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Welcome from the registrar

On behalf of the General Pharmaceutical Council (GPhC), let me welcome you to your foundation training year.

The GPhC is the independent pharmacy regulator in Great Britain. Our role is to protect the public and give them assurance that they will receive safe and effective care when using pharmacy services. We set standards for pharmacy professionals and pharmacies to enter and remain on our register, and we seek assurance that pharmacy professionals and pharmacies continue to meet our standards, including by inspecting pharmacies.

We act to protect the public and to uphold public confidence in pharmacy if there are concerns about a pharmacy professional or pharmacy on our register. Through our work we help to promote professionalism, support continuous improvement and assure the quality and safety of pharmacy.

We are involved in the lives of pharmacists from the day they start their education and training. We set the standards for the initial education and training of pharmacists (January 2021) and we accredit MPharm and OSPAP programmes. We also approve training arrangements for the foundation training year (which replaces the pre-registration year from July 2021), and set and run the final assessment that you will have to pass before you can apply to be registered as a pharmacist.

The foundation training year gives you the opportunity to develop and demonstrate that you have the skills, knowledge, understanding and professional behaviours to practise to the standards expected of a pharmacist. During the 52 weeks of the foundation training year you will be able to apply your academic knowledge in real-life situations and you should take every opportunity to learn and gain experience throughout the year.

Your foundation training year is not just about assessments, but about learning how to practise in a way that delivers the best outcomes for patients and members of the public. Your designated supervisor(s) for the foundation training year can help to guide you in these areas.

During the foundation training year, we will communicate with you through myGPhC and per email.

We encourage you to familiarise yourself with the resources on our website. You can also consult our bi-monthly e-newsletter Regulate.

I hope that you enjoy your foundation training year. If you have any questions or feedback on the foundation training scheme, please do contact us.

Best wishes

Duncan Rudkin
Chief Executive and Registrar
1. The foundation training year

1.1 Key features

The key features of the foundation training year are:

- it takes at least 52 weeks (if done full time)
- you will train under the supervision of one or more designated supervisor(s)
- you must be formally assessed ‘signed off’ at least four times by your designated supervisor(s)
- you must pass the registration assessment (you can have only three attempts at this)
- there are limits on the time allowed to finish the foundation training year, and these are explained in the GPhC Criteria for registration as a pharmacist.

1.2 Time limits

To make sure you have up-to-date knowledge and skills when you apply to register as a pharmacist, we put a time limit on successfully completing the full initial education and training pathway. You must complete your initial pharmacy education and training successfully and apply to register with the GPhC within:

- eight years of the date you began your MPharm degree (or nine years if you completed an accredited foundation degree course before the MPharm degree), or
- four years of the date you began your OSPAP postgraduate diploma

1.3 Special circumstances for extending the time limits

We may extend the limits if your training has been interrupted, or if you have had to complete it part time, for example because of:

- part-time study
- reasonable adjustments to accommodate a specific need
- maternity or paternity leave
- a serious illness
- time spent serving in the Army Reserves or completing national service
- an international pandemic

We will only grant extensions on the basis of appropriate evidence. This could include evidence from an appropriately qualified professional.

If you think your circumstances may mean you can have the time limits extended, please contact us.
2. Making the most of your foundation training year

2.1 The aim of the foundation training year

To become a pharmacist, you must be able to demonstrate that you have the knowledge (by passing the registration assessment) and experience (developed during the foundation training year) needed to practise as a pharmacist.

When mistakes happen, professionalism can be tested. But in the end, we believe professional practice offers the best protection for patients and people who use pharmacy services.

The foundation training year gives you the chance to apply your academic knowledge in a real-life situation. The aim is for you to develop and demonstrate the skills, knowledge, understanding and professional behaviours you need to practise to the standards expected of a pharmacist, and in a way that delivers the best outcome for patients and members of the public.

2.2 GPhC's Standards for pharmacy professionals

The standards for pharmacy professionals are relevant to you (and to all student and trainee pharmacists) while you are on your journey towards registration and practice.

These standards explain the skills, knowledge, understanding and professional behaviours, to demonstrate how safe and effective care is delivered through 'person-centred' professionalism, that will be expected of students and trainees if they apply to join the Register. You should use them as a tool to help you prepare for registration and read them alongside other relevant documents that are provided by your education and training provider.

The public expects pharmacists to be competent and fit to practise pharmacy. We set standards that pharmacy professionals are expected to meet if they are to become registered and stay registered.

Demonstrating that you have kept to our standards is part of the registration process. You will spend at least 26 weeks working in a patient-facing role, and everything you do during this time (and throughout your training) should show that you are keeping to our standards.

If you are not able to show that you have kept to these standards it could affect your eligibility to register – even if you are signed off by your designated supervisor and pass the registration assessment.

We have guidance which tells you more about our standards and supports all pharmacy professionals in practising safely and effectively. You can find:

- Guidance on patient confidentiality
- Guidance on consent
- Guidance on maintaining clear sexual boundaries
• Guidance on raising concerns
• Guidance on religion, personal values and beliefs
• Guidance on demonstrating professionalism online

2.3 The professional duty of candour

Duty of candour to patients
Health professionals must be open and honest with patients when something goes wrong with their treatment or care which causes, or has the potential to cause, harm or distress. This is known as ‘the duty of candour’.

This means that healthcare professionals must:
• tell the patient (or the patient’s advocate, carer or family if this is appropriate) when something has gone wrong
• apologise to the patient (or the patient’s advocate, carer or family if this is appropriate)
• offer an appropriate remedy or support to put matters right where possible and explain fully to the patient the long- and short-term effects of what has happened (or explain to the patient’s advocate, carer or family if this is appropriate).

We work with other regulators, employers and commissioners of services to help develop a culture in which the principles of openness and honesty are shared and acted on.

We expect and encourage all registrants to reflect on their own learning and continuing professional development needs concerning the duty of candour.

Duty of candour to others
Healthcare professionals must also be open and honest with their colleagues, employers and other relevant organisations, and take part in reviews and investigations when they are asked to. They must support and encourage each other to be open and honest and not stop someone from raising concerns.

Healthcare professionals must also be open and honest with their regulators, raising concerns when this is appropriate.

If you are raising a concern about someone or something at your place of work, read our guidance on raising concerns.

2.4 Designated supervisor assessments (‘sign offs’)

Many trainee pharmacists worry so much about the registration assessment that they do not focus enough on their training. Under the foundation training scheme, you will need to be signed off by your designated supervisor(s) four times – at 13, 26, 39 and 52 weeks.

You are not eligible to sit the registration assessment unless you get a satisfactory progress report (please see section 4.2) on your progression towards demonstrating the interim learning outcomes at 39 weeks. Therefore, getting the most out of your foundation
training year is every bit as important as passing the registration assessment.

The week-52 sign-off is called the ‘final declaration’. Your designated supervisor(s) needs to be sure that you are competent in all areas of practice and have demonstrated all of the interim learning outcomes to the expected level before they are able to sign off the final declaration. If any areas of your performance raise doubt that this is the case, we would not expect your designated supervisor(s) to sign your final declaration (please see section 4.11). If this happens, you may have to complete an extra 26 weeks’ training somewhere else – unless your employer is able to extend your present training placement.

Your designated supervisor(s) can, if they feel it is appropriate, sign off the 52-week declaration. But they should only do so if they feel that you have met the required standard, not because you want to register on a particular date. Once the designated supervisor signs the declaration, they are not able to revoke it. This means that if you do not preform to the required standard after you have been signed off, this would be considered as a fitness to practise concern. Only one of your named designated supervisors will be nominated to complete the declaration on MyGPhC, however we would expect the designated supervisor to communicate with anyone else with oversight of your training including any other designated supervisors, training leads, other health professionals or senior managers to inform their assessment decisions. There is a requirement for the details of a second named professional to be detailed as part of the declaration.

It is up to you to make the most of your foundation training year and develop the skills, knowledge and behaviours you will need to work independently as a professional pharmacist.

2.5 What are the key points in the foundation training year?

You can see the dates and deadlines for the foundation training year on the key dates page on the main GPhC website.

Step one: Complete your application through myGPhC. Apply by the deadline for the assessment you want to take.

Step two: Check your training details – if they change from the ones recorded on myGPhC, use a Change of training details form to tell us.

Step three: You and your designated supervisor must complete a progress report at 13 weeks. If you report is unsatisfactory, your designated supervisor should send us a PDF copy of the report and the assessment summary.

Step four: You and your designated supervisor must complete a progress report at 26 weeks. If you report is unsatisfactory, your designated supervisor should send us a PDF copy of the report and the assessment summary.

Step five: You and your designated supervisor must complete a progress report at week 39 and decide if you are ready to sit the registration assessment. Submit your report, and registration assessment application through myGPhC.

Step six: You and your designated supervisor must complete a progress report through myGPhC at week 52, and decide if you are competent to practise as a registered pharmacist.
Step seven: Submit a registration application, from 49 weeks. See the application guidance for more information.

Step eight: Join the register once you completed 52 weeks of training.

2.6 The learning contract

Your designated supervisor plays a key role in your training year. If you would like to find out more about their role, go to the designated supervisor section on our website.

You enter into a learning contract with your designated supervisor as part of your application to join the foundation training scheme via myGPhC. The contract summarises how your training year will be delivered and must include:

- your details
- your designated supervisor's details
- details of where your training will take place
- how you will be supervised

If your designated supervisor changes during the foundation training year, you will need to enter into a new learning contract. So that we can review and approve the change, you must send us the new contract as part of a Change of training details form. The change will only be recognised once we have received the form and approved the change.

2.7 Your foundation training number

You will be given a unique foundation training number, which is printed on your welcome letter and is shown within your myGPhC account. This is the reference number you should quote if you contact us. Your training record is also included with your welcome letter, which you can download from myGPhC.

If you find any mistakes on your training record, you are responsible for telling us about them. If you do not, this could mean that we are not able to recognise your training, which could affect when you are able to sit the registration assessment.

Your training record displayed in myGPhC can't be edited. If you do need to tell us about any changes, make sure you complete a Change of training details form. We will send you an updated training record to confirm these.

If your personal details change during the year, including if you change your name, you should send us a Change of training details form so that we can update your record.

2.8 Funding for foundation training

We do:

- provide a training record as proof of your training arrangement, for you to give to your employer
- send you a new training record:
  - if your training site changes
  - if your training dates need to be extended

We do not:

- give funding for the foundation training year
- influence whether or not you are eligible for funding within any particular training arrangement or at any stage of training.

Therefore, we are not able to give advice on
whether you will be able to get funding for your training

• tell anyone else about your change of training arrangements, so any responsibility for telling funding providers about this lies with you or your employer (or both)

• show on your training record whether your training is full or part-time, so any responsibility for telling funding providers about this lies with you or your employer (or both)

• issue a training record to anyone other than the trainee named on the training record

• amend training records if you have incorrectly put the wrong dates on the application and have not notified us within the specified timeframe of seven days upon issue.

2.9 Restrictions on the training site and designated supervisor

To make sure there is an objective relationship between trainees and designated supervisors, you must not train anywhere that you:

• have a significant financial interest in, or have a significant relationship with a director, owner or employee

‘Significant’ relationships include:

• any family relationships, such as father, mother, aunt, uncle, cousin and so on

• family relationships through marriage or civil partnership

• girlfriend-boyfriend-partner relationships

• people you depend on financially or to whom you have a financial commitment

• people who depend on you financially or who have a financial commitment to you

In a public sector placement (for example an NHS hospital trust) where there is clearly no commercial interest, we will consider applications from trainees wanting to train at a site where a family member or partner works. However, the training provider is responsible for making sure that training and assessment is managed by someone else, to avoid any conflict of interest. Any operational issues that may arise through this must be managed by the training provider.

Important: the designated supervisor is responsible for approving the competence of their trainee. Any abuse of this responsibility resulting from any family relationship will be a fitness to practise issue for the pharmacist and we may terminate the trainee’s training placement.

2.10 Deciding where and how to train

Many trainees will train in one sector for the full 52 weeks. But increasingly there is also the option to train in more than one sector. There are patient-facing sectors, such as community pharmacy, hospital, prison, and non-patient-facing sectors such as the pharmaceutical industry, commissioning roles, academia and distance selling pharmacy and primary care.

If you decide to train in more than one sector, there are several options so long as at least 26 weeks is patient facing:

• joint training: you train for up to 26 weeks in a non-patient-facing sector and for at least 26 weeks in a patient-facing hospital or community pharmacy
• **split training**: you train in two sectors, both of which are patient-facing

• **multisector training**: you train for a significant proportion of your year in more than two sectors

Examples of training plans can include:

• the full 52 weeks in a single patient-facing sector

• joint training plans with six (or perhaps nine) months spent in a patient-facing sector and six (or perhaps three) months in a non-patient-facing sector

• split training plans with, for example, six (or perhaps nine) months spent in one patient facing sector and six (or perhaps three) months in another patient facing sector

• multisector plans across more than two sectors, with significant periods in each sector which may be equal or unequal. Overall, at least six months must be patient-facing

• integrated training, where training in more than one sector takes place at the same time. An example would be where training in one sector takes place for several days per week, and training takes place in another sector/sector(s) in the same week. Overall, at least six months must be patient-facing

One university in Great Britain – Bradford – offers a five-year degree including two 26-week periods of training in different academic years. This is known as ‘sandwich’ training – if you are on a sandwich course, you will have made this choice when you applied to Bradford as an undergraduate.

The University of Nottingham, University of East Anglia and Keele University run five-year pharmacy courses that include a foundation training year. Although our foundation training scheme requirements still apply to Nottingham, UEA and Keele students, any foundation training year you do as part of these courses must also comply with university regulations.

### 2.11 Non-patient-facing sites

Training can be undertaken in non-patient-facing sites as part of a joint placement for a maximum of 26 weeks and must form part of the 52-week training plan.

Non-patient-facing training sites could include:

• the pharmaceutical industry

• primary care organisations or their equivalent

• academia

• commissioning roles

• distance selling pharmacy

The list is not limited to these sectors of practice. Before you agree your training plan for training in any other type of non-patient-facing site, you will need to apply to the GPhC.

Training can be undertaken in a variety of blocks of time across various sectors. Sites must be suitable to support a trainee and their training. You can [find out more about becoming a training site](https://www.gphc.org.uk) on the main GPhC website.

### 2.12 Full- and part-time training

Usually training is full time, which means working between 35 and 45 hours a week.

You must agree any arrangements to work part time with the GPhC in advance. ‘Part time’
means working at least 17.5 hours a week, over at least three days a week. This might be agreed before you start training or as the result of a change in circumstances during the year.

Things to consider when deciding if a part-time training arrangement is right for you:

- Will you still be eligible to sit your chosen assessment? To enter the registration assessment, you will need to complete at least the equivalent of 39 weeks’ full-time training by the assessment entry date for any particular sitting.

- Can you meet the Criteria for initial registration as a pharmacist with the GPhC? You should complete your part-time training within the time limits given, and there is no extra time allowed if you choose to train part time.

- Will you have enough contact time with your designated supervisor(s)? You should make sure that the hours you usually work each week overlap with your designated supervisor(s) for at least 80 per cent of the time you are working.

- Will your part-time arrangement affect any other trainees? Usually your designated supervisor will only be allowed to supervise one trainee at a time. If changing to a part-time arrangement means your training will overlap with that of another trainee, you should discuss with us whether the arrangement meets our requirements.

Your employer must also agree that their standard training plan can be changed to fit in with this arrangement and still give you the opportunity to meet all the interim learning outcomes.

2.13 Training outside Great Britain

You may carry out up to 13 of the 52 weeks of your training in a pharmacy in a member state of the European Union. This must be one continuous placement and must be completed between weeks 13 and 26 of training. The training outcomes for those 13 weeks must form part of your training plan, and you must agree them with your designated supervisor and the GPhC before you start your training year.

2.14 Training at another site in Great Britain

Unless you get our agreement first, you may only train outside your main training organisation in one of two ways:

- five days in ‘unlisted’ training sites (that is, a site that is not approved for a foundation training year)
- four weeks in a listed training site

You can only do each of these things once in a training year without specifically agreeing it in advance as part of your training plan, or as part of your application to enter training.

2.15 Attendance requirements

If you are absent for more than 40 days during your foundation training year – for whatever reason – you must tell the GPhC as this may affect your eligibility to sit the registration assessment or to register on a particular date. The 40-day limit includes public holidays, sickness and annual leave. For part-time training arrangements, the 40 days applies to the whole training period. If you are training part-time, you must have been in training for the equivalent of 39 weeks of full-time training.
For example, if your training will take 104 calendar weeks to complete, you will need to have been in training for at least 78 weeks by the assessment entry deadline.

If you are absent for more than 40 days, you will need to complete additional training to be eligible to sit the registration assessment. You must have completed at least 39 weeks of training by the application entry deadline for the sitting.

If you are absent for more than 40 days before your 39-week progress review, you should delay the review until you have worked the additional days that have been missed to have completed the equivalent of 39 weeks training.

If the revised date of your 39-week progress review is before the assessment entry deadline for that sitting and you are assessed as satisfactory, you could still meet the eligibility criteria for that sitting. Any additional absence after you have met the entry criteria will not affect your assessment eligibility, but you should refer to section 5.6.

In all cases, to meet the criteria for registration as a pharmacist, you must complete 52 weeks foundation training (during which you can be absent for up to 40 days). If you are absent for more than 40 days during the 52 weeks, you should complete an extra training day for each extra day of absence. This will affect the earliest date that you can register as a pharmacist, if your revised training end date passes the 1st or the 15th of the month (the days on which you can join the register).

It is ultimately up to your designated supervisor, as part of their final assessment of your progress, to decide if you need to complete additional training at the end of 52 weeks, if 40 days absence has been exceeded due to a requirement to isolate. To make this decision, they will need to consider all factors that arise over the 52 weeks, and any impact that contributes to a delay in your training progression. They will also record your additional absence as part of the final progress report and declaration.

You must tell us of your new finish date by submitting a Change of training details form, so that we can update your records.

2.16 Starting dates

Normally, there are two fixed dates in the training year linked to a deadline to start your training:

- the summer registration assessment
- the autumn registration assessment

Because you must have been signed off as satisfactory at 39 weeks to be eligible to enter the assessment, you must start your training before a set date – which is set out on the key dates page.

If you have chosen to train part time, your latest starting dates will depend on your training arrangement. Contact us for confirmation of the dates that will apply to you.

2.17 Breaks in the foundation training year

If you are planning to take a break in your training, you need to contact us before your interrupt your training.

You also need to contact us before you resume your training to let us know your starting dates.
2.18 Your designated supervisor

You must have a designated supervisor, for any training locations where you spend 13 weeks or more during the training year, who must be approved by the GPhC. The designated supervisor(s) have the overall responsibility for you during your training and for signing you off as satisfactory or unsatisfactory. Usually the designated supervisor(s) will only be responsible for one trainee at a time.

If your designated supervisor’s previous trainee has not finished their training by the time you are due to start yours, your designated supervisor(s) will be permitted to train two trainees for a maximum of 13 weeks – so you won’t need to wait until the previous trainee has finished before starting your placement.

Your designated supervisor(s) must have worked as a registered pharmacist for at least three years in the UK, in the sector of practice (or in a sector which parallels the service they are currently providing) in which they plan to supervise you. If they are under investigation by the GPhC, they will be assessed for suitability under our foundation training designated supervisor suitability policy. If you are aware of any conditions or restrictions on your designated supervisor’s registration at any point before or during your training, contact us.

Your designated supervisor is expected to meet with you at least once a fortnight to make sure you get regular feedback, and must carry out a formal review of your progress at 13, 26 and 39 weeks, and at the end of your training (by completing a ‘final declaration’, if applicable). See section 2.4 for more information about final declarations.

If your designated supervisor cannot work full time with you (at least 28 hours over four days each week), we will consider approving more than one designated supervisor to work with you. (This is called a ‘joint-supervising arrangement’.) This must be approved in advance and will apply to all areas of practice.

If you are following an integrated, split, joint or multi-sector training programme, we expect there to be more than one GPhC approved designated supervisor involved in your training. This could be either as part of a joint supervising arrangement throughout the year, or as individual designated supervisor for specified dates. It is important that this responsibility is shared in the case of joint designated supervisors or handed over appropriately between designated supervisors when they change over.

During the training year, you may be supervised for agreed periods by another healthcare professional, such as a pharmacist other than the designated supervisor, a pharmacy technician, a GP or a nurse. These supervisors are called ‘practice supervisors’.

Your designated supervisor is still responsible for you at all times, even when you are being supervised by a practice supervisor. Your designated supervisor must know who is supervising you.

Our guidance for foundation training supervisors will help you understand what you can expect from your designated supervisor. If you have any concerns about your designated supervisor or their behaviour, contact us.
2.19 Changing designated supervisors

Trainees may need to change designated supervisor(s) for a number of reasons. A designated supervisor could leave a pharmacy, or personal or professional differences could develop between a trainee and designated supervisor, for example.

If you change your designated supervisor(s), you must tell us using a Change of training details form, and include your new learning contract. The new designated supervisor(s) must also meet GPhC requirements.

2.20 Your training sites

Your training programme must have been approved for the full period of your foundation training by the GPhC before you will be allowed to start your training. You can search the list of approved foundation training sites here. There may be more than one programme listed for your training site and you should check that the programme that you are planning to follow is one of those listed, particularly if you are not due to be based at a single site for the full 52 weeks.

2.21 Resources and support

We expect training sites to have up-to-date core reference sources, including those online, for use by employees, including trainees. We realise you may want to look for support when you are preparing for the assessment. But we do not endorse any reference sources, books or websites that claim to offer support or sample questions. Examples questions are available in section 5 of this manual.

2.22 Changing training site or training programme

If you do change sites, you and your designated supervisor(s) need to fill in the relevant sections of the final declaration form.

Trainees based in Scotland or Wales should discuss any proposed changes or options directly with NES or HEIW in the first instance.

If you do need to change, there are three main options:

Changing to a site within the same organisation

If circumstances at your named training site change, you may need to relocate within the organisation. As long as you are following the same training programme at the original site, you can move to another approved training site once the arrangement has been agreed by the GPhC. You must tell us about this using the Change of training details form. You will need a new learning contract at your new site and you should send us this with the change of training details form.

If this also involves a change of designated supervisor(s), you must also tell us about this on the Change of training details form and fill in the learning contract section. This is because you and your designated supervisor(s) will be entering into a new learning agreement.

If you are changing training site address because the pharmacy you are training at has moved, you must make sure that the new site is approved for training.

Check with your designated supervisor that they have submitted an Application for provision of foundation training form with the application to register the pharmacy premises.
Changing to a different programme within the same organisation

If circumstances change or you are finding it difficult to manage an integrated or multisector training arrangement, you may need to change the training programme that you were linked to when your application was approved by the GPhC.

In this instance you should contact us for further advice on your options to allow us to assess whether you can be transferred directly to the new programme or whether you need to ‘start again’ from the week following the date on which your last documented satisfactory progress review was due.

You must tell us about this using the **Change of training details form**.

If this also involves a change of designated supervisor(s), you must also tell us about this on the **Change of training details form** and fill in the learning contract section. This is because you and your designated supervisor(s) will be entering into a new learning agreement.

**Changing to another organisation**

Before choosing this option, remember:

- you may be under contract to your employer for the full training period
- it could be seen as unprofessional conduct to break an agreement you have made with your employer
- if you are having problems with your employer, then sorting them out will help you to manage similar challenges in your future practice
- changing to another site will not necessarily mean an improvement in training. Consider what you are expecting to get out of the change, and check how you can make sure this happens
- the programme at your new site must be approved by the GPhC for the full training period
- you need our approval for the new training arrangement before the change, so you need to send us a **Change of training details form** or approval before you move to the new site
- all previous progress reports must be disclosed to your new designated supervisor(s). You should be open and honest with the new site about the circumstances leading to your need to move

We would not expect you to stay in a situation where you feel that your personal safety is at risk.

Your eligibility to sit the registration assessment for the first time may also be affected. We only recognise 13-week blocks of satisfactory training. So your training at a new site will ‘start again’ from the week following the date on which your last documented satisfactory progress review was due.

However, if this is the 39-week progress review, your training will go back to week 27. This is to make sure there is enough time to make a full and fair assessment of your competence. To make an application to register, you must have completed at least 26 weeks' training at the new site. But you would be able to apply for the registration assessment if you have a documented satisfactory week-39 progress review.
If you feel that a move to another organisation is your best training option, please contact us to discuss arrangements.

**Changing to another organisation due to a change of ownership of your training site**

You should contact us as soon as you are aware that a change of ownership is planned at your training site. Even if you stay at the same site, we would class this as a change of organisation if the ownership changes. Your eligibility to sit the registration assessment for the first time may also be affected. We only recognise 13-week blocks of satisfactory training. So your training at a new site will ‘start again’ from the week following the date on which your last documented satisfactory progress review was due.

However, if this is the 39-week progress review, your training will go back to week 27. This is to make sure there is enough time to make a full and fair assessment of your competence. To make an application to register, you must have completed at least 26 weeks' training at the new site. But you would be able to apply for the registration assessment if your previous designated supervisor has completed a satisfactory week-39 progress review via myGPhC.

**Important:** if you want to continue training at the site after the change of ownership, the new owner will need to apply to us for the site to be approved to provide foundation training.

### 2.23 Recognising and ‘banking’ blocks of training

If your training is interrupted, or if you change your training provider, you may need us to recognise blocks of training you have already completed satisfactorily. This is so that you can ‘bank’ the training and transfer it to another provider, in case you cannot pick up your training with your present one.

You will need to send us a [Request to bank training form](#) to allow us to recognise the progress you have achieved.

You will also need to do this if you do not have a satisfactory final declaration at the end of your foundation training and you are not able to stay on with your present training provider. This applies even if you have already made a satisfactory attempt at the registration assessment.

You may only bank training:

- that has been signed off as satisfactory by your designated supervisor
- in 13-week blocks that have been assessed by your designated supervisor using the GPhC progress report form.
- up to a limit of 26 weeks. This is to make sure that your new training provider has enough time to make a full and fair assessment of your competence to practise.

We are able to accept a satisfactory week-39 progress review from a previous training provider as meeting the assessment entry criteria. However, you should be sure that you feel ready to attempt the assessment, particularly if you have had a break in your training or if your reason for changing sites is related to your competence.

If you have not had any progress reports signed as satisfactory, but your designated supervisor(s), at the site where you are moving from, consider that you do not need to start...
training again from day one, your designated supervisor(s) can reassess you to see if you meet the standard for week 13 or 26 to be marked as satisfactory.

If you do not have any satisfactory progress reports at all you will be expected to restart training from day one at the start of the next training year the following summer.

Please contact us for further advice if the change only relates to part of a joint, split or multisector programme.

2.24 Pregnancy during training

Most of the issues connected to pregnancy will be covered by employment law, and will therefore be outside the scope of the GPhC.

The effect pregnancy may have on your training will depend on your circumstances and where you are in your foundation training year. But as a guide, the main issues you might like to consider are:

- Any health issues you have during pregnancy may mean you exceed the 40 days’ permitted absence this would mean you would need an extension to your training to cover the extra days.

- Your eligibility for a particular assessment sitting may be affected if your training needs to be cut short before the assessment entry deadline for that particular sitting.

- Your ‘fit to sit’ status may change between the assessment entry deadline and the day of the assessment. If you apply for a particular sitting, you can decide on the day whether you feel you are ‘fit to sit’.

- If you think you will need any ‘reasonable adjustments’ to allow you to take the assessment, you need to apply for them by the advertised deadlines. These cannot be arranged for you on the day without getting our agreement first.

Maternity leave

We do not dictate how much maternity leave you are allowed to take. But there are registration deadlines that you need to consider. Contact us if you think your maternity leave will affect your ability to meet these deadlines.

Your intended plan for returning to training following maternity leave may have changed by the time you are actually ready to return. So, although we are happy to discuss any plans you are proposing, we will only agree the training arrangement at the point when you are actually due to return.

When you start your maternity leave you must formally notify us within seven days of the last date you worked. You must also let us know at least two weeks before the date you intend to return to training.

The date you return may affect your eligibility for a particular assessment. This will be especially so if you work part time when you return, or if you are not able to return to the same training arrangement.

You should consider ‘banking’ your training at the point when your training is interrupted. Then it can be recognised by us in case you cannot return to the same training organisation for any reason (please see section 2.23).
3. Starting your training

3.1 Developing a rapport with your designated supervisor(s)

It is vital that you and your designated supervisor(s) establish a good relationship from the start. It is important to find out what each other's expectations are, plan the training period ahead and clarify both your roles. You should have a meeting as soon as possible, preferably by the end of the first week, to make sure there are no misconceptions about your training.

Your training provider will develop an outcome-based training plan that should provide you with the opportunity to show your progression against the interim learning outcomes. You and your designated supervisor have a shared responsibility to review the plan at the start and complete a training needs analysis, reflecting on your previous education and experience, to identify specific objectives to enable you to demonstrate your competence throughout the year.

If the plan pre-approved by the GPhC has not been mapped against the interim learning outcomes, your training provider can do this over the course of the year using the mapping document we have provided on our website.

It is also vital that you both keep up regular and frequent communication throughout your training. We recommend a weekly or fortnightly meeting to reflect on your progress and review your objectives. It is good practice to document and agree the key points discussed at these meetings so that you can look back on the notes later.

3.2 Signing a learning contract form

At the start of a new training arrangement between you and your designated supervisor, you must both commit fully to the training period. You and your designated supervisor confirm this commitment by agreeing the learning contract that was completed as part of your foundation training application via myGPhC. (You will also find it as part of the Change of training details form. If you use the form to tell us about a change of designated supervisor(s), you and your new designated supervisor(s) should sign a new learning contract.)

A learning contract is not a contract of employment, but an agreement by both parties to commit to the provision and receiving of training.

3.3 Conducting a training needs analysis

At the beginning of a new placement, you and your designated supervisor should discuss your present level of competence. This will help identify your learning and development needs and how they can be met at key points in your training. This should happen at the start of your foundation training year, or when you move to another placement (whether this move was planned or not).

You should complete a baseline self-assessment against each of the 54 interim learning outcomes to determine what level on Miller’s triangle you are performing at and provide any
evidence to your designated supervisor to demonstrate your current level of competence, based on relevant previous experience (for more information on Miller’s triangle please see section 8). This may include any accreditations that you have already passed especially if you have already completed some training elsewhere, for example. Your designated supervisor will usually still require you to provide further evidence in practice before they sign off any of the learning outcomes, but this will allow you both to make any adaptations to your training plan based on your specific needs.

It’s also helpful to share how you prefer to learn and any learning support mechanisms you may have had access to in the past as part of your training needs analysis.

3.4 Developing an outline training plan

Your training site should have a standard structured training plan, which it produced as part of being approved by us. You and your designated supervisor should review this training plan together and produce a tailored outline for your own training year. This will make sure that everything can be covered in the time available.

Ideally, your plan should be a week-by-week one which includes dates for your quarterly progress reviews, annual leave and training days. It should also show which area of practice will be the focus of any given week, either on or off site.

Your plan should provide the scope of practice and the appropriate supervision to allow you to achieve all the interim learning outcomes. These should be linked to all the weekly activities in the plan.

If the plan pre-approved by the GPhC has not been mapped against the interim learning outcomes, this can be done over the course of the year by your training provider using the mapping document we have provided on our website.

3.5 Setting SMART objectives

Once your outline plan has been developed, it is important to set some short-term goals for the weeks to come. These should ideally take the form of SMART objectives, which means they are:

- **Specific** – to what you want to achieve
- **Measurable** – so you can tell whether you have met the objective
- **Achievable** – with the resources you have
- **Realistic** – and relevant to what you need to achieve
- **Timed** – to give a date by which the objective should be achieved.

Here are some examples of SMART learning objectives:

- “By the end of my fourth week, I aim to have completed a continuous log of 200 dispensed items without any errors”
- “While on my hospital placement, I aim to demonstrate effective medicines reconciliation for two or three newly admitted patients, using the resources available, evidenced by an assessment with the lead medicines management technician”
• “By the end of this week, I aim to have learnt about five significant drug interactions and what recommendations, if any, I should make to the prescriber.”

• “By the end of month 3, I will have completed a proposal for my quality improvement project, and discussed this with my designated supervisor, to ensure that there is sufficient time to complete any pre-project approvals and plan time for the actual project within my foundation year.”

• “I will prepare for and present a case-based discussion, of a patient with diabetes, at next month’s peer learning event.”

• “I will work together with other members of the healthcare team to lead on the organisation of a health promotion event within the local community on national No Smoking Day. I aim to provide information around smoking cessation advice to at least five active smokers who have expressed an interest in making a change.”

• “Throughout my foundation training, I will keep a reflective journal, including a record of any pharmacist interventions, to discuss with my designated supervisor as part of our bi-weekly review meetings.”
4. Developing and demonstrating your knowledge and competence

4.1 Assessing your knowledge and competence

You are assessed in two ways.

- Firstly, you are assessed against the interim learning outcomes so you can show that you can practise effectively and will be able to work autonomously as a registered pharmacist.

- Secondly, you must sit the registration assessment to demonstrate you meet the outcomes assessed during the registration assessment at the appropriate level.

These two assessment methods have been designed to complement each other and give a broader picture of your ability.

The theory behind assessment in the foundation training year is based on Miller’s Triangle (for more information please see section 8), which is used to describe levels of competence. It starts at the bottom and works upwards, and every step is a building block towards the next level.

**Level 1:** The first level is ‘knows’, or demonstrating that you know something.

**Level 2:** The next level is ‘knows how’, or applying your knowledge to show that you know what it is for. So ‘knows how’ is tested in written examinations such as tests in MPharm or OSPAP courses.

**Level 3:** The next level is ‘shows how’, that is, you should be able to show how something is done. This is often in a simulated environment such as a classroom.

**Level 4:** The last level in the process is ‘does’, when you have moved beyond ‘showing how’ to ‘doing’. You are able to routinely do it in a reliable and safe way in a real environment such as a pharmacy.

An example of this process is demonstrating effective prescription screening to manage a drug interaction. As a trainee pharmacist, you will have already completed the first two stages. You will begin at level 3 able to ‘show how’. But this may have been on a limited number of occasions during your pharmacy course or in an objective structured clinical examination (OSCE).

Your foundation training year really focuses on this last step in the process, progressing from ‘shows how’ to ‘does’ – from the classroom to the real world. Under supervision as a trainee, you will be expected to repeatedly and safely screen prescriptions using appropriate clinical decision-making skills in a pharmacy.

The earlier steps are often based on logic and are easy to plan. But this last step demands thorough analysis of how you can incorporate a skill into an everyday situation and remain able to reflect on it as a learning experience. The ‘does’ situations are real, time pressured and can be complex.

4.2 Progress reports

Don’t worry if you only have a handful of the interim learning outcomes signed off at the
week-13 stage. It is likely that your designated supervisor will be monitoring your performance for both consistency and your ability to adapt your skills and behaviours appropriately to a range of different situations.

Your designated supervisor will still sign your progress report as satisfactory if you have met their expectations for this stage of training.

If you do get an unsatisfactory progress report at any stage you should:

- send the original to the GPhC (or complete via myGPhC at week 39), keep a copy in your file and make sure your designated supervisor has a copy
- treat this as a warning sign that you will need to make changes
- not be discouraged, but it is vital that you and your designated supervisor agree clear expectations that would result in a ‘satisfactory’ outcome at the next progress report
- review your progress against the expectations of an earlier progress report if this is your second unsatisfactory report. For example, if your week-26 report is unsatisfactory, your designated supervisor should say whether they would be prepared to sign you off as at a ‘satisfactory’ stage for a trainee at week 13
- talk to your training manager or another colleague. You can also get in touch with the RPS mentor scheme, or other foundation networks if you need more help.

4.3 Interim learning outcomes

The **interim learning outcomes** are a list of 54 outcomes which must be signed off by your designated supervisor.

There are four domains, covering:

- Personal-centred care and collaboration
- Professional practice
- Leadership and management
- Education and research

The interim learning outcomes describe the knowledge, skills and attributes you must demonstrate by the end of your foundation training year. They reflect current pharmacy practice and capture what is expected of a newly registered pharmacist. You must meet all the interim learning outcomes in order to be assessed as competent and signed off.

The interim learning outcomes have to be met to the ‘appropriate’ level on Miller’s triangle. Your designated supervisor is responsible for using their professional judgement to decide whether a particular action or behaviour is acceptable.

If you do not meet an interim learning outcome to the satisfaction of your designated supervisor, they should explain to you why this is so. If you don’t understand or agree with their evaluation, you should ask them for more information.
4.4 Developing your competence

You should develop your competence by:

- agreeing development objectives
- agreeing your learning contract
- developing an outline training plan
- gathering a portfolio of evidence to prove your competence
- taking responsibility for your own development
- meeting all the GPhC's interim learning outcomes
- passing the GPhC's registration assessment

4.5 Assessing your competence as it develops

We encourage you to keep a learning log of daily activities and significant events. You can use this later to create:

- a CPD entry - see our main website where you can download forms (with guidance) to record CPD entries, or

- another reflective account that records evidence of your competence in the relevant interim learning outcomes

See the section below on recording your progress for more information.

Satisfactorily performing an activity just once is unlikely to prove your competence. You must demonstrate your competence consistently, in a variety of circumstances, to the standard expected of a newly registered pharmacist.

Your designated supervisor is responsible for judging whether you have reached the necessary level of competence. This judgement should be evidence based and not a subjective decision. It should be supported by written and observed examples. If you do not agree with a judgement, ask your designated supervisor for specific examples of your practice to clarify why they made it.

Your designated supervisor should also assess whether you have the knowledge that you will need to demonstrate in the registration assessment, as you will need to have this knowledge to practise competently. This is part of the ongoing monitoring of your performance and should be done by open questioning such as:

- what would you have done if ...?
- what factors did you take into account when you decided to...?
- what else would be important if ...?
- in what circumstances would you ...?
- how would you ...

4.6 Once you have achieved an interim learning outcome

Once you have achieved an interim learning outcome to the level required of a newly registered pharmacist, your designated supervisor can sign it off. They can do this using the progress monitoring template or using a different system for recording trainee’s progression against the interim learning outcomes.

Once you have achieved an interim learning outcome you no longer need to collect evidence about it. But you will still be expected to demonstrate competence in practice. Your designated supervisor may, if they have a good
reason, reverse their decision if your performance becomes unsatisfactory in an interim learning outcome you have already achieved.

If you have more than one designated supervisor during your training, the expectations of each designated supervisor could be different, which could lead to different opinions of your overall performance.

The designated supervisor who signs off your final declaration ultimately takes responsibility for the overall decision that you are competent.

If you change designated supervisors during the year, you should complete a new training needs analysis with them to review the evidence available and clarify the expectation on what further evidence is required to demonstrate that you meet the interim learning outcomes to the required levels (for more information on the levels, please section 8). It is reasonable for your new designated supervisor(s) to ask you to provide further evidence to confirm that you meet any interim learning outcome that have previously been signed off. This will help to make sure that they are able to make an informed decision.

Where there is a joint supervising arrangement in place, or a planned handover of responsibility, we would expect the designated supervisor to communicate with each other to inform their assessment decisions.

4.7 Feedback

Feedback tells you how you are progressing. It can be good motivation to focus on things you have performed well. It can also be developmental – getting feedback about what you need to achieve or something that you need to improve. It may be an area that needs you to take ownership of tasks and decision-making processes.

As part of a constructive feedback process you should remember the following:

- lead the process, with your designated supervisor seeking your views on your own performance before commenting with their observations
- use evidence such as facts and observed examples, rather than hearsay or assumptions
- give and receive feedback regularly – this stops you being overwhelmed with lots of it all in one go
- choose a suitable environment that allows honesty and openness in the discussion
- use appropriate verbal and non-verbal communication such as tone, pitch and body language
- be positive and act upon feedback as an aid to your personal development
- respect and ask for your designated supervisor’s opinion
- reflect on the possible consequences of the course of action you are discussing and consider the possible outcome, whether better or worse, if you had chosen a different course of action
- identify and agree ways to improve your performance, with an appropriate time limit for reassessing your performance in that particular area
- remember it is a two-way process – you should also provide constructive feedback
for your designated supervisor and their development.

Most of these ideas depend on you and your designated supervisor working together, so you both need to be committed to them. If you feel something isn’t happening in the way it should, be sure to talk to your designated supervisor about it.

4.8 Managing problems and raising concerns

When issues crop up in the workplace, it is important that you try to sort these out locally and as soon as you can. However difficult a problem may seem, the experience of recognising, managing and resolving it can benefit you. It will help you develop the skills to manage the difficulties that you are bound to face during your future practice. You can manage and resolve problems between you and your designated supervisor, and benefit from the experience.

If you feel a problem between you and your designated supervisor is impossible for you to solve, you should first try to get help from a more experienced colleague or a senior manager. If there is a foundation training manager, ask them for guidance. In some organisations you can get support from the regional or national foundation training coordinators. It is important to tell them about any significant issues. If you are training at a site managed by HEE, NES or HEIW, you can also contact these organisations.

Problems with your training can be complicated, as they may have several causes. It is therefore important for you to define the elements of your problem. Often, the problem can be mainly about employment issues that the GPhC (as the pharmacy regulator) can’t help with. But there are several organisations that will be able to help you with these types of problem (please see section 9).

Once you have planned how to deal with the employment aspects of your problem, you should consider any other aspects. Then see our guidance to help you decide whether it is appropriate to raise a concern with us.

If you would like to discuss an issue further, you can email a training facilitator at prereg@pharmacyregulation.org.

4.9 Recording your progress with the GPhC

You should produce a portfolio of evidence throughout your training period which includes copies of all your documentation and evidence to support your performance. You can use the revalidation CPD recording resources on the main GPhC website, to help you prepare for future practice.

It is very important to keep an up-to-date working portfolio. If you had an unexpected change of circumstances, such as a period of absence or a move to a different training site, it would help you continue your training ‘seamlessly’.

We do not specify how much evidence you need to meet the satisfactory level of competence. Mainly, it is the quality not the quantity of the evidence that is most important. However, one piece of evidence would rarely be enough to demonstrate competence.
One piece of evidence might apply to several of the **interim learning outcomes**, and we expect this to be documented in the written evidence.

Make sure you can justify, if challenged, why you consider that the evidence demonstrates competence against the interim learning outcomes claimed. If a piece of evidence clearly demonstrates competence against interim learning outcomes that you may not have considered, your designated supervisor should point this out to you.

### 4.10 Reporting your progress to the GPhC

As well as having your regular discussions, you and your designated supervisor must carry out a formal progress review every 13 weeks. You must then fill in a **progress report form**.

Progress must be assessed as ‘satisfactory’ or ‘unsatisfactory’.

You should then agree an action plan for the next period of your training, based on:

- any development needs identified in your progress report
- the opportunities available in your training plan, and
- the **interim learning outcomes** you have yet to satisfy

If you cannot carry out your progress reviews at, or near, the time they are due, you should tell us. If the week-39 report cannot be done on time please **contact us**.

If you have a split, joint or sandwich placement, your final declaration must be signed at the end of that placement, at 26 weeks before you leave. This will tell us when you apply to register that your training at that site has been completed successfully. You can send us a change of training details form once you have started your second six-month placement, to ensure that we have the correct address for you.

You and your designated supervisor should keep copies of all your reports as we may ask for them at any time. If your progress report is unsatisfactory at the 13- or 26-week stage, you must send it to us when it is completed.

You must complete your third progress report at week 39 on MyGPhC, as it forms part of your application to sit the registration assessment. If your report is unsatisfactory, please see section 5.2. of the manual. Visit the **main GPhC website** to find out about applying for the registration assessment, including the full eligibility criteria.

### 4.11 Final declaration

Your designated supervisor will make a final assessment of your competence – and whether or not you are fit to join the register – by completing the final declaration form via MyGPhC.

This form overrides all your other progress reports. When it is signed off, the GPhC knows that the designated supervisor has decided you are ready to start work as a newly qualified pharmacist.

Your designated supervisor will also use this form to sign you off at the 26-week stage if you are part of a joint or split programme or if you transfer to a new training site.

If you have more than one designated supervisor, the designated supervisor who signs off your final declaration takes ultimate responsibility for that decision.
Once the designated supervisor signs the declaration, they are not able to revoke it. We expect that if one of the joint designated supervisors has concerns about your performance, they discuss this with the other designated supervisor, and that they both agree the most appropriate outcome before completing the declaration.

We would expect your designated supervisor(s) to consider whether they think:

- you are safe (you might be slow, for example, but do you have insight into the consequences of your actions, and are your decisions likely to have an outcome of harm?)
- you could work autonomously as a pharmacist on day one of registration (that is, that can you work unsupervised)
- your fitness to practise is not impaired (that is, you behave as we would expect a pharmacist to behave)
- you have met and been signed off on all the interim learning outcomes

Only one of your named designated supervisors will be nominated to complete the declaration on MyGPhC, however we would expect the designated supervisor to communicate with anyone else with oversight of your training including any other designated supervisors, training leads, other health professionals or senior managers to inform their assessment decisions. There is a requirement for the details of a second named professional to be detailed as part of the declaration.

**4.12 If a trainee cannot be signed off as competent**

Designated supervisor and trainees should always document any performance issues that have arisen throughout the year, as well as the meetings about them and actions taken to improve performance.

If a trainee has not met all the **interim learning outcomes** because of problems or slow progress and needs to have an extension to their training, this should have been identified and discussed before their entry to the registration assessment. You should also have told us about the proposed revised finish date using a **change of training details form**.

Training can continue at the site for the length of time needed to achieve the required interim learning outcomes. But this needs to take into account the time limits within the **GPhC criteria for registration as a pharmacist** (the eight-year or nine-year time limit from entry into the MPharm degree, or four years for OSPAP qualifications).

If an employer cannot extend the training period and the trainee has to relocate, they will usually need to spend at least six months in the new placement.

**4.13 Observed evidence**

There are various types of observed evidence. Here are some examples:

**Summative assessment**

This is when you take a formal assessment at the end of a set activity. This should be planned in advance and it assesses learning by awarding marks or – in this context – whether **interim learning outcomes** are signed off.
Examples could include:
- effectively completing medications reconciliation for a new patient
- demonstrating how to use inhalers
- measuring and fitting hosiery
- preparations prepared ‘on the spot’ including formula, calculation and procedures
- an accuracy log of dispensed or final checked medications

**Formative assessment**

This is when you take part in a reflective process, involving feedback, that assesses a set activity. It should be used as a platform for you to highlight good practice or areas for improvement.

Examples could include:
- counselling a patient who has come to the pharmacy to collect their prescription
- dealing with a request for an immediate supply of a prescription-only medication
- involvement in a heated discussion with other staff members, either as a participant or to calm things down
- challenging a prescriber directly to change a prescription
- answering the phone and managing the enquiry

**Simulation**

This is when you make an observation of a hypothetical situation. It could be based on an issue you have previously managed in practice, an objective structured clinical examination (OSCE) or a role play during a study day.

Examples could include:
- case presentation or care plan based on actual or hypothetical problems
- patient counselling examples practised with other staff members
- one-to-one hypothetical discussion with the practice supervisor
- case studies in an online or paper-based training package

**Written evidence**

There are various types of written evidence. Here are some examples:

**CPD entry**

Continuing professional development is a key part of revalidation, which pharmacists and pharmacy technicians must carry out as part of their registration requirements. It helps them to keep their professional skills and knowledge up to date, to reflect on how to improve and to show how they provide the safe and effective care that patients and the public expect. There is [more information about revalidation](#) on our main website, and you can download forms (with guidance) to record CPD entries and share them with your designated supervisor.

**Witnessed accounts**

You can write an account of how you carried out a task or managed a situation. You can have this verified by a witness that was present at the time, but who does not have responsibility for training or supervising your practice. A witnessed account can also be in the form of patient feedback.
Projects and assignments in the workplace

A classic example of this is that all trainees have to successfully engage in a quality-improvement process if they are to meet interim learning outcomes. Accredited certificates for internal and external learning events or a first-aid certificate would come into this category.

Documented workplace assessments

Examples could include:

- a sterile technique broth test
- dispensing accuracy logs
- using clinical assessment tools, such as mini consultation evaluation exercise (mini-CEX), case based discussion, medication-related consultation framework (MRCF), direct observation of practice (DOP), mini peer assessment tool (mini-PAT) or mini team assessment behaviour (mini-TAB)
- anonymised copies of prescriptions and other patient information. These can be excellent examples for you to demonstrate when you have identified a clinical issue such as a drug interaction, and also allow you to write up how you resolved the issue.
5. The registration assessment

5.1 The registration assessment explained

The registration assessment is one of the ways we test whether you can demonstrate that you understand how to apply knowledge appropriately and in a timely way, to make professional judgements in pharmacy practice. It also tests your number sense and that you are able to perform the calculations needed to practise as a pharmacist.

The assessment makes sure that all trainees have reached the same minimum standard of ability, no matter where they have trained in Great Britain. Passing the assessment is part of the overall criteria for registration as a pharmacist.

The registration assessment regulations set out key information and rules that cover the assessment. They are updated every year and issued before the first sitting of the year.

The registration assessment specification sets out how the assessment will be run and will help you decide if you need to request a reasonable adjustment.

The registration assessment framework sets out the outcomes that will be tested and gives an idea of some of the topics this may cover.

The registration assessment is set and moderated by an independent board of assessors.

We publish a page on the GPhC website for each registration assessment sitting, where you can find more information, including the regulations, specification and framework which apply for a specific sitting. We will publish the web page in good time for you to prepare for your chosen sitting. You can also look at the pages for previous sittings if they are still available, but be aware that the information may be different for your chosen sitting.

5.2 Qualifying for the registration assessment

You can only be considered for entry to the registration assessment once you have achieved a week-39 progress report that is marked as satisfactory. If you are marked as unsatisfactory at the week-39 point, you may need to take the assessment at a later date. You should develop an action plan – including SMART objectives – to help you deal with your shortfalls against the interim learning outcomes.

You will be judged against the same principles in your week-39 review as in the previous reviews. This judgement will be based on the quality of your evidence and performance, and must not be made more lenient so that you can enter the registration assessment.

You will need to submit an application form to sit the assessment through your myGPhC account by the deadline given and show that you meet the eligibility criteria to sit the assessment.

Visit the main GPhC website to find out about applying for the registration assessment, including the full eligibility criteria.
5.3 Structure of the registration assessment

The topics covered by the assessment are set out in the registration assessment framework, which is updated regularly and specified for each sitting.

The standard a trainee pharmacist must achieve to pass the registration assessment remains the same across each sitting. The pass mark for each paper varies from sitting to sitting depending on the combined difficulty of the questions. This is to make sure that the assessment is fair and that the standard is maintained. Candidates must achieve the pass mark or above for each paper in order to demonstrate that they have achieved the required standard for safe and effective practice.

Reference sources

You won't need to bring reference sources to the assessment. You will use only the reference sources provided online.

Examples of possible reference sources include:

- extracts from a British National Formulary (BNF)
- extracts from a Summary of Product Characteristics (SmPC)
- diagrams and photographs
- a medication chart

Part one paper

Part one of the assessment is made up of 40 calculation questions. You will have two hours to complete these, and you will be able to use a calculator.

Part two paper

Part two of the assessment is made up of 120 questions: 90 'single-best-answer' questions, and 30 'extended-matching' questions. You will have 2.5 hours to complete these, and you will not be able to use a calculator.

Single best answer questions

An SBA question has three parts: a scenario, a question and five answer options.

For this type of question, select the single best answer from the five options. Each question has one best answer, but there may be other answers that are plausible but are not the best answer – these are, therefore, incorrect.

Extended matching questions

An EMQ has four parts: a theme, a scenario, an instruction and a list of answer options. You will select an option from the same list for one or more questions.

For this type of question, choose the best option from the list provided. Each option may be used once, more than once or not at all.

You can find a simulation tool with a set of practice questions, including all these question types as they are presented in the assessment on the Pearson VUE website. You can also access this simulation tool via the dedicated webpage for any current registration sitting, on the GPhC website.

5.4 Preparing for the registration assessment

After each assessment sitting, the Board of Assessors - who are responsible for setting and assuring the registration assessment - produce feedback about the topics that candidates
found difficult. Use the latest feedback documents to help you prepare for your attempt.

The registration assessment framework sets out the outcomes that will be tested and gives an idea of some of the topics this may cover.

Sometimes there are changes in practice close to the assessment day. You should answer any questions in the assessment as you would in practice on that day. If there has been a change in practice that affects a question after it has been written, this will be considered by the Board of Assessors after the sitting.

Make sure that if you attend any study days, or use any study materials, that they are up to date.

5.5 Requesting a reasonable adjustment for the registration assessment

If you have a specific need which you feel could disadvantage you when sitting the registration assessment, you can request a ‘reasonable adjustment’ to the assessment conditions. The specific need can be a temporary or permanent one.

You can find out more about requesting an adjustment on the registration assessment application page of the main website.

When you request an adjustment, you must tell us:

- the nature of your specific need
- how this specific need would affect your ability to sit the assessment
- what reasonable adjustment you are requesting and how it will support you during the assessment

You also need to include evidence to support your request. This evidence must be from a doctor or another appropriately qualified person, and must give details of how your specific need would affect you during the assessment. The person providing supporting evidence will need to have read and understood the assessment specification.

It is important that the evidence relates directly to the reasonable adjustment you are requesting.

Your request will be considered by the GPhC’s adjustment panel. This is an independent panel made up of educational disability specialists and members of the GPhC board of assessors (which sets and moderates the registration assessment).

If your request for an adjustment is not granted you have the right to appeal the decision. You must do this by the deadline given for the sitting.

5.6 Making a decision to sit the registration assessment

Am I ‘fit to sit’?

It is very important that you only sit the registration assessment if you are fit to do so. Being ‘fit to sit’ means that you do not know of any reason why your performance would be adversely affected on the day of the assessment.

If you are aware of anything that might affect your performance on the day, you should not sit
the assessment – even if it is a difficult decision to make.

You are eligible to withdraw from a sitting at any time up until the assessment begins. Once you have decided to withdraw, you will not be able to attempt the assessment. The final point at which you are able to withdraw from the sitting will be made clear to you. By continuing with the sitting after this point, you have declared yourself 'fit to sit'. This means that we will not consider as grounds for an appeal any reason that was known to you before your decision to sit the assessment.

You can find more information about deciding if you are fit to sit in the registration assessment application section of the main website.

5.7 Nullification requests

If you start the assessment and then have problems during the sitting which significantly affect your performance, you can request that your attempt is 'nullified' under the registration assessment regulations that apply to the sitting. You must let an invigilator know as soon as possible if you have problems during the sitting. They will complete a case report and provide you with a case reference number. You must quote the case reference number as part of your evidence in your nullification request. It is very important that you do not wait until receiving a 'fail' notification before contacting us to tell us anything that has affected your performance.

If your attempt is nullified, it will not count towards the three attempts you can have to pass the assessment, and you will not find out your result.

The decision to grant the nullification will be made by the board of assessors based on your request without knowledge of your score in the assessment.

You cannot request a nullification after you have received your results.

If you decide to sit the assessment again, you must apply as normal and you will need to pay another entry fee.

You can find more information about nullification requests in the registration assessment section of the main website.
6. After the registration assessment

6.1 Finding out if you have passed the assessment

After the registration assessment, we will email you to let you know when your result is ready to view in myGPhC. Make sure you have signed up to myGPhC and indicated email in your communication preferences.

You will receive information about what to do after you get your assessment result as part of the information we send you with your results. Make sure you read this carefully and get in touch with the contact centre if there’s anything you don’t understand.

Important: remember that we do not give results over the phone as we cannot verify a caller’s identity.

6.2 Applying to register as a pharmacist

You are eligible to make an application to register as a pharmacist once you meet the registration criteria, including:

- having completed the foundation training year, shown by a week-52 declaration completed in myGPhC by your designated supervisor, and

- having passed the registration assessment

Remember that you cannot practise as a pharmacist until your registration is complete and your name appears on the register.

You can submit an application to register as a pharmacist any time after week 49 of your training. We will put your application ‘on hold’ until your registration assessment result and any other information we need about your training is confirmed.

Check the key dates page to see when you will need to submit your application via myGPhC to join the register on the date you plan to.

See the UK pharmacist qualifications page on the main GPhC website and read the application guidance to find out more about how to apply.

6.3 If you do not pass the registration assessment

If you are unsuccessful at a registration assessment sitting, we will send you guidance with your results. This explains the appeals system, and information around preparing to sit the assessment again. If you have any further questions on your next steps after reading the guidance, please get in touch with the contact centre.

We understand that the assessment period can be stressful. You can get free confidential wellbeing support from the profession’s charity Pharmacist Support.

Please visit their website pharmacistsupport.org for online resources and further details on their services.

Sitting another assessment

You can find future assessment dates and entry deadlines on the key dates page. You do not need to meet any extra requirements to sit the registration assessment again.
But you should reflect on whether you were ready to sit the assessment, and if there were any other factors that affected your performance on the day.

You may find it helpful to develop a SMART action plan to help you identify what you need to do to be ready to sit the assessment again, and to manage any factors that affected your performance. See section 3.5 for more information about setting SMART objectives.

The actions you need to take, and the resources you will need to help you will depend on the issues and objectives you identify.

They could include:

- reviewing the registration assessment framework to make sure you cover all the topics in your preparation
- using the resources in section 5.3 to familiarise yourself with the format of the different question styles and attempting the example questions
- reviewing the feedback from previous assessment sittings (section 5.4) and considering whether you need to do more preparation in areas where candidates have performed less well in the past, to avoid common mistakes
- using resources to build your knowledge in specific areas of the registration assessment framework (NES, CPPE or HEIW all provide study resources)
- setting up or taking part in a peer study group
- becoming more familiar with the layout of common resources such as a summary of product characteristics
- checking for any changes in legislation or treatment guidelines
- practising a range of different calculations
- considering any reasonable adjustments, coping strategies or lifestyle interventions you may need before or during the assessment
- working alongside pharmacy professionals who are able to provide advice and guidance (including in managing your health and wellbeing to make sure you are prepared to sit the assessment)

6.4 Appeals

If you fail the assessment, you can appeal. You have to tell us about:

- new information or circumstances that have come to light since you sat the assessment, and that you were not aware of at the time
- a registration assessment procedure that you feel was not correctly applied by the GPhC which would have affected your performance on the day. This is set out in the registration assessment regulations.

If your appeal is upheld, the Registrar may nullify your assessment result, and that assessment will not count as one of your available attempts.

If your appeal is about circumstances you could have used to request a nullification, or any circumstances that you knew about before you sat the assessment, your appeal will not be considered. By sitting the assessment you declared yourself ‘fit to sit’. Note that there are some non-appealable decisions in the registration assessment regulations.
7. Interim learning outcomes

7.1 Describing and assessing outcomes

The outcome levels in this standard are based on an established competence and assessment hierarchy known as ‘Miller’s triangle’:

![Miller's triangle diagram]

Because what is being assessed at each of the four levels is different, the assessment methods needed are different too – although there will be some overlap.

**Level 1 – Knows**

Has knowledge that may be applied in the future to demonstrate competence. Assessments may include essays, oral examinations and multiple-choice question examinations (MCQs).

**Level 2 – Knows how**

Knows how to use knowledge and skills. Assessments may include essays, oral examinations, MCQs and laboratory books.

**Level 3 – Shows how**

Can demonstrate that they can perform in a simulated environment or in real life. Assessments may include objective structured clinical examinations (OSCEs) and other observed assessments; simulated patient assessments; designing, carrying out and reporting an experiment; dispensing tests and taking a patient history.

**Level 4 – Does**

Can act independently and consistently in a complex but defined situation. Evidence for this level is provided when a student pharmacist demonstrates the learning outcomes in a complex, familiar or everyday situation repeatedly and reliably. Assessments may include OSCEs or other observed assessments.

**Level of study**

The level of study for foundation training is master’s degree level, as defined in UK national qualifications frameworks.

**Domains of study**

The learning outcomes are presented in four domains:

- person-centred care and collaboration
- professional practice
- leadership and management
- education and research

The domains and learning outcomes are all of equal importance and are mapped on to the Royal Pharmaceutical Society’s curriculum for post-registration foundation training.
To achieve them, curricula, teaching and learning strategies and training plans to deliver these learning outcomes will:

- apply the science behind pharmacy throughout all learning
- focus on the role of the pharmacist as a healthcare professional – using their comprehensive expertise of medicines, and building on their strong grounding in science – to deliver high-quality, person-centred care
- provide experiential learning and inter-professional learning, with students from other health and care professions, and provide experience in pharmacy settings
- provide opportunities to engage with people and other health and care professionals
- build the requirement of patient and public safety into all aspects of the design and delivery of initial education and training.
### 7.2 Domain: Person-centred care and collaboration

If they are to pass, trainee pharmacists must be able to demonstrate the following:

**Table 1: Learning outcomes for person-centred care and collaboration**

<table>
<thead>
<tr>
<th>Learning outcome</th>
<th>Foundation training year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Demonstrate empathy and keep the person at the centre of their approach to care at all times</td>
<td>Does</td>
</tr>
<tr>
<td>2. Work in partnership with people to support and empower them in shared decision-making about their health and wellbeing</td>
<td>Does</td>
</tr>
<tr>
<td>3. Demonstrate effective communication at all times and adapt their approach and communication style to meet the needs of the person</td>
<td>Does</td>
</tr>
<tr>
<td>4. Understand the variety of settings and adapt their communication accordingly</td>
<td>Does</td>
</tr>
<tr>
<td>5. Proactively support people to make safe and effective use of their medicines and devices</td>
<td>Does</td>
</tr>
<tr>
<td>6. Treat people as equals, with dignity and respect, and meet their own legal responsibilities under equality and human rights legislation, while respecting diversity and cultural differences</td>
<td>Does</td>
</tr>
<tr>
<td>7. Obtain informed consent before providing care and pharmacy services</td>
<td>Does</td>
</tr>
<tr>
<td>8. Assess and respond to the person's particular health risks, taking account of individuals' protected characteristics and background</td>
<td>Does</td>
</tr>
<tr>
<td>9. Take responsibility for ensuring that personal values and beliefs do not compromise person-centred care</td>
<td>Does</td>
</tr>
<tr>
<td>10. Demonstrate effective consultation skills, and in partnership with the person, decide the most appropriate course of action</td>
<td>Does</td>
</tr>
<tr>
<td>11. Take into consideration factors that affect people's behaviours in relation to health and wellbeing</td>
<td>Does</td>
</tr>
<tr>
<td>12. Take an all-inclusive approach to ensure the most appropriate course of action based on clinical, legal and professional considerations</td>
<td>Does</td>
</tr>
<tr>
<td>13. Recognise the psychological, physiological and physical impact of prescribing decisions on people</td>
<td>Does</td>
</tr>
</tbody>
</table>
7.3 Domain: Professional practice

If they are to pass, trainee pharmacists must be able to demonstrate the following:

Table 2: Learning outcomes for professional practice

<table>
<thead>
<tr>
<th>Learning outcome</th>
<th>Foundation training year</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. Demonstrate the values, attitudes and behaviours expected of a pharmacy professional at all times</td>
<td>Does</td>
</tr>
<tr>
<td>16. Apply professional judgement in all circumstances, taking legal and ethical reasoning into account</td>
<td>Does</td>
</tr>
<tr>
<td>17. Recognise and work within the limits of their knowledge and skills, and get support and refer to others when they need to</td>
<td>Does</td>
</tr>
<tr>
<td>18. Take responsibility for all aspects of pharmacy services, and make sure that the care and services provided are safe and accurate</td>
<td>Does</td>
</tr>
<tr>
<td>19. Take responsibility for all aspects of health and safety and take actions when necessary, particularly but not exclusively during the COVID-19 pandemic</td>
<td>Does</td>
</tr>
<tr>
<td>20. Act openly and honestly when things go wrong and raise concerns even when it is not easy to do so</td>
<td>Does</td>
</tr>
<tr>
<td>21. Apply the science behind pharmacy in all activities</td>
<td>Does</td>
</tr>
<tr>
<td>22. Demonstrate how the science behind pharmacy is applied in the discovery, design, development and safety testing of medicines and devices</td>
<td>Knows how</td>
</tr>
<tr>
<td>23. Recognise the technologies that are behind developing advanced therapeutic medicinal products and precision medicines, including the formulation, supply and quality assurance of these therapeutic agents</td>
<td>Knows how</td>
</tr>
<tr>
<td>24. Keep abreast of new technologies and use data and digital technologies to improve clinical outcomes and patient safety, keeping to information governance principles</td>
<td>Does</td>
</tr>
<tr>
<td>25. Apply pharmaceutical principles to the safe and effective formulation, preparation, packaging and disposal of medicines and products</td>
<td>Shows how</td>
</tr>
<tr>
<td>26. Consider the quality, safety and risks associated with medicines and products and take appropriate action when producing and supplying them</td>
<td>Shows how</td>
</tr>
<tr>
<td>Learning outcome</td>
<td>Foundation training year</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>27. Take responsibility for the legal, safe and efficient supply and administration of medicines and devices</td>
<td>Does</td>
</tr>
<tr>
<td>28. Demonstrate effective diagnostic skills, including physical examination, to decide the most appropriate course of action for the person. During the COVID-19 pandemic all relevant precautions must be taken to ensure the safety of the patient and foundation trainee when physical contact is necessary.</td>
<td>Shows how</td>
</tr>
<tr>
<td>29. Apply the principles of clinical therapeutics, pharmacology and genomics to make effective use of medicines for people</td>
<td>Does</td>
</tr>
<tr>
<td>30. Appraise the evidence base and apply clinical reasoning and professional judgement to make safe and logical decisions which minimise risk and optimise outcomes for the person</td>
<td>Does</td>
</tr>
<tr>
<td>31. Critically evaluate and use national guidelines and clinical evidence to support safe, rational and cost-effective procurement for the use, and prescribing (by others) of, medicines, devices and services</td>
<td>Does</td>
</tr>
<tr>
<td>32. Accurately perform calculations</td>
<td>Does</td>
</tr>
<tr>
<td>33. Effectively promote healthy lifestyles using evidence-based techniques</td>
<td>Does</td>
</tr>
<tr>
<td>34. Apply the principles of effective monitoring and management to improve health outcomes</td>
<td>Does</td>
</tr>
<tr>
<td>35. Anticipate and recognise adverse drug reactions, and recognise the need to apply the principles of pharmacovigilance(^1)</td>
<td>Does</td>
</tr>
<tr>
<td>36. Apply relevant legislation related to prescribing</td>
<td>Does</td>
</tr>
<tr>
<td>37. Prescribe effectively within the relevant systems and frameworks for medicines use(^2)</td>
<td>Does</td>
</tr>
<tr>
<td>38. Understand clinical governance in relation to prescribing</td>
<td>Shows how</td>
</tr>
<tr>
<td>39. Take responsibility for people’s health records, including the legality, appropriateness, accuracy, security and confidentiality of personal data</td>
<td>Does</td>
</tr>
<tr>
<td>40. Understand and implement relevant safeguarding procedures, including local and national guidance in relation to each person</td>
<td>Does</td>
</tr>
</tbody>
</table>

\(^1\) Monitoring the effects of medicines after they have been licensed for use, especially to identify previously unreported adverse reactions.

\(^2\) Removed in the 2021/22 interim learning outcomes. We did not change the numbering in the interim set of learning outcomes so that training providers don’t have to modify the numbering of their training plans when they move to the full set of learning outcomes.
Learning outcome | Foundation training year
---|---
41. Effectively make use of local and national health and social care policies to improve health outcomes and public health, and to address health inequalities | Does
42. Proactively participate in the promotion and protection of public health in their practice | Does
43. Identify misuse of medicines and implement effective strategies to deal with this | Does
44. Respond appropriately to medical emergencies, including the provision of first aid | Shows how

### 7.4 Domain: Leadership and management

If they are to pass, trainee pharmacists must be able to demonstrate the following:

#### Table 3: Learning outcomes for leadership and management

<table>
<thead>
<tr>
<th>Learning outcome</th>
<th>Foundation training year</th>
</tr>
</thead>
<tbody>
<tr>
<td>45. Demonstrate effective leadership and management skills as part of the multi-disciplinary team</td>
<td>Does</td>
</tr>
<tr>
<td>46. Make use of the skills and knowledge of other members of the multi-disciplinary team to manage resources and priorities</td>
<td>Does</td>
</tr>
<tr>
<td>47. Develop, lead and apply effective strategies to improve the quality of care and safe use of medicines</td>
<td>Does</td>
</tr>
<tr>
<td>48. Actively take part in the management of risks and consider the impacts on people</td>
<td>Does</td>
</tr>
<tr>
<td>49. Use tools and techniques to avoid medication errors associated with prescribing, supply and administration</td>
<td>Does</td>
</tr>
<tr>
<td>50. Take appropriate actions to respond to complaints, incidents or errors in a timely manner and to prevent them happening again</td>
<td>Does</td>
</tr>
<tr>
<td>51. Recognise when and how their performance or that of others could put people at risk and take appropriate actions</td>
<td>Does</td>
</tr>
<tr>
<td>52. Demonstrate resilience and flexibility, and apply effective strategies to manage multiple priorities, uncertainty, complexity and change</td>
<td>Does</td>
</tr>
</tbody>
</table>
7.5 Domain: education and research

If they are to pass, trainee pharmacists must be able to demonstrate the following:

Table 4: Learning outcomes for education and research

<table>
<thead>
<tr>
<th>Learning outcome</th>
<th>Foundation training year</th>
</tr>
</thead>
<tbody>
<tr>
<td>53. Reflect upon, identify, and proactively address their learning needs</td>
<td>Does</td>
</tr>
<tr>
<td>54. Support the learning and development of others, including through mentoring</td>
<td>Does</td>
</tr>
<tr>
<td>55. Take part in research activities, audit, service evaluation and quality improvement, and demonstrate how these are used to improve care and services</td>
<td>Does</td>
</tr>
</tbody>
</table>
8. Useful sources of help and information

**British Pharmaceutical Students Association (BPSA)**

*The BPSA* supports trainee pharmacists through their graduate office – you can get in touch via email at graduateofficer@bpsa.co.uk, on Facebook at facebook.com/TheBPSA or on Twitter at twitter.com/bpsa

**Centre for Pharmacy Postgraduate Education (CPPE)**

*The CPPE* offers learning support to trainees in England.

**Health Education England**

*HEE* offers learning support to trainees in England.

**Health Education and Improvement Wales (HEIW)**

*HEIW* offers learning support to trainees in Wales.

**NHS Education for Scotland (NES)**

*NHS Education for Scotland* offers learning support to trainees in Scotland.

**Pharmacist Support**

*Pharmacist Support* is the pharmacy profession’s independent charity. They offer free and confidential support covering wellbeing (including workshops, online resources and a stress helpline), debt, benefits and employment advice, financial assistance and addiction support. Contact them by phone on 0808 168 2233 or email info@pharmacistsupport.org

**Royal Pharmaceutical Society (RPS)**

*The RPS* offers support for you during your foundation training year.