

**University of East Anglia, Master of Pharmacy
(MPharm) degree reaccreditation and MPharm
degree with preparatory year accreditation part 1
event report, May 2023**



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Event summary and conclusions

Provider	University of East Anglia
Courses	Master of Pharmacy (MPharm) degree Master of Pharmacy (MPharm) degree with preparatory year
Event type	Reaccreditation (part 1) of the MPharm degree Accreditation of the MPharm degree with preparatory year
Event date	17-19 May 2023
Approval period	2022/23 – 2030/31
Relevant requirements	Standards for the initial education and training of pharmacists, January 2021
Outcome	<p>Approval</p> <p>The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the MPharm degree and MPharm degree with preparatory year offered by the University of East Anglia are reaccredited, subject to a satisfactory part 2 event. There were no conditions.</p> <p>Reaccreditation is recommended for a period of 6 years after part 2 event, with an interim event at the mid-way point. The accreditation team reserve to amend this accreditation period if necessary, following the part 2 event.</p> <p>The part 2 reaccreditation event will take place in the 2024/25 academic year and is likely to take place virtually.</p>
Conditions	There were no conditions.
Standing conditions	The standing conditions of accreditation can be found here .
Recommendations	No recommendations were made.
Registrar decision	<p>The Registrar of the GPhC has reviewed the accreditation report and considered the accreditation team’s recommendation.</p> <p>The Registrar is satisfied that the University of East Anglia has met the requirement of continued approval in accordance with Part 5 article 42 paragraph 4(a)(b) of the Pharmacy Order 2010, in line with the Standards for the initial education and training of pharmacists, January 2021.</p> <p>The Registrar confirms that the University of East Anglia is approved to continue to offer the MPharm degree and MPharm degree with</p>

	preparatory year programme for 6 years, subject to satisfactory part 2 event. The Registrar noted that there were no conditions associated with this event.
Key contact (provider)	Dr James Desborough, Associate Professor in Pharmacy Practice
Accreditation team	<p>Professor Chris Langley (Team Leader), Professor of Pharmacy Law & Practice and Deputy Dean of the College of Health and Life Sciences, Aston University *</p> <p>Fiona Barber (team member - lay), Deputy Chair & Independent Lay member, East Leicestershire & Rutland CCG</p> <p>Lyn Hanning (team member - academic), Director of Practice Based Learning and Head of Pharmacy Practice, University of Bath</p> <p>Professor Luigi Martini (team member - pharmacist), Managing Director Precision Health Technology Accelerator (PHTA) for University of Birmingham and Birmingham Health Partners</p> <p>Arshad Patel (team member - pharmacist newly qualified) PCN Clinical Pharmacist, Extended Access Pharmacist and OSCE Assessor</p> <p>Ravi Savania (team member - academic), Director of Teaching and Learning, Lecturer in Pharmacy Practice, School of Pharmacy, University of Reading</p>
GPhC representative	Chris McKendrick, Senior Quality Assurance Officer (Education) *
Rapporteur	Jane Smith, Chief Executive Officer, European Association for Cancer Research

* also attended the pre-event meeting

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 (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 reaccreditation event was carried out in accordance with the **Adapted methodology for reaccreditation of MPharm degrees to 2021 standards** and the programme was reviewed against the GPhC **Standards for the initial education and training of pharmacists, January 2021**.

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.

Background

MPharm degree

The MPharm course at the University of East Anglia is delivered by the School of Pharmacy, one of six schools within the Faculty of Science. The School admitted its first students in 2003 and graduated its first cohort in 2007, following successful completion of Step 7 of the accreditation process, which at that time was undertaken by the Royal Pharmaceutical Society of Great Britain (RPSGB). The programme was last reaccredited by the General Pharmaceutical Council in May 2018 with no conditions or recommendations.

In response to the new GPhC standards, there has been a review of the MPharm course content with the aim of creating space for a significant increase in experiential learning. Planned changes were reviewed at this accreditation event.

Following consultation with students and the GPhC, the 5-year integrated MPharm with placement year course (B231) was closed and withdrawn in March 2022. All students registered on the course agreed to transfer to the MPharm course (B230) and applicants or offer holders were offered a place on the MPharm course (B230) where appropriate.

MPharm degree with preparatory year

The GPhC began accrediting MPharm degrees with a preparatory year as a separate course to the MPharm degree in 2020/21. Prior to this the accreditation of the MPharm degree component of the course was accepted to allow students entry to pre-registration training.

An MPharm degree with preparatory year is a single course that leads to a Master of Pharmacy award. It is recruited to separately from the accredited 4-year MPharm degree and is assigned a different UCAS code. For most schools this will be a 5-year course which includes a preparatory year followed by four further taught years that mirror that of the accredited MPharm degree.

An MPharm with preparatory year must meet all of the GPhC's initial education and training standards for pharmacists in all years of the course. All teaching and assessment of the learning outcomes is expected to take place in taught years 2-5, with the first taught year being set aside for foundation learning only. For the purpose of accreditation, it is assumed that the course content for the four taught years following the preparatory year will be identical for students on the MPharm degree and the MPharm degree with preparatory year.

In 2020-21, the GPhC asked Schools offering an MPharm with preparatory year, but not due an accreditation event, to provide a written submission against the standards for assurance of the course provision in the interim period. The provider submitted documentation relating to its MPharm degree with preparatory year (then known as MPharm with a Foundation Year) which was deemed to meet the required standards. The provider was therefore informed in April 2021 that it could continue to offer the course until its next reaccreditation event, at which point the course would undergo a formal accreditation process, alongside the reaccreditation of the MPharm degree. The MPharm degree with preparatory year was therefore considered for accreditation at this event.

Documentation

Prior to the event, the provider submitted documentation to the GPhC in line with the agreed timescales. The documentation was reviewed by the accreditation team 'the team' and it was deemed to be satisfactory to provide a basis for discussion.

Pre-event

In advance of the main event, a pre-event meeting took place via videoconference on 24 April 2023. The purpose of the pre-event meeting was to prepare for the event, allow the GPhC and the provider to ask any questions or seek clarification, and to finalise arrangements for the event. The provider was advised of areas that were likely to be explored further by the accreditation team during the event, and was told the learning outcomes that would be sampled.

The event

The event took place on site at the University on 18-19 May 2023 and comprised of a series of meetings between the GPhC accreditation team and representatives of the MPharm degree and a meeting with past and present students.

Declarations of interest

There were no declarations of interest, although members of the Panel had all worked with Dr James Desborough, Course Director, in his role as a GPhC accreditation team member.

Schedule

Day 1

09:00 – 09:45	Welcome and introductions - Management and oversight of the MPharm degree - part 1 <ul style="list-style-type: none">• Presentation from provider (maximum 35 minutes) covering:<ul style="list-style-type: none">○ Process for developing MPharm to meet 2021 standards○ High level overview of change key changes to meet 2021 standards○ High level updates since the last event○ Update on any developments to buildings/facilities○ Overview of business strategy and financial stability of the programme○ Identified risks and mitigation○ Overview of progress to date and plans in place regarding collaboration with statutory education body and others○ Overview of plans for managing the transfer of current year 1 students to the 2021 standards○ Overview of plans for the managing teach out of the MPharm to the 2011 standards
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	Any specific areas of standards 1,2,3,4, and 7 as identified by the team (shared at pre-event meeting).
09:45 – 10:15	Tour of MPharm teaching and learning facilities
10:15 – 11:00	Break and private meeting of accreditation team
11:00 – 12:30	<p>Management and oversight of the MPharm degree - part 2</p> <ul style="list-style-type: none"> • Questions and discussions <p>Focused on: Standard 1: Selection and admission Standard 2: Equality, diversity and fairness (Systems, policies and data monitoring aspects) Standard 3: Resources and capacity Standard 4: Managing, developing and evaluating MPharm degrees Standard 7: Support and development [...] everyone involved in the delivery of the MPharm degree</p>
12:30 – 13:30	Lunch and private meeting of accreditation team
13:30 – 15:30	<p>Teaching, learning, support and assessment - part 1</p> <ul style="list-style-type: none"> • Presentation from provider (maximum 20 minutes) covering: <ul style="list-style-type: none"> ○ Teaching, learning and assessment strategy, including: <ul style="list-style-type: none"> – Plans for experiential learning – Plans for interprofessional learning – Links and transition to foundation training – How assessments undertaken in practice will be quality assured ○ Any specific areas of standards 2, 5, 6 and 7 as identified by the accreditation team (shared at pre-event meeting). • Questions and discussion <p>Focused on: Standard 2: Equality diversity and fairness (curriculum and student support aspects) Standard 5: Curriculum design and delivery Standard 6: Assessment Standard 7: Support and development for student pharmacists [...]</p>
15:30 – 16:00	Break and private meeting of accreditation team
16:00 – 17:00	<p>Student meeting</p> <p>To include students in all years of the MPharm and on both MPharm variants.</p>

Day 2

08:30 – 09:00	Private meeting of the accreditation team
09:00 – 10:00	Teaching, learning, support and assessment - part 2 <ul style="list-style-type: none">• Presentation (maximum 20 minutes) covering:<ul style="list-style-type: none">○ The teaching and learning that will be incorporated into the programme to embed the foundation of knowledge and core skills required for safe and effective prescribing.○ The assessment of students' achievement of learning outcomes relating to independent prescribing• Questions and discussion
10:00 – 10:30	Break and private meeting of the accreditation team
10:30 – 11:45	Teaching, learning, support and assessment - part 3: <ul style="list-style-type: none">• A detailed look at the teaching, learning and assessment of a sample of learning outcomes selected by the accreditation team (As shared at the pre-event meeting)
11:45 – 15:15	Private meeting of the accreditation team (including lunch)
15:15 – 15:30	Deliver outcome to programme provider

Attendees

Course provider

The accreditation team met with the following representatives of the provider:

Name	Designation at the time of accreditation event
Jenny Badcock	Lecturer in Pharmacy Practice
Dr Andrew Beekman	Lecturer in Medicinal Chemistry
Dr James Desborough *	Course Director
Laura Ellis	Deputy Course Director Foundation Year
Dr Laszlo Fabian	Lecturer in Solid State Pharmaceutical Chemistry
Dr Chris Hamilton	Chair of Exams
Catherine Heywood	Teacher Practitioner
Professor Yaroslav Khimyak	Professor of Solid State NMR
Peadar Langan	Senior Finance Business Partner
Dr Paul McDermott	Director of Admissions
Professor Anja Mueller *	Interim Head of School
Dr Rosemary Norton	Chair of EDI Committee

Dr Leoni Palmer	Outreach Officer
Professor Sheng Qi	Professor of Pharmaceutical Material Science and Technology
Dr Andy Round	Senior Advisor
Dr Aram Saeed	Course Director Foundation Year
Dr Julie Sanderson	Associate Professor in Pharmacology
Dr Vilius Savickas	Lecturer in Clinical Pharmacy
Professor Mark Searcey	PVC Science
Dr Jeremy Sokhi *	Director of Learning and Teaching
Samuel Taylor	Lecturer in Clinical Pharmacy
Dr Michael Twigg	Associate Professor in Primary Care Pharmacy

* also attended the pre-event meeting

The accreditation team also met a group of 20 current MPharm students, 3 current MPharm with Preparatory Year students, and one previous MPharm student who is now a Foundation Year trainee.

Key findings - Part 1 Learning outcomes

During the reaccreditation process the accreditation team reviewed the provider's proposed teaching and assessment of all 55 learning outcomes relating to the MPharm degree and MPharm degree with preparatory year. To gain additional assurance the accreditation team also tested a sample of 6 learning outcomes during a separate meeting with the provider.

The following learning outcomes were explored further during the event: **Learning outcomes 4, 15, 23, 28, 38 and 55.**

The team agreed that all 55 learning outcomes were met (or would be met at the point of delivery) or likely to be met by the part 2 event.

See the **decision descriptors** for an explanation of the 'Met' 'Likely to be met' and 'not met' decisions available to the accreditation team.

The learning outcomes are detailed within the **Standards for the initial education and training of pharmacists, January 2021.**

Domain: Person-centred care and collaboration (learning outcomes 1 - 14)

Learning outcome 1 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 2 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 3 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 4 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 5 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 6 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 7 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 8 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 9 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 10 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 11 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

Learning outcome 12 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 13 is:	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 14 is	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>

Learning Outcome 13: Recognise the psychological, physiological and physical impact of prescribing decisions on people

This learning outcome will be taught and assessed at the 'shows how' level in the revised Year 4 of the MPharm course. As this has not yet been finalised and delivered, the team agreed that this learning outcome is likely to be met and will be reviewed at the part 2 event.

Learning Outcome 14: Work collaboratively and effectively with other members of the multi-disciplinary team to ensure high-quality, person-centred care, including continuity of care

This learning outcome will be delivered and assessed via the experiential learning aspects of the course. As these are still being planned and secured, the team agreed that details of how this learning outcome will be met at the 'shows how' level are not yet clear. This learning outcome will be reviewed again during the part 2 event.

Domain: Professional practice (learning outcomes 15 - 44)

Learning outcome 15 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 16 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 17 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 18 is	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 19 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 20 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 21 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 22 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 23 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 24 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 25 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 26 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 27 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 28 is	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 29 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 30 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 31 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 32 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 33 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 34 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 35 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 36 is	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 37 is	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 38 is	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 39 is	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

Learning outcome 40 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 41 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 42 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 43 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 44 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

Learning Outcome 18: Take responsibility for all aspects of pharmacy services, and make sure that the care and services provided are safe and accurate

This learning outcome will be delivered and assessed via the experiential learning aspects of the course. As these are still being planned and secured, the team agreed that details of how this learning outcome will be met at the 'does' level are not yet clear. This learning outcome will be reviewed again during the part 2 event.

Learning Outcome 28: Demonstrate effective diagnostic skills, including physical examination, to decide the most appropriate course of action for the person

The provider plans to introduce new elements to the course to enable students to meet this learning outcome, including examination of the eyes and ears. As this content has not yet been finalised nor delivered, this learning outcome is likely to be met and will be reviewed during the part 2 event.

Learning Outcome 36: Apply relevant legislation and ethical decision-making related to prescribing, including remote prescribing

Learning Outcome 37: Prescribe effectively within the relevant systems and frameworks for medicines use

Learning Outcome 38: Understand clinical governance in relation to prescribing, while also considering that the prescriber may be in a position to supply the prescribed medicines to people

The team heard about the provider's plans for teaching and assessing prescribing skills throughout the course. As these plans are not finalised and have not yet been implemented, these three learning outcomes are likely to be met and will be reviewed during the part 2 event.

Domain: Leadership and management (learning outcomes 45 - 52)

Learning outcome 45 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 46 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 47 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 48 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 49 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 50 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 51 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 52 is	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

Domain: Education and research (learning outcomes 53 - 55)

Learning outcome 53:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 54:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Learning outcome 55:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

Key findings - Part 2 Standards for the initial education and training of pharmacists

The criteria that sit beneath each standard are detailed within the [Standards for the initial education and training of pharmacists, January 2021](#).

Standard 1: Selection and admission

Students must be selected for and admitted onto MPharm degrees on the basis that they are being prepared to practise as a pharmacist

Criterion 1.1 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 1.2 is:	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 1.3 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 1.4 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 1.5 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 1.6 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 1.7 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 1.8 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 1.9 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

Entry criteria for both courses are made available on the provider's website. All students who meet the academic entry requirements are invited for interview and all staff involved in the selection of students undertake equality and diversity training. Interviews are values-based and are carried out by two members of academic staff. A borderline regression methodology is used to determine the cut score for successfully passing the interview. The same process is followed for clearing and adjustment applicants. Any examples of dangerous practise identified in an interview are highlighted in the scoresheet and discussed with the Admissions Director. Staff are provided with training in identifying such practise.

Some monitoring of admissions data does take place. As a result, the provider identified a concern about the offer rate for mature students applying to the MPharm with Preparatory Year. A 'Preparing for Pharmacy' programme was developed to support these students and to widen access more broadly.

The provider has only recently been given access to university-held data enabling it to monitor admissions by ethnicity. Data relating to some other protected characteristics are still not available. The team welcomed the fact that this should soon be available so that monitoring can be more comprehensive. For this reason, criterion 1.2 (Higher-education institutions must actively aim to identify and reduce discrimination in selection and admission processes. As a minimum, every year, the MPharm degree admissions profile must be analysed by protected characteristics, as defined in the Equality Act 2010. Documented action must be taken if that analysis shows that the admissions process may be disadvantaging students) is likely to be met and will be reviewed at the part 2 event.

The team noted that for both course variants, the provider accepts students with lower than advertised intake grades and welcomed an upcoming review of progression data against intake grades, which might suggest that changes should be made to the grades accepted in clearing (see also Standard 2). Offer-holders who do not achieve the required entry grades but who made the University

their first choice are prioritised in confirmation and clearing. For these applicants, the provider takes their interview score into account when determining whether to accept them onto the MPharm course. In some cases, applicants may be offered a place on the MPharm with Pharmacy Year instead of the MPharm.

In the most recent recruitment cycle, the provider has arranged a weekly online drop-in session for MPharm applicants with an upcoming interview. This allows applicants to ask questions about the interview format and expectations and allows the provider to explain the values-based interview process. More traditional applicant and offer-holder days are also held, both in-person and online.

The team asked how the provider supports students who are unable to obtain the necessary DBS (or equivalent) and occupational health checks at the start of the programme. The provider acknowledged that not all students will have these checks completed at the start of term, especially if they were accepted through clearing. The importance of completing the checks is emphasised in the induction sessions for both course variants. There is an absolute deadline of the end of the first term for the checks to be completed, and students are not able to go on placement until they are complete. To date, there have not been any students who have not met this deadline.

Standard 2: Equality, diversity and fairness

MPharm degrees must be based on, and promote, the principles of equality, diversity and fairness; meet all relevant legal requirements; and be delivered in such a way that the diverse needs of all students are met

Criterion 2.1 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 2.2 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 2.3 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 2.4 is:	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 2.5 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 2.6 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

The University has appropriate policies in place relating to equality, diversity and inclusion (EDI) as well as having an EDI team to support the dissemination and implementation of these policies and good practice at School and course level.

Course materials have been updated to be more inclusive by including patients from a diverse range of cultural, ethnic and socioeconomic backgrounds. Where such data is not provided, the provider encourages students not to make assumptions and to ask for the information where it is relevant. The OSCE marking scheme checks for this. The students that the team met confirmed that there has been progress in this area, for example with the use of an Mx prefix on a prescription, but they commented that further progress could be made, for example with reference to a more diverse range of skin tones. The team asked if the provider's patient stakeholder group had been involved in these developments and was told that it had. An advocacy group supporting patients with learning disabilities comes in to talk to students, and students commented on how useful they found these sessions.

The team asked how adjustments have been made to make placements more accessible to students and was told that travel is the main issue raised by students, in terms of the time and costs associated with travelling long distances. Students reiterated this concern in the team's meeting with them. The

provider asks students for their preferences and tries to accommodate them, but this is not always possible. The team noted that many universities are now able to cover travel costs to placements for their students and encouraged the provider to continue efforts to secure such funding for its students.

The team asked what systems and policies are in place to ensure that those providing training to MPharm students on placements have also completed or undertaken EDI training. The provider explained that it is mandatory for all placement providers to carry out the NHS eLearning for Healthcare course, and the provider is able to check that this has been completed.

In its submission, the provider highlighted that students admitted to the MPharm from the MPharm with Preparatory Year consistently perform at a lower level than those admitted direct to the MPharm. The team asked for details of any actions planned to address this and was told that the data have only recently been made available. There will be a review of entry requirements over the summer, and the standards expected in the preparatory year will also be reviewed. The provider is further analysing the data to review performance by different groups such as mature students and those from lower socio-economic backgrounds. The team was pleased to see that this has been identified as a priority, especially given the growing proportion of students on the on the MPharm admitted from the MPharm with Preparatory Year. Criterion 2.4 (Every year, there must be a review of student performance broken down by protected characteristics, as defined in relevant equality and human rights legislation. Documented action must be taken to address differences when they are found) is therefore likely to be met and will be reviewed at the part 2 event.

Standard 3: Resources and capacity

Resources and capacity must be sufficient to deliver the learning outcomes in these standards

Criterion 3.1 is:	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 3.2 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 3.3 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

The team was concerned that the risk register provided in the submission showed several critical risk scores and asked how these were being managed, monitored and reviewed and by whom. The provider explained that an updated version of the risk register was now available. This was provided to the team at the event. The team was pleased to note that the risk register is being actively managed and that several risks had been addressed. The remaining high risks were associated with the lack of funding for students to travel to placements (see Standard 2), staff morale and student numbers. These risks align with those identified by the team during the event.

The team noted that several key staff had left the School and asked what gap analysis has been undertaken to ensure appropriate staffing levels and an appropriate skills mix is maintained. The provider explained that senior research staff have left and have been replaced with more junior, practice-based staff in line with the demands of the updated MPharm course. The provider intends to recruit more pharmacist independent prescribers to meet the changed focus of the MPharm, and would also like to rebuild the research expertise in the School over time.

The team was taken on a tour of the teaching facilities available to students on both courses and was particularly impressed with the large and well-equipped laboratory spaces.

The team received assurances that appropriate levels of resource will continue to be committed to the MPharm and MPharm with Preparatory Year. These are seen as business-critical courses for the

University and all requests for new staffing have been approved, despite a university-level freeze on recruitment. Whilst the team was satisfied with the current levels of resource for the courses and acknowledged the commitments for continued support given by the university, the significant ongoing financial uncertainties at the university level mean that there remains a risk of future lack of resource. Criterion 3.1 (There must be robust and transparent systems for securing an appropriate level of resource to deliver a sustainable MPharm degree that meets the requirement of these standards) is therefore likely to be met and will be reviewed at the part 2 event.

Standard 4: Managing, developing and evaluating MPharm degrees

The quality of the MPharm degree must be managed, developed and evaluated in a systematic way

Criterion 4.1 is:	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 4.2 is:	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 4.3 is:	Met <input type="checkbox"/>	Likely to be met <input checked="" type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 4.4 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 4.5 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 4.6 is:	Met <input checked="" type="checkbox"/>	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

The team noted that the experiential learning strategy is still under development and was submitted as a draft for this event. The team asked the provider to describe how the strategy will be finalised and implemented. The provider explained that there is an intention to grow placement capacity but that this will take time. A range of placement lengths is therefore shown in the current placement programme. The provider stated that they have good engagement with community pharmacy multiples and independent local pharmacies, as well as strong links with local NHS Trusts. Relationships with GP practices are being developed through integrated care boards.

The team asked the provider to describe the process by which new placements are sought, approved and secured. The provider explained that they received NHSE funding to pump-prime this process, which was used for meetings with potential placement hosts. Over the next few months, agreements for the 2023-24 placements will be signed. The provider has set a catchment area of an hour's commute, although the planned 4th year block placement may go beyond this, according to student's preferences.

A new placement management system will be in place to assist with the allocation of placements from the 2023-24 academic year.

Notwithstanding plans for growth, the team asked the provider to clarify the *minimum* number of placement days that will be included in the course from 2023-24 and was told that these are:

- Preparatory Year: half day community pharmacy orientation
- MPharm Year 1: five-day over the counter placement in community pharmacy, half a day in hospital, half a day in primary care, plus 20 hours of volunteering
- MPharm Year 2: five days of hypertension screening and 20 days (2 days per week) in community pharmacy
- MPharm Year 3: five days in secondary or primary care, plus a five-day vaccination placement
- MPharm Year 4: a four-week block placement focused on quality improvement

The team would have liked to see further progress at this stage with implementation of plans for experiential learning. More qualitative detail of the placements themselves, rather than simply the duration of each placement, is also needed. Therefore:

- Criterion 4.1 (There must be systems and policies in place to manage the delivery of the MPharm degree, including the periods of experiential and inter-professional learning); and
- Criterion 4.2 (There must be agreements in place between everyone involved that specify the management, responsibilities and lines of accountability of each organisation, including those that contribute to periods of experiential and inter-professional learning)

are likely to be met and will be reviewed at the part 2 event.

The School has an expert advisory group which has representatives from senior roles in the pharmaceutical industry and the NHS which meets to discuss a wide range of School-related issues approximately every six months. There is also a Patient and Public Involvement (PPI) group that has met every four months in the last year to discuss changes to the MPharm course.

The team asked for examples of where the programme design or delivery has been amended following input from these external stakeholders, and was told that the idea for the drop-in session for applicants invited to interview (see Standard 1) came from the PPI group. Members of the group have also been involved as patients on the course.

It was noted that the views of patients and the public have not yet fed into the design of the MPharm with Preparatory Year, although this is planned. Criterion 4.3 (The views of a range of stakeholders – including patients, the public and supervisors – must be taken into account when designing and delivering MPharm degrees) is therefore likely to be met and will be reviewed at the part 2 event.

There are several routes for students to provide feedback on their course, including a Student Staff Liaison Committee, which includes students on the MPharm with Preparatory Year, module evaluations, placement evaluations and representation on the Teaching Committee. The team asked for examples of how the programme design, delivery or assessment has been amended following input from students and was told that concerns had been expressed by those in the later years of the MPharm about not having prescribing status when graduating. As a result, some of the diagnostic skills training has been brought into the current Year 3 to give those students the opportunity to benefit from this new material. These students are also given information about undertaking the prescribing course when they graduate.

There is Teaching Excellence Plan for the School which combines feedback from students, course and module reviews and external examiners and which identifies good practice and sets out an annual plan that is regularly reviewed and updated by the Teaching Committee.

Any significant changes in pharmacy law and practice are identified by course staff and course material updated accordingly. If changes are made after material has been taught and assessed, students will cover the changes in an update session in Year 4.

Standard 5: Curriculum design and delivery

The MPharm degree curriculum must use a coherent teaching and learning strategy to develop the required skills, knowledge, understanding and professional behaviours to meet the outcomes in part 1 of these standards. The design and delivery of MPharm degrees must ensure that student pharmacists practise safely and effectively

Criterion 5.1 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 5.2 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 5.3 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 5.4 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 5.5 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 5.6 is:	Met <input type="checkbox"/>	Likely to be met ✓	Not met <input type="checkbox"/>
Criterion 5.7 is:	Met <input type="checkbox"/>	Likely to be met ✓	Not met <input type="checkbox"/>
Criterion 5.8 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 5.9 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 5.10 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 5.11 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 5.12 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 5.13 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

There is a School and MPharm teaching, learning and assessment strategy which provides an overview of the course philosophy and quality assurance processes, and module handbooks provide the detail of the learning outcomes and assessment methods. With the planned changes to meet the new GPhC standards, Years 1-3 of the MPharm will consist of one 120-credit module each year, with the final year being an 80-credit module and a 40-credit research project module. This allows the provider to integrate teaching, assessments and placements across the year.

The team asked how the provider ensures that students' experience of working with patients, carers and other healthcare professionals is progressive, increases in complexity and takes account of best practice. The provider stated that this builds throughout course and is mapped by students as they achieve core competencies and collect evidence. The team asked if there is a risk of students not being exposed to a breadth of experience given the very specific nature of some of the experiential learning, for example the hypertension placement. The provider has considered this risk and is confident that the experience underpinning each placement will deliver the breadth required.

As the placement plans are not yet realised, particularly those in GP practice, criterion 5.6 (The MPharm degree curriculum must include practical experience of working with patients, carers and other healthcare professionals. Student pharmacists must be exposed to an appropriate breadth of patients and people in a range of environments (real-life and simulated) to enable them to develop the skills and the level of competency to achieve the relevant learning outcomes in part 1 of these standards. This experience should be progressive, increase in complexity and take account of best practice) is likely to be met and will be reviewed at the part 2 event.

The team asked how the teaching of clinical skills has been developed to support prescribing in different practice settings and asked if placement activities include exposure to different specialities. The provider stated that there will be opportunities in the simulation suite, using the GP, hospital, and community settings. The goal is to provide as much experience as possible in practice, but it will take time for students to have access to appropriate supervisors. The focus will be on developing skills throughout the course, starting in year 1 with rapport building, issues of consent and basic clinical assessments, building to complex patients, multi-professional communication and consolidation of practical skills in year 4, so that students are ready to prescribe at the point of graduation, but are not yet prescribing specialists.

Interprofessional learning (IPL) at the University of East Anglia was previously coordinated by the Centre for Interprofessional Learning. However, the Centre is no longer funded, and IPL activities have continued with relevant Schools working together. All MPharm students undertake IPL with up to 13 different health and social care professions:

- In year 1 students form multi-professional groups to discuss and explore patient healthcare journeys at different stages of life.
- In year 2 students undertake an IPL shadowing placement with a focus on communication.
- In year 3 they undertake a joint placement with a medical student where they will identify a patient together in hospital and take a full history and develop a care plan. The pairs of students then discuss their cases in small groups with a facilitator to decide on the appropriateness and completeness of their care plans.
- In year 4 students experience a joint interprofessional clinical skills simulation where they work in multi-professional pairs through a series of stations designed to support them working together to effectively manage a range of situations.

A purposeful plan for these sessions will be developed, along with plans to increase the IPL opportunities for students, including plans for a hospital simulation with nursing students and plans for pharmacy to be included in University-wide large-scale simulations of major events. Students expressed some dissatisfaction with the current level of IPL on the MPharm course, but valued the opportunities where they existed. Criterion 5.7 (During the MPharm degree, there must be an inter-professional learning plan. Student pharmacists must engage with inter-professional education (IPE) through a progressive strategy based on the Centre for the Advancement of Interprofessional Education’s Interprofessional Education Guidelines (CAIPE, 2017). IPE must mirror practice and must focus on interaction with other health and social care professionals. Engagement with students from other health and care professions must begin at an early stage, progressing to more complex interactions to enable students to develop the skills and level of competency they need to achieve the relevant learning outcomes in part 1 of these standards) is therefore likely to be met and will be reviewed at the part 2 event.

Academic regulations and fitness to practise procedures for both courses are appropriate. Should a student fail an examination they will resit in the summer, regardless of when their first sit took place; there is no January resit period. The provider tries to identify failing students early and support for reassessments is given to whole groups and individually, as required. Students can be permitted to retake a year if they have serious extenuating circumstances. Disciplinary and fitness to practise procedure must be concluded before a degree is conferred.

Standard 6: Assessment

Higher-education institutions must demonstrate that they have a coherent assessment strategy which assesses the required skills, knowledge, understanding and behaviours to meet the learning outcomes in part 1 of these standards. The assessment strategy must assess whether a student pharmacist’s practice is safe

Criterion 6.1 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.2 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.3 is:	Met <input type="checkbox"/>	Likely to be met ✓	Not met <input type="checkbox"/>
Criterion 6.4 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

Criterion 6.5 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.6 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.7 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.8 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.9 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.10 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.11 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.12 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.13 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 6.14 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

A broad range of assessment methods are used across the four years of the MPharm course, including a professional portfolio which accounts for 40% of the year 1 mark, rising to 45% in year 2 and 50% in years 3 and 4. The team asked for clarification of the progression rules for the OSCEs and was told that students usually have to pass two thirds of the stations.

Appropriate blueprinting and standard setting methods are used for all assessments, including OSCEs and calculations assessments. Students are informed of the standard setting process and the standards required for each assessment at the start of each year. Assessments are reviewed by the module lead and course director, as well as the external examiner. All assessments are moderated once marked.

The team asked how the provider ensures that patient safety is maintained as part of the assessment process and was told that from year 1 students will fail an assessment if their actions or answers would have caused patient harm. Students are given information about what constitutes a critical fail and are given examples. Patient feedback on assessments is given by actors used in OSCEs, as well as in patient satisfaction questionnaires completes as part of a simulation exercise.

The team asked how and by whom assessments at the 'does' level will be carried out and was told that students will collect evidence of repeatedly completing core tasks and achieving competencies in practice and will document this in their placement log which forms part of their portfolio. Core tasks and competencies are mapped to the GPhC learning outcomes. A sample of portfolios will be moderated in the School. There are no summative marks given on placement, but the portfolio is summatively assessed. Optional activities are also identified in the placement workbook and recorded in the log. Students are required to bring patient cases back to the University for discussion and peer review.

In addition, students will be signed off in the University as being competent in various diagnostic and clinical skills by clinical teachers in that area. Over time, the intention is for these skills to be assessed in practice. As there is still some uncertainty about how assessments at the 'does' level will be carried out, criterion 6.3 (Assessment plans for the MPharm degree must assess the outcomes in part 1 of these standards. The methods of assessment used must be: a. appropriate to the learning outcomes, b. in line with current and best practice, and c. routinely monitored, quality assured and developed) is likely to be met and will be reviewed at the part 2 event.

The team asked how placement providers are trained and supported to give feedback to students and was told that they must undergo mandatory training in assessment. The feedback that they give to students is reviewed via the moderation of portfolios and student feedback is also reviewed.

The MPharm with Preparatory Year consists of six 20-credit modules and is assessed by a mixture of coursework and exams. Students on this course also complete a portfolio to mirror that used in the MPharm.

The team heard conflicting evidence about the quality and timeliness of summative and formative feedback given to students on both course variants. Students felt strongly that feedback was often outside stated timescales, or that deadlines were unreasonable. The provider explained, for example, that University deadlines only apply to some assessments, and that lab reports, which were a source of particular concern for students, were originally intended to be completed during the class, hence the short deadline. The team encouraged better communication with students about how criterion 6.9 (Higher-education institutions must support students to improve their performance by providing regular and timely feedback and by encouraging students to reflect on their practice) is met.

Standard 7: Support and development for student pharmacists and everyone involved in the delivery of the MPharm degree

Student pharmacists must be supported in all learning and training environments to develop as learners and professionals during their MPharm degrees. Everyone involved in the delivery of the MPharm degree should be supported to develop in their professional role

Support for student pharmacists

Criterion 7.1 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 7.2 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 7.3 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 7.4 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

Support for everyone involved in the delivery of the MPharm degree

Criterion 7.5 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 7.6 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 7.7 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>
Criterion 7.8 is:	Met ✓	Likely to be met <input type="checkbox"/>	Not met <input type="checkbox"/>

A range of School and University-level support mechanisms are available to students and they are told about these in the induction session and in a course handbook. Each student is assigned a personal advisor who is a member of academic staff in the School. Students were aware of their advisors and said they were available if needed, but that regular meetings with them were not scheduled and the support they receive is variable.

Students are supported with appropriate teaching and preparation for their placements, including mandatory completion of an eLearning for Healthcare course on safeguarding vulnerable adults and children. Students who had completed the MPharm with Preparatory Year said that they would have liked more exposure to the profession during that year. Processes for raising concerns, including concerns about placements, are in place and students are made aware of them.

Staff are supported with appropriate training, including clinical skills training updates for the MPharm course. Non-pharmacist staff have been introduced to the variety of pharmacist roles and the move to prescribing on graduation so that the focus is now on training healthcare professionals.

Teach out and transfer arrangements

The MPharm course underwent a major redesign in 2018 which anticipated many of the changes in the new GPhC standards. Therefore, further changes considered at this event have largely been to create space in the timetable for experiential learning and to introduce prescribing skills. This has been achieved by focusing on essential content and removing overlap. No content is moving between years to prevent complications on transfer. There is therefore no requirement for transfer arrangements for whole cohorts. Any arrangements needed for individual students because of resits will be dealt with on a case-by-case basis.

Decision descriptors

Decision	Descriptor
Met	The accreditation team is assured after reviewing the available evidence that this criterion/learning outcome is met (or will be met at the point of delivery).
Likely to be met	The progress to date, and any plans that have been set out, provide confidence that this criterion/learning outcome is likely to be met by the part 2 event. However, the accreditation team does not have assurance after reviewing the available evidence that it is met at this point (or will be met at the point of delivery).
Not met	The accreditation team does not have assurance after reviewing the available evidence that this criterion or learning outcome is met. The evidence presented does not demonstrate sufficient progress towards meeting this criterion/outcome. Any plans presented either do not appear realistic or achievable or they lack detail or sufficient clarity to provide confidence that it will be met by the part 2 event without remedial measures (condition/s).

