2015 with no conditions although with one recommendation. The recommendation was that the School should undertake a thorough and robust review of the OSPAP programme to reflect the positive and innovative changes in the recently reaccredited MPharm degree at Brighton. This review was to include:
  i.   All aspects of the quality assurance and the structure of the programme to enhance integrative learning.
  ii. Inter-professional education (IPE) which is about students learning with, from and about each other; while students valued and benefited from this experience, the provision was limited.

iii.   Practice activity (including placements); the team heard from the students how much they valued this experience to help them prepare for practice. While recognising the challenges of providing this experience for a short programme in comparison to the 4-year MPharm course, the team recommended that the School should consider a range of opportunities in pharmacy practice.

iv.   Patient exposure

In response to this recommendation, the School has enhanced integrative learning in the OSPAP by basing the learning around relevant clinical cases which are referred to throughout the majority of the modules, and which are used to highlight where science has informed practice; this will commence in the academic year 2018/19 and will enable students to integrate their knowledge in a way that enhances patient care. Additionally, the OSPAP has been included in the University-wide inter-professional education (IPE) strategy based on increasingly complex scenarios as students progress through the course. OSPAP students now have additional practice activity with placements and patient exposure.

Key findings

Standard 1: Patient and public safety

All criteria relating to this standard are met.

All criteria to meet this standard are met. (See Appendix 2 for criteria)

The School has well-established procedures to ensure that students are familiar with standards of general behaviour and conduct, as well as with the GPhC's Standards for Pharmacy Professionals and the concepts underlying, and procedures associated with, fitness to practise; students must sign a fitness to practise self-declaration, in which they give consent to the School to refer them to occupational health or other investigation if deemed appropriate by the Fitness to Practise Panel. Students also know their obligation to report any instances of conduct or behaviour that may compromise the safety of patients, members of staff or other students. When undertaking placements or inter-professional learning (IPE) activities, they are supervised in their patient-facing tasks, such as taking a drug history, by a member of academic staff from the School and by a member of staff from the host premises. The ability to work independently is developed in a supervised environment using the clinical skills laboratory. Any health or conduct concerns that arise during the course, including practice-based activities, are brought to the attention of the course leader, and the student will not be permitted to continue the course until the issues have been resolved. Outcomes from a Fitness to Practise panel hearing can range from no action through to a warning, and, ultimately, to a variety of further sanctions including suspension and expulsion from the course. Throughout the programme, several assessments relating to patient safety must be passed, for example prescription dispensing and checking; if a student cannot pass those components, he/she would not be allowed to graduate with an OSPAP PGDip. Similarly, serious issues arising from Fitness to Practise hearings would prevent students from graduating.

Standard 2: Monitoring, review and evaluation of an OSPAP

Criterion 2.1.a and 2.1.b.ii are not met and are subject to a condition. All other criteria relating to this standard are met.

Since the last reaccreditation event in 2015, the University has been restructured; colleges have been disbanded and heads of schools now report directly to the Deputy Vice-Chancellor, who, along with the Pro-Vice-Chancellors (PVCs), the Registrar and the Chief Operating Officer, reports to the Vice-Chancellor. Within the School of Pharmacy & Biomolecular Sciences, there are now five Deputy Heads of School with respective responsibilities for 'Compliance', 'Operations and Resources', 'Quality Assurance', 'Teaching & Learning' and 'Research & Enterprise' (see also standard 8). The University governance

structure comprises the Academic Board reporting to the Board of Governors; the Academic Board, chaired by the Vice-Chancellor and membership of which includes the heads of the University's 12 schools, is responsible for regulations and teaching quality; school boards report to the Academic Board through the respective heads of schools. There are systems in place to address entry requirements, the quality of teaching, learning and assessment, and of placements and other practice learning opportunities, appraisal and feedback systems for students, and supervision requirements, as well as educational resources and capacity; these are monitored, reviewed and evaluated systematically, and when an issue is identified it is documented and dealt with promptly. The OSPAP course is governed by the University's Academic Health process, which requires annual monitoring and evaluation of the programme at module, course, school and institutional levels. Module leaders prepare an annual monitoring and evaluation report for their modules; this is considered by the subject group and contributes to the School's annual academic health report, which is considered by School Board, ultimately feeding into the University's annual academic health day. Additionally, the University has a process of quinquennial review of courses; this was last undertaken for the OSPAP in 2013 as part of the total pharmacy course provision, and the programme will next undergo periodic review in May 2018. The GPhC was notified of a failure of examination-setting and scrutiny procedures that had occurred in the 2016/2017 academic session in the undergraduate MPharm programme. In the year 3 August referral examination paper, a substantial number of questions from the original examination had been reused, and one topic had been examined several times. This had resulted from a systems failure associated with a range of uncoordinated actions with no clear lines of responsibilities, including the failure to send the paper to the external examiner for scrutiny. The team had learned from the Vice-Chancellor that systems and processes are being reviewed, with the involvement of the Registrar. A detailed action plan, based on a high level of change, was being implemented; the lines of responsibility are more clearly defined, and the accountability of the Head of School is now clear. The team acknowledged that the incident related to the MPharm and not to the OSPAP, but because this had arisen from systems failures, there was concern about general processes in the School. While accepting that strong measures are being implemented to ensure the integrity of the assessment strategy and the quality assurance of assessments, including accountability for the processes, with oversight from the highest levels in the University, at present criteria 2.1.a and 2.1.b.ii are not met; thus the team imposed a condition that the School must align the quality assurance of the assessment of the OSPAP to the changes that are going to be implemented in the MPharm degree; these changes are to ensure that the standards of a professionally accredited course are upheld, that integration is supported, and that best practice is applied in the context of assessment of healthcare professionals. Progress will be checked during the team's re-visit in the next academic year.

Standard 3: Equality, diversity and fairness

Both criteria relating to this standard are met.

The University collects relevant data on protected characteristics including age, disability, ethnic origin, and gender, and relates these to progression and academic achievement; these data are used in the annual academic health process. As part of the annual course monitoring and evaluation, course leaders are required to explore relationships between protected characteristics and student admission, performance and progression, and to highlight any emerging issues. Course monitoring and evaluation reports are disseminated throughout the University and discussed at course boards in the presence of student representatives, who are invited to comment, with student concerns being addressed in course action plans. The School holds a Bronze Athena SWAN award and will be submitting an application for an Athena SWAN Silver Award in April 2018. The University runs equality and diversity training as part of the staff development portfolio. This training is available across the University, and all staff members must complete the relevant e-learning packages. The School has a dedicated Equality and Diversity lead who is responsible for ensuring that the University's policies and training are disseminated and adhered to. In addition to staff training, during the OSPAP, students discuss issues relating to social inequalities in health, and team-working exercises address issues concerning how to deal with cultural differences

among team members; during their introductory module, they learn about team working and the importance of showing mutual respect. There are numerous workshops in the programme, and the students' teams are changed frequently, so that they experience a wide variety of cultures. All protected characteristics including gender, disability and religion are addressed in the programme; for example, this covers how religion influences the choice of formulations for particular patients, and the issue of readability of labels for the visually impaired. Students are briefed on equality matters before meeting patients and discuss these issues as a group.

Standard 4: Selection of students

All criteria relating to this standard are met.

Information about the course and the application process is available on the University website. Applicants must hold a qualification equivalent to a BSc Pharmacy and must be eligible to be registered as pharmacists in their own country. Once approved by the GPhC for entry to an OSPAP, applicants receive information on the course, which includes application details and details of the requirement to complete an online pharmaceutical calculations test. All applicants are made aware that they will be required to comply fully with the fitness to practise requirements and to declare any issues that may have some bearing on their suitability. Once the suitability of the applicant is assured, including a check of the appropriateness of the initial qualification, an offer is made; if the applicant accepts the offer, details are then sent, including course information, information about applying for DBS, and the course calculations test. In order to be accepted onto the programme, applicants must achieve 40% or above in the online pharmaceutical calculations test, and, once on the course, students are retested in pharmaceutical calculations, with any significant differences between their score in that test and the online test being considered through fitness to practise processes. Prospective students must also have an appropriate standard of English, as evidenced, for example, by their IELTS score, and must pass a DBS check.

Standard 5: Curriculum delivery and student experience

All criteria relating to this standard are met.

The OSPAP builds on students' previous knowledge and experience of working as pharmacists in their home countries, and comprises seven modules, three of which are shared with the MSc in Clinical Practice; the modules are 'Scientific Basis of Pharmacy Practice', 'Applied Therapeutics', 'Novel Medicinal Products – a clinical perspective', 'Health Promotion for Pharmacists', 'Clinical Drug Delivery', 'Advanced Professional Studies', and 'Pharmaceutical Skills', the last incorporating a 'simulated pharmacy' exercise. The OSPAP begins with the module 'Scientific Basis of Pharmacy Practice', which is an intensive, two-week module dealing with the fundamental science required by a pharmacist to ensure safe and effective practice; here, the material covered is integrated with relevant practice issues and introduces cases that are revisited throughout the programme. Professionalism is emphasised throughout, this being facilitated by using teacher-practitioners and practising pharmacists to bring about professional contextualisation; students must complete reflective entries in preparation for their continuing professional development. In order to address the recommendation made at the 2015 reaccreditation concerning enhancement of integrative learning, delivery of the OSPAP from the 2018/19 session onwards will revolve around clinical cases covering asthma, type 2 diabetes, hypertension, neurodegenerative diseases, autoimmune diseases, breast cancer and peptic ulcer disease, allowing acquisition of knowledge alongside the practical implications for patients, thus enabling students to integrate their knowledge in a way that enhances patient care. Following the last reaccreditation event, the inter-professional education (IPE) and placement activities have been increased. IPE activities currently comprise attending an inter-disciplinary conference for health and social care students, and two workshops with medical students, as well as working with podiatry students during the Leaf Hospital placement. Concerning placements students, undertake a community placement with an experienced

teacher-practitioner in Boots, where they observe and experience clinical services in preparation for their pre-registration training, as well as participating in hospital clinical placements at the Leaf Hospital; there, working with podiatry students, they undertake patient consultations, take drug histories and formulate care plans, receiving feedback on their consultation skills. Additional patient exposure uses simulated patients in workshops, where they practise skills in the clinical skills laboratory. Before placements, students are briefed on issues such as hygiene, health and safety, and how to speak to patients, and receive training in communication skills. The assessments, using a variety of tools, including literature reviews/essays, care plans, oral presentations, portfolios, written examinations, and objective structured clinical examinations (OSCEs), ensure that all of the standard 10 and module learning outcomes are assessed appropriately. Assessments are spread throughout the year to encourage learning. Students' ability to integrate their knowledge is assessed largely through the 'Pharmaceutical Skills' module, including the 'simulated pharmacy' activity; here, students each have a 'personal patient' whose clinical progress and medication is followed with appropriate monitoring, this requiring the pulling together of all knowledge including drug delivery and evidence-based treatment.

Standard 6: Support and development for students

The single criterion relating to this standard is met.

OSPAP students are provided with opportunities to develop as learners and professionals during the programme; this is facilitated by working with a wide range of academic and professional role models, including the lecturers, teacher-practitioners, and those from other health care professions. They are also required to complete a personal development plan in which they record relevant reflections during the course. Formative assessments are provided throughout the programme. Each student is assigned a personal tutor, who is a pharmacist, and students also have access to the Student Support Guidance Tutor; the School operates an open-door policy, giving students ready access to staff members. There is an overseas students' orientation week, and all course information is provided in a course-specific Student Handbook. Advice on study can be obtained from the Academic Study Kit (ASK) website, which is designed to familiarise students with the skills needed and the study methods that will help them to derive the maximum benefit from their learning experience. All students have access to the University's 'StudentCentral' virtual learning environment (VLE). OSPAP students are represented on the Postgraduate Staff-Student Consultative Committee.

Standard 7: Support and development for academic staff

All criteria relating to this standard are met.

There is a range of mechanisms to support staff development. The opportunities for development are underpinned by the annual staff development review (SDR), the purpose of which is to review the previous year in terms of achievement of personal or operational goals, to focus on the development of the individual to meet the needs of his/her current role and future career aspirations, and to discuss the aims/priorities of the individual and the department/School for the next 12 months, for which a personal development plan is prepared. Although staff members are line-managed by the Head of School, accountability for performance is normally through the Deputy Heads for Learning & Teaching and for Research; all course feedback is reviewed and, while serious performance issues would be referred to the Head of School, pastoral care would be addressed through the subject leads, who, while having no disciplinary role, may act as advocates to the Head of School, for example, in requesting a lightening of teaching loads. The University offers a one-day induction workshop for staff who have recently joined the University; this provides an opportunity to meet colleagues from across the University and to learn some essential facts about working at the University. There is also a School induction programme. New staff members are each appointed two mentors from the experienced staff team, one for research and one for teaching. Staff workload is quantified in terms of contact hours, administrative responsibilities and research, with staff members allowed a guaranteed 20% of their time for research. Non-pharmacist

staff members teaching on the OSPAP are required to attend an orientation workshop covering aspects such as the roles of the pharmacist, and standards for pharmacy professionals. Non-pharmacist teaching staff, as well as those pharmacists who are in non-patient-facing roles, undertake an experiential visit to either a community pharmacy or to a pharmacy department in a hospital. The Centre for Learning and Teaching works with staff across the University to improve the student learning experience; this offers informal consultancy to individuals and course teams, professional development through courses, seminars and online resources, and runs a variety of events and conferences, such as the annual Learning and Teaching Conference. Currently, 70% of staff members are fellows of the HEA, with the aim being to achieve 100%; a three-year plan is in place for each member of staff and 'writing days' are provided to assist in portfolio preparation for HEA fellowship applications. Five staff members are Senior Fellows and a further five are working towards achieving this.

Standard 8: Management of an OSPAP

Both criteria relating to this standard are met.

Following reorganisation of the University (see standard 2), the Head of School reports directly to the Deputy Vice-Chancellor, and there are now five Deputy Heads of School with respective responsibilities for 'Compliance', 'Operations and Resources', 'Quality Assurance', 'Teaching & Learning' and 'Research & Enterprise'. Each of the undergraduate and postgraduate taught programmes has a course leader; support for teaching and research is provided by an Administrative Manager and a Technical Manager. The course leader reports to the Deputy Head of School (Learning & Teaching), who, in turn, is responsible to the Head of School. Modules are managed through module leaders, who are responsible for all aspects of their modules, including the assembly of assessments, which are subsequently considered by the module team and the School Academic Standards Committee, before being sent to the external examiner, whose feedback and comments are incorporated. The module leaders also prepare the annual monitoring and evaluation report for their modules. Required resources can be obtained through this route. Normally, the need for additional resource, for example, in terms of staffing, would be highlighted through the annual module review; this would lead to the development of a proposal which would be submitted for consideration to the School Management Group through the Deputy Head (Operations & Resources). If urgent, the Head of School may intervene.

Standard 9: Resources and capacity

All criteria relating to this standard are met.

In resource allocation, schools make a contribution to the University to fund central services such as libraries; the size of the contribution relates to the costs of delivering the courses in the School and the requirements to fund the central services. Each academic year, the University sets student number targets for each school.   The numbers are set taking into account the likely demand for courses, along with the capacity of buildings and infrastructure to support the numbers, with budget plans developed on the assumption that targets will be met; where there is significant deviation from targets, then budgets can be adjusted during the year. Within the School, non-staff budget is allocated to three subject area budgets, broadly in line with student numbers in each area. In addition, there is a postgraduate taught budget which is calculated based on student numbers and specific course requirements, such as the provision of certain teaching materials balanced against the course tuition fees and the capacity of the School in overall student number terms. Allocation of resources is undertaken in a transparent manner, dependent on student numbers and course requirements. **T**he portfolio of postgraduate taught courses has been reviewed so that provision is focused on those courses that are sustainable both financially and educationally, with an emphasis on those that add value for the student and/or contribute to continuing professional development, as well as meeting local and national healthcare needs. OSPAP student numbers were consistently around 50 until 2013, when they dropped to 12 to 19. This led to the introduction of the MSc in Clinical Pharmacy, following which numbers increased, so that the current total is 48, with 16 on the MSc and 32 on the OSPAP. There are sufficient

staff from relevant disciplines and with appropriate qualifications to deliver the programme, as well as sufficient accommodation. The Huxley Building houses the clinical skills laboratory, which was designed with the teaching of pharmacy practice and clinical pharmacy in mind. This building has undergone modification to accommodate changing needs; of particular relevance to the OSPAP has been the purchase of two patient simulators and the building of a simulation suite, control room and observation room. The Huxley Building also houses extensive microbiology, pharmacology, chemistry and pharmaceutical science laboratories. The Cockcroft Building, in which many of the School's academic staff are still based, has undergone significant refurbishment, providing new offices, along with meeting rooms, as well as social and learning space for students. The lecture theatres have been refurbished and teaching facilities updated. Planning permission has been granted, and building work is underway, for the regeneration of the Moulsecoomb site, with the development of new teaching and learning facilities and student accommodation.

Standard 10: Outcomes

The team was satisfied that all 58 outcomes relating to Standard 10 are delivered at the appropriate level.

The team scrutinised the learning outcomes by discussion of a selection of these (10.2.1.a, 10.2.1.b, 10.2.1.d, 10.2.2f, 10.2.3.d and 10.2.3.n) with the teaching staff. On the basis of the six outcomes discussed, along with scrutiny of the documentation, the team was confident that all 58 outcomes would be delivered and assessed at the appropriate levels; therefore, the team agreed that standard 10 is met.

Indicative syllabus

The team was satisfied with the School's use of the Indicative Syllabus to inform its curriculum

The team agreed that the OSPAP met the requirements of Directive 2005/36/EC of the European Parliament and of the Council on the recognition of professional qualifications for an OSPAP.

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 produce and submit to the GPhC on an annual basis:
   a. requested data on student numbers and progression and degree awards;
   b. requested information about the extent of human and physical resources it enjoys for the delivery and support of the degree course.
5. The provider must make students and potential students aware that successful completion of an accredited course is not a guarantee of a placement for a pre-registration year or of future employment as a pharmacist.
6. 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.
7. 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 manne

Appendix 2 – Standards

GPhC standards for the education and training of non-EEA pharmacists wanting to register in

Standard 1: Patient and public safety

1. **There must be clear procedures to address concerns about patient safety arising from pharmacy education and training. Concerns must be addressed immediately.**

1.1   There must be effective systems in place to ensure that students:
- **1.1.a**   do not jeopardise patient safety;
- **1.1.b**   only do tasks for which they are competent, sometimes under supervision;
- **1.1.c**   are monitored and assessed to ensure they always practise safely. Causes for concern should be addressed immediately;
- **1.1.d**   have access to support for health, conduct and academic issues;
- **1.1.e**   must not be awarded an accredited OSPAP if they might pose a risk to patients or the public;
- **1.1.f**   understand what is and what is not professional behaviour and are familiar with the GPhC's *standards for pharmacy professionals (2017)*;
- **1.1.g**   understand what fitness to practise mechanisms apply to them. All schools of pharmacy must have fitness to practise procedures to deal with student causes for concern;
- **1.1.h**   undergo required health and good character checks;
- **1.1.i**   understand that it is an offence to impersonate a pharmacist. Pharmacists are registrants of the GPhC.

Standard 2: Monitoring, review and evaluation of an OSPAP

2. **The quality of an OSPAP must be monitored, reviewed and evaluated in a systematic and developmental way.**

2.1   There must be systems and policies in place covering:
- **2.1.a**   information about roles and responsibilities and lines of accountability;
- **2.1.b**   university information on:
  - **2.1.b.i**   entry requirements;
  - **2.1.b.ii**   the quality of teaching, learning and assessment;
  - **2.1.b.iii**   the quality of placements and other practice learning opportunities;
  - **2.1.b.iv**   appraisal and feedback systems for students;
  - **2.1.b.v**   supervision requirements;
  - **2.1.b.vi**   educational resources and capacity;

  These must be monitored, reviewed and evaluated systematically. When an issue is identified it must be documented and dealt with promptly.

Standard 3: Equality, diversity and fairness

3. **OSPAPs must be based on principles of equality, diversity and fairness. It must meet the requirements of all relevant legislation.**

3.1   Systems and policies for capturing equality and diversity data. Concerns should be documented, addressed and disseminated;

3.2   Strategies for staff training in equality and diversity

Standard 4: Selection of students

4. **Selection processes must be open, fair and comply with relevant legislation. Processes must ensure students are fit to practise at the point of selection. Selection includes recruitment and admissions.**

4.1   Selection process must give applicants the information they need to make an informed application.

4.2   Selection criteria must be explicit. They should include:

    4.2.a   meeting the GPhC's adjudication requirements;

    4.2.b   meeting academic and professional entry requirements;

    4.2.c   meeting numeracy requirements;

    4.2.d   recognizing prior learning, where that is appropriate.

4.3   Selectors should apply selection criteria fairly. They should be trained to do this. Training should include equality and diversity matters

Standard 5: Curriculum delivery and the student experience

5.   **The curriculum for OSPAPs must deliver the outcomes in Standard 10. Most importantly, curricula must ensure students practise safely and effectively**. **To ensure this, pass criteria must describe safe and effective practice.**

5.1   Curricula must be integrated. By this the GPhC does not mean that an OSPAP and pre-registration training must be delivered as single two tier course, but that the component parts of an OSPAP must be linked in a coherent way.

5.2   Curricula must be progressive, dealing with issues in an increasing more complex way until the right level of understanding is reached.

5.3   An OSPAP must be delivered in an environment which places study in a professional and academic context and requires students to conduct themselves professionally.

5.4   An OSPAP must be delivered in an environment informed by research. This means that whether or not all staff are engaged in research, their teaching must be informed by research.

5.5   An OSPAP teaching and learning strategy must set out how students will achieve the outcomes in Standard 10. Learning opportunities must be structured to provide:

    5.5.a   an integrated experience of relevant science and pharmacy practice;

    5.5.b   a balance of theory and practice;

    5.5.c   independent learning skills.

5.6   The OSPAP curriculum must include practical experience of working with patients, carers and other healthcare professionals. We are not suggesting that off-site placement visits are the only way to achieve this. Schools should articulate their strategy for meeting this criterion, which may include off-site placement visits, using patients, carers and other healthcare professions in-class and simulations.

5.7   There must be a clear assessment strategy for the OSPAP. Assessment methods must measure the outcomes in Standard 10.

5.8   The OSPAP assessment strategy should include:

    5.8.a   diagnostic assessments;

    5.8.b   formative assessments;

    5.8.c   summative assessments;

    5.8.d   timely feedback.

5.9   Academic regulations must be appropriate for a postgraduate qualification that is both academic and professional and may lead to further professional training. 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. Course academic regulations may be more stringent than university norms. This may include higher than usual pass marks for assessments demonstrating knowledge and skills essential to safe and effective pharmacy practice.

5.10   Marking criteria must be used for all assessments and all pass criteria must reflect safe and effective practice.

5.11   Patient safety must be paramount in assessments: any evidence of an assessment demonstrating unsafe practise must result in failure.

5.12   OSPAPs must include an induction programme orientating students to study in the UK. The

programme should include diagnostic testing.

Standard 6: Support and development for students

6.   Students must be supported to develop as learners and professionals during their OSPAP.

6.1   A range of mechanisms must be in place to support students to develop as learners and professionals.

Standard 7: Support and development for academic staff

7.   Anyone delivering an OSPAP should be supported to develop in their professional roles.

7.1.   There must be a range of mechanisms in place to support anyone delivering an OSPAP to develop in their role.
7.2.   Induction programmes are provided for and university staff as appropriate. This should include induction programmes for non-pharmacists working on OSPAP.
7.3.   Everyone involved in delivering the curriculum should have:
    7.3.a   effective supervision;
    7.3.b   an appropriate and realistic workload;
    7.3.c   effective personal support;
    7.3.d   mentoring;
    7.3.e   time to learn;
    7.3.f   continuing professional development opportunities.

Standard 8: Management of an OSPAP

8.   An OSPAP must be planned and maintained through transparent processes which must show who is responsible for what.

8.1.   All OSPAPs must be supported by a defined management plan with:
    8.1.a   a schedule of responsibilities
    8.1.b   defined structures and processes to manage the delivery of an OSPAP

Standard 9: Resources and capacity

9.   Resources and capacity are sufficient to deliver outcomes.

9.1   There must be:
    9.1.a   robust and transparent mechanisms for securing an appropriate level of resource for delivering an accreditable OSPAP;
    9.1.b   sufficient staff from relevant disciplines to deliver the curriculum to students. Staff must be appropriately qualified and experienced. The staffing profile must include:
        9.1.b.i   sufficient numbers of pharmacists – registrants of the GPhC – with experience of teaching in higher education to ensure that an OSPAP can produce students equipped to enter pharmacist pre-registration training in Great Britain.
        9.1.b.ii   sufficient numbers of pharmacists to act as tutors and professional mentors at university. Not all personal tutors must be pharmacists.
        9.1.b.iii   pharmacists who are leaders in the profession and in their university, who can influence university policy relevant to pharmacy
        9.1.b.iv   non-pharmacist academics who can influence school and university policy relevant to pharmacy

9.1.b.v   staff who are sufficiently experienced to supervise research. It would be unusual for anyone to supervise research at a particular level unless they had researched to that level or beyond. New research supervisors must be mentored and signed off as being fit to supervise after a period of mentoring

9.1.b.vi   science academics who understand the relevance of their discipline to pharmacy and deliver their area of expertise in a pharmaceutical context

9.1.b.vii   academic pharmacists and other experienced pharmacy staff who are able to act as mentors to non-pharmacist colleagues

9.1.c   career pathways in universities for all staff teaching on OSPAPs, including pathways for practice staff

9.1.d   clear lines of authority and responsibility for the strategic organisation and day-to-day management of placements;

9.1.e   training and ongoing support for all non-pharmacists involved in the delivery of OSPAPs, which must help them understand:

9.1.f.i   help and understand the relevance of their work to pharmacy

9.1.f.ii   how to deliver their area of expertise in a pharmaceutical context

9.1.f   appropriate learning resources

9.1.g   accommodation and learning resources that are fit for purpose

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

10.1 Expectations of a pharmacy professional

Learning outcome		OSPAP	Pre-reg *(for reference only)*
10.1.a	Recognise ethical dilemmas & respond in accordance with relevant codes of conduct and behaviour	**Shows how**	*Does*
10.1.b	Recognise the duty to take action if a colleague's health, performance or conduct is putting patients or public at risk	**Knows how**	*Knows how*
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**	*Does*
10.1.d	Apply the principles of clinical governance in practice	**Knows how**	*Does*
10.1.e	Demonstrate how the science of pharmacy is applied in the design and development of medicines and devices	**Shows how**	*Knows how*
10.1.f	Contribute to the education and training of other members of the team, including peer review and assessment	**Shows how**	*Does*
10.1.g	Contribute to the development of other members of the team through coaching and feedback	**Knows how**	*Shows how*
10.1.h	Engage in multidisciplinary team working	**Knows how**	*Does*
10.1.i	Respond appropriately to medical emergencies, including provision of first aid	**Knows how**	*Shows how*

10.2 The skills required in practice

10.2.1 Implementing health policy

Learning outcome		OSPAP	Pre-reg *(for reference only)*
10.2.1.a	Promote healthy lifestyles by facilitating access to and understanding of health promotion information	**Shows how**	*Does*

10.2.1.b	Access & critically evaluate evidence to support safe, rational & cost effective use of medicines	**Shows how**	*Does*
10.2.1.c	Use the evidence base to review current practice	**Shows how**	*Show how*
10.2.1.d	Apply knowledge of current pharmacy-related policy to improve health outcomes	**Knows how**	*Shows how*
10.2.1.e	Collaborate with patients, the public and other healthcare professionals to improve patient outcomes	**Knows how**	*Does*
10.2.1.f	Play an active role with public and professional groups to promote improved health outcomes	**Knows how**	*Knows how*
10.2.1.g	Contribute to research & development activities to improve health outcomes	**Knows how**	*Knows how*
10.2.1.h	Provide evidence- based medicines information	**Shows how**	*Does*

10.2.2 Validating therapeutic approaches and supplies prescribed and over-the-counter medicines

Learning outcome		OSPAP	*Pre-reg (for reference only)*
10.2.2.a	Identify and employ the appropriate diagnostic or physiological testing techniques in order to promote health	**Knows how**	*Shows how*
10.2.2.b	Identify inappropriate health behaviours and recommend suitable approaches to interventions	**Shows how**	*Does*
10.2.2.c	Instruct patients in the safe and effective use of their medicines and devices	**Shows how**	*Does*
10.2.2.d	Analyse prescriptions for validity and clarity	**Shows how**	*Does*
10.2.2.e	Clinically evaluate the appropriateness of prescribed medicines	**Shows how**	*Does*
10.2.2.f	Provide, monitor and modify prescribed treatment to maximise health outcomes	**Shows how**	*Does*
10.2.2.g	Communicate with patients about their prescribed treatment	**Shows how**	*Does*
10.2.2.h	Optimise treatment for individual patient needs in collaboration with the prescriber	**Shows how**	*Does*
10.2.2.i	Record, maintain and store patient data	**Shows how**	*Does*
10.2.2.j	Supply medicines safely and efficiently, consistently within legal requirements and best professional practice. NB This should be demonstrated in relation to both human and veterinary medicines.	**Shows how**	*Does*

10.2.3 Ensuring safe and effective systems are in place to manage risk inherent in the practice of pharmacy and the delivery of pharmaceutical services

Learning outcome		OSPAP	*Pre-reg (for reference only)*
10.2.3.a	Ensure quality of ingredients to produce medicines and products	**-**	*Shows how*
10.2.3.b	Apply pharmaceutical principles to the formulation, preparation and packaging of products	**Shows how**	*Shows how*
10.2.3.c	Verify safety and accuracy utilising pharmaceutical calculations	**Does**	*Does*
10.2.3.d	Develop quality management systems including maintaining appropriate records	**Shows how**	*Shows how*
10.2.3.e	Manage and maintain quality management systems including maintaining appropriate records	**Shows how**	*Does*
10.2.3.f	Procure and store medicines and other pharmaceutical products working within a quality assurance framework	**Knows how**	*Does*

		OSPAP	Pre-reg
10.2.3.g	Distribute medicines safely, legally and effectively	**Knows how**	*Does*
10.2.3.h	Dispose of medicines safely, legally and effectively	**Knows how**	*Does*
10.2.3.i	Manage resources in order to ensure work flow and minimise risk in the workplace	**Knows how**	*Shows how*
10.2.3.j	Take personal responsibility for health and safety	**Does**	*Does*
10.2.3.k	Work effectively within teams to ensure safe and effective systems are being followed	**Knows how**	*Does*
10.2.3.l	Ensure the application of appropriate infection control measures	**Shows how**	*Does*
10.2.3.m	Supervise others involved in service delivery	**Knows how**	*Does*
10.2.3.n	Identify, report and prevent errors and unsafe practice	**Shows how**	*Does*
10.2.3.o	Procure, store and dispense and supply veterinary medicines safely and legally	**Knows how**	*Knows how*

10.2.4 Working with patients and the public

Learning outcome		OSPAP	Pre-reg (for reference only)
10.2.4.a	Establish and maintain patient relationships while identifying patients' desired health outcomes and priorities	**Shows how**	*Does*
10.2.4.b	Obtain and record relevant patient medical, social and family history	**Shows how**	*Does*
10.2.4.c	Identify and employ the appropriate diagnostic or physiological testing techniques to inform clinical decision making	**Knows how**	*Shows how*
10.2.4.d	Communicate information about available options in a way which promotes understanding	**Shows how**	*Does*
10.2.4.e	Support the patient in choosing an option by listening and responding to their concerns and respecting their decisions	**Shows how**	*Does*
10.2.4.f	Conclude consultation to ensure a satisfactory outcome	**Shows how**	*Does*
10.2.4.g	Maintain accurate and comprehensive consultation records	**Shows how**	*Does*
10.2.4.h	Provide accurate written or oral information appropriate to the needs of patients, the public or other healthcare professionals	**Shows how**	*Does*

10.2.5 Maintaining and improving professional performance

Learning outcome		OSPAP	Pre-reg (for reference only)
10.2.5.a	Demonstrate the characteristics of a prospective professional pharmacist as set out in relevant codes of conduct and behaviour	**Does**	*Does*
10.2.5.b	Reflect on personal and professional approaches to practice	**Does**	*Does*
10.2.5.c	Create and implement a personal development plan	**Does**	*Does*
10.2.5.d	Review and reflect on evidence to monitor performance and revise professional development plan	**Does**	*Does*
10.2.5.e	Participate in audit and in implementing recommendations	**Knows how**	*Shows how*
10.2.5.f	Contribute to identifying learning and development needs of team members	**Knows how**	*Does*
10.2.5.g	Contribute to the development and support of individuals and teams	**Knows how**	*Does*
10.2.5.h	Anticipate and lead change	**Knows how**	*Shows how*

Appendix 3 – Indicative syllabus

It is expected that education providers will use the indicative syllabus to develop a detailed programme of study which will enable pharmacists to meet the learning outcomes.

A1.1 How medicines work

Therapeutics
- Routes of administration
- New therapeutic advances
- Infection control
- Complementary therapies
- Clinical therapeutic uses of drugs

Applied Physical, Chemical and Biological sciences
- Sources and purification of medicinal substances
- Physicochemical characteristics of drugs and biological systems
- Thermodynamics and chemical kinetics
- (Bio)Analytical principles and methods
- Drug design and discovery
- Cell and molecular biology
- Biochemistry
- Genetics
- Microbiology
- Immunology
- Pharmaceutical chemistry
- Drug identification
- Drug synthesis

Pharmacology, pharmacokinetics & pharmacodynamics
- Contraindications, adverse reactions and drug interactions
- ADME
- Prediction of drug properties
- Pharmacogenetics and pharmacogenomics
- Drug and substance misuse
- Clinical toxicology and drug-over-exposure
- Molecular basis of drug action
- Metabolism

Pharmaceutical technology including manufacturing & engineering science
- Biotechnology
- Manufacturing methods
- Quality assurance processes
- Sterilisation and asepsis
- Environmental control in manufacturing

Formulation and material science
- Materials used in formulations and devices
- Biopharmaceutics, developmental pharmaceutics, pre-formulation and formulation studies
- Design and standardization of medicines
- Microbiological contamination

- Contamination control
- Product stability
- Medical devices

A1.2 How people work

Normal & abnormal structure & function
- Nutrition
- Physiology
- Pathology
- Infective processes

Sociology
- Social and behavioural science

Health psychology
- Health promotion
- Disease prevention
- Behavioural medicine

Objective diagnosis
- Differential diagnosis
- Symptom recognition
- Diagnostic tests

Epidemiology
- Aetiology and epidemiology of (major) diseases

A1.3 How systems work

Healthcare management
- Public health
- Organisations: NHS,DH, govt priorities
- Other professionals
- Health care systems

Evidence-based practice
- Health information systems/ resources
- Health policy and (pharmaco)economics

Professional regulation
- Legislation
- Professional ethics and fitness to practise
- Sale and supply of medicines
- CPD
- Political and legal framework

Medicines regulation
- Evaluation and regulation of new drugs and medicines
- Pharmacopoeial specifications and biological standards
- Medicines licensing
- Product quality, safety and efficacy
- The supply chain

- Packaging, labelling and patient information

Clinical governance
- SOPs
- Research methodology / research ethics
- Risk & quality management
- Good manufacturing/dispensing practice
- Good clinical practice
- Health policy, clinical and science research methods

Clinical management
- Disease management
- Chronic medicines management
- Medicines use review
- Care planning

Workplace Regulation
- Health & Safety
- Sexual boundaries
- Independent Safeguarding Authority
- Data protection
- FOIA
- Consumer protection incl. complaints procedures

A1.4 Core and transferable skills

Professionalism

Research and research methods

Critical appraisal
- Audit and learning from errors

Problem solving
- Study skills
- Team-working skills

Clinical decision making
- Leadership skills

Accurate record keeping

Reflective practice (incl. continuing professional development)

Effective communication
- Interpersonal skills
- Medical terminology

Interpret & interrogate clinical data

Analyse & use numerical data

Pharmaceutical numeracy

Technological literacy

A1.5   Attitudes and values

See the GPhC *Code of Conduct for pharmacy students* **(2010) and** *Standards of conduct, ethics and performance* **(2010)**