



Overseas
Pharmacists'
Assessment
Programme (OSPAP)

Kingston University

Report of a reaccreditation event

April 2018

Event summary and conclusions

Provider	Kingston University
Course	Overseas Pharmacists' Assessment Programme (OSPAP)
Event type	Reaccreditation
Event date	12 April 2018
Accreditation period	2017/18 – 2020/21
Outcome	<p>Approval with conditions</p> <p>The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the OSPAP provided by Kingston University should be reaccredited for a full period of three years, subject to one condition.</p>
Conditions	The University must undertake good character and health checks as part of the initial admissions process. This is to meet standard 1.1.h and must be introduced before the admission of the next cohort of students.
Standing conditions	Please refer to Appendix 1
Recommendations	No recommendations were made.
Registrar decision	<p>Following the event, the provider submitted a response to the condition of reaccreditation, and the accreditation team agreed it had been met satisfactorily.</p> <p>The Registrar of the GPhC accepted the team's recommendation and approved the reaccreditation of the programmes for a further period of 3 years.</p>
Key contact (provider)	Professor Chris Cairns
Accreditation team	<p>Professor Ian Marshall (Team leader), Emeritus Professor of Pharmacology, University of Strathclyde</p> <p>Professor Larry Gifford (Academic), Emeritus Professor, Keele University School of Pharmacy</p> <p>Dr Katie Maddock (Academic), MPharm Director of Learning and Teaching Keele, School of Pharmacy</p> <p>Miss Raminder Sihota (Pharmacist), Senior Manager and Professional Development, Boots UK</p> <p>Miss Rosaline Pollard (Recently qualified pharmacist), Clinical Pharmacist, Worthing Hospital</p> <p>Mrs Fiona Barber (Lay member), Independent Member Leicester City Council</p>
GPhC representative	Ms Joanne Martin, Quality Assurance Manager, GPhC
Rapporteur	Professor Brian Furman, Emeritus Professor of Pharmacology, University of Strathclyde

Introduction

Role of the GPhC

The General Pharmaceutical Council (GPhC) is the statutory regulator for pharmacists and pharmacy technicians and is the accrediting body for pharmacy education in Great Britain. The GPhC is responsible for setting standards and approving education and training courses which form part of the pathway towards registration for pharmacists. The UK qualification required as part of the pathway to registration as a pharmacist is a GPhC-accredited Master of Pharmacy degree course (MPharm). This reaccreditation event was carried out in accordance with the GPhC's 2011 MPharm Accreditation Methodology and the course was reviewed against the GPhC's 2011 education standards 'Future Pharmacists: Standards for the initial education and training of pharmacists'.

The GPhC's right to check the standards of pharmacy qualifications leading to annotation and registration as a pharmacist is the Pharmacy Order 2010. It requires the GPhC to 'approve' courses by appointing 'visitors' (accreditors) to report to the GPhC's Council on the 'nature, content and quality' of education as well as 'any other matters' the Council may require.

The powers and obligations of the GPhC in relation to the accreditation of pharmacy education are legislated in the Pharmacy Order 2010. For more information, visit:

<http://www.legislation.gov.uk/uksi/2010/231/contents/made>

Background

The OSPAP at Kingston University is provided by the Department of Pharmacy ('the Department'), part of the School of Pharmacy and Chemistry, within the Faculty of Science, Engineering and Computing. The Department also provides two other accredited pharmacy courses; the MPharm, a Foundation Degree in Pharmaceutical and Chemical Sciences. The programme was first accredited in June 2010 and reaccredited in April 2014. On that occasion there were no conditions and one recommendation; the team recommended that the University should review the provision of practical experience of working with patients, carers and other healthcare professionals. While recognising that there were a number of activities relating to practice, as well as an inter-professional learning activity of working with nurses, the team agreed that the University should seek other opportunities to develop both of these areas. This related to criterion 5.6. The University responded to this recommendation by stating that it will continue to work with colleagues in other academic disciplines and external collaborators to widen the scope of inter-professional learning in the programme; several activities were described (as detailed in the submission for the present event), including the recent introduction of a simulated GP surgery placement, where the OSPAP students, working with nursing students, undertake activities while acting the role of a GP practice pharmacist using patients or their carers played by actors.

Documentation

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

Pre-visit

In advance of the main visit, a pre-visit meeting took place at the University on 20 March 2018. The purpose of the pre-visit meeting was to prepare for the event, allow the GPhC and the University to ask any questions or seek clarification, and to finalise arrangements for the visit.

The event

The event began with a private meeting of the accreditation team and GPhC representatives on 12 April 2018. The remainder of the event took place onsite at Kingston University on 12 April 2018, and comprised a series of meetings with staff and students of the University.

Key findings

Standard 1: Patient and public safety

Criterion 1.h is not met and is subject to a condition. All other criteria relating to this standard are met.

There are systems in place to ensure that students do not jeopardise patient safety; these include appropriate supervision and monitoring, and allowing students to do only those tasks for which they are competent, as well as having established mechanisms and procedures to deal with fitness to practise. During induction, students attend a session on fitness to practise where this is introduced along with the GPhC's Standards for Pharmacy Professionals, for which students must sign a self-declaration that they have read these, and that they will abide by their principles throughout the course; they also are asked to declare any issues that would impair their fitness to practise, including undeclared police cautions and/or illnesses. Any issues identified in these self-declarations are reviewed anonymously by a subcommittee of the Fitness to Practise Committee and dealt with appropriately. There are no occupational health checks, awareness of students' health status depending entirely on their self-declarations. This reliance on self-declaration to determine the health status of students is out of step with current practice across the sector; thus, the Department cannot be fully confident that students and/or patients are not being put at risk. Therefore, the team imposed a condition (see condition 1) that the University must undertake good character and health checks as part of the admissions process.

Prior to undertaking placements students are informed that they must ensure patient confidentiality and safety, and are reminded that any inappropriate behaviour will be reported back and investigated; poor or inappropriate behaviour could result in a fitness to practise investigation and a subsequent hearing. Placement providers are requested to give feedback on the students' professionalism, as well as to record any concerns about the students. Students are always supervised appropriately when interacting with patients, for example, when conducting drug histories and counselling, either on placements or within the University. In the academic programme, there are assessments which determine professional competence; key criteria within these are risk and patient safety. In the assessments, serious incidents that may lead to patient harm, will lead to the completion of a 'yellow card'; accumulation of these yellow cards may result in failure of the assessment. Students must also pass a calculations assessment. Failure to pass these assessments will result in failure of the programme; where this occurs, students will not be awarded an accredited qualification and therefore would not be eligible for progression to pre-registration training and subsequent registration as a pharmacist.

Standard 2: Monitoring, review and evaluation of an OSPAP

All criteria relating to this standard are met.

The University has systems in place to monitor, review and evaluate entry requirements, the quality of teaching, learning and assessment, and of placements and other practice learning opportunities, appraisal and feedback systems for students, and supervision requirements, as well as educational resources and capacity. The OSPAP is a modular programme, comprising two 30-credit and one 60-credit module, delivery of which is through teaching of various types, including lectures, laboratories, workshops, and tutorials; teaching, and the associated assessments are the collective responsibility of

academic staff. Module leaders are responsible for the preparation of the module assessments. The Course Director has oversight of the whole programme and is responsible for the administration, and co-ordination of the course. The monitoring, review, and development of the OSPAP is undertaken within the standard Kingston University Quality Framework and is managed primarily through the Pharmacy Board of Studies. The University has an annual monitoring and enhancement procedure, where each module leader prepares a Module Enhancement Plan (MEP) in association with the module team. The MEPs are then reviewed by the Course Director, who prepares a Course Enhancement Plan (CEP) which looks at overarching themes in the course. The MEP is informed by the quality assurance procedures for modules, which include annual peer observation of teaching, moderation of coursework assessments and examination papers, input from external examiners, feedback on the programme from the Student-Staff Consultative Committee (SSCC), and 'Early Module Feedback' from students completed by student representatives; because the cohort of OSPAP student is small, there is also extensive informal feedback through personal tutors and other staff members. The CEPs are discussed at the Board of Studies, and subsequently the Head of Department prepares a Department Enhancement Plan Summary, which also considers resources and risks; this summary is then considered by the Faculty Education Committee which is attended by the University's Deputy Academic Registrar, and is eventually presented to the University Senate. Quality control of placements utilises feedback obtained from both the students and the placement providers; this feedback is collated and reviewed annually. Any issues which arise during or immediately after a placement are dealt with by the Module Leader or Placement Tutor.

Standard 3: Equality, diversity and fairness

Both criteria relating to this standard are met.

The University collects and monitors data relating to equality, diversity and inclusion; these data are held in HR and student databases and are published annually. Data are also incorporated into a black and ethnic minority (BEM) attainment gap dashboard that staff can use to monitor progress down to course level; these data are used to identify key strengths and areas of weakness, which inform the University's equality, diversity and inclusion strategy; they include information on gender pay gap, the proportion of academic senior management roles held by UK national black, Asian and ethnic minorities, the proportion of disabled staff in academic senior management roles, and the ethnic diversity within the University. The University has identified areas where improvements can continue to be made including the proportion of academic females who are in professorial roles, addressing some of the pay gaps, and the proportion of BEM academics who are professors. The student population is extremely diverse, with more than 50% being female. Across the University the proportion of students from BEM backgrounds is 52%; the students on the OSPAP course show ethnic diversity, although this varies year to year, for example, over the years 2014/15 through to 2017/18, the proportion of students with a BME background has been 70%, 86% 84% and 92%. All major examinations and coursework assessments are marked anonymously. The University offers a 'Dyslexia and Disability' service to which students can be referred; members of the Dyslexia and Disability team run training sessions across faculties. Students who declare disabilities on application or admission will be appropriately advised and/or referred to the Dyslexia and Disability service and reasonable adjustments will be put in place. There is an embedded approach to training in equality and diversity, with staff training incorporated into the 'Introduction to learning and Teaching' (ILT) course, and in induction events. Equality and diversity matters are addressed extensively in teaching. There is extensive group work relating, for example, to law, ethics and ethical dilemmas, where, in small, interactive groups, students discuss a variety of matters that cover equality and diversity issues, including, for example, HIV patients and those taking methadone, where they learn not to discriminate and to treat all patients equally; all protected characteristics are addressed, as well as matters concerning public health such as safeguarding and sexual health, and staff members from BEM backgrounds share their journeys with the students.

Standard 4: Selection of students

All criteria relating to this standard are met.

The OSPAP FDPCS selection process is made available to prospective students through the University web site, Faculty/School open days and course leaflets. The website includes entry requirements, description of the course and information on student support, as well as links to the Home Office and website, so that students can check the current visa requirements. There are also links to the GPhC website to enable students to find out and understand the professional requirements and the nonstandard method of applying for the course. The site also has clear information on the need for preregistration training and to successfully undertake the GPhC's registration assessment before being able to register as a pharmacist. Applications for the programme are considered by the admissions team; all aspects are considered in selecting students, including English language qualifications, good conduct and the academic equivalence of their qualifications. Applicants are not interviewed formally, and are usually offered a place, unless there are deficiencies in their English language qualifications; applicants who do not meet the English language requirements will be made a provisional offer subject to them gaining this before commencing the course.

Standard 5: Curriculum delivery and student experience

All criteria relating to this standard are met.

The OSPAP was redesigned at the same time as the MPharm degree to produce a patient-centred programme with integrated teaching of science and practice. The programme comprises two, year-long 30-credit modules ('Professional Pharmacy Practice in the UK'; 'From Bench to Bedside') and one 60-credit module ('Application of Science to Patient Care'), along with a zero-credit 'Professional Skills Portfolio'. Recognising the diverse backgrounds of the students, the module 'Application of Science to Patient Care' begins with an intensive induction at the start of the year, and is designed to bring all students to the same level of knowledge and understanding of fundamental science; here, the teaching is adjusted on the basis of early diagnostic tests to determine the students' background scientific knowledge. Students learn about the structure of the NHS, enabling them to compare this with healthcare systems in their home countries. The introductory material covers the roles of the pharmacist, the services offered by pharmacies, fitness to practise, and the GPhC's 'Standards for Pharmacy Professionals'; these aspects are reinforced throughout the course, along with a consideration of ethical dilemmas relating, for example, to emergency hormonal contraception and the implications of religious beliefs for treatment of patients. After induction, the programme introduces the basics of law, and dispensing, as well as responding to symptoms, beginning with relatively simple issues, for example, head-lice and ear problems, and building to more complex conditions such as skin disorders and cardiorespiratory diseases. Students are required to apply their knowledge through case studies, where they must read the relevant literature, and apply practical measures, with role-play exercises concluding these case studies. The course builds through scenarios based on various disorders which encompass discussions of relevant physiology and pathophysiology, spiralling to comorbidities and advanced treatments. The whole learning experience is complemented by placements and simulation activities, as well as inter-professional education. Placements take place both in community and in hospital pharmacy. In hospital, students undertake supervised activities such as medication history taking and patient counselling. There is also a simulated clinical placement in the School of Nursing's simulation suite, where the students obtain drug histories from, and provide patient counselling to, patients played by actors; this is undertaken prior to the hospital placement. OSPAP students also participate in a simulated GP surgery placement where the students conduct a medicines use review (MUR), with actors playing the role of patients or carers; this is undertaken alongside nursing students in an inter-professional learning exercise, and students prepare a 'patient management plan' using patients' notes and other information. OSPAP students also undertake an inter-professional education activity with post-graduate nursing students, where they are asked to develop the concept for a technological intervention to improve patient care. Dispensing practical classes have been designed to be problem-based, where students are required to identify issues, and then proceed to either contact the prescriber (either GP, hospital doctor, nurses or dentist) or communicate with the patients or their carers; this is done as a role play with the tutors. A variety of diagnostic, formative and summative assessment methods are used,

including examinations and in-module assessments using multiple choice questions (MCQs), single best answer (SBAs), extended matching questions (EMQs), essay type questions, and long- and short-answer questions. Students' abilities are assessed through practical examinations, presentations, problem solving exercises, case presentations and objective, structured clinical examinations (OSCEs). The OSCE, a calculations assessment and dispensing test, as well as practical and OSCE-style assessments, underpin the emphasis on developing and assuring students' professional competence. Students receive both group and individual feedback on their submitted work and formative assessments. They must pass all modules and the final OSCE and calculations test to pass the programme. In the final OSCE, students who show unsafe practice, or practice that gives cause for concern, will be noted with a 'yellow card' for that activity; accumulation of a number of 'yellow cards' in this assessment will lead to failure. 'Yellow card' events include dispensing the wrong drug or an overdose, failing to identify a clinically significant, dangerous drug interaction, providing dangerous, inaccurate information, or failing to identify an important contra-indication, such as a penicillin allergy.

Standard 6: Support and development for students

The single criterion relating to this standard is met.

There are comprehensive pastoral and academic support systems in place for students at School, Faculty and University level. During their initial induction, each student is allocated a personal tutor, to whom they remain attached throughout the course. Personal tutors, all of whom are pharmacists, support the students academically along with their personal and professional development, and are the students' points of first contact. The personal tutor scheme is formalised with links to the Academic and Professional Portfolio to encourage student engagement. The Department also operates an 'open-door' policy, so that students can see staff members without an appointment. OSPAP students must satisfactorily complete their Academic and Professional Portfolios in order to gain their awards; this portfolio requires completion of a number of activities in the academic programme and also introduces students to the principles of continuing professional development (CPD) and the need to record it as a professional obligation. There is a wide range of central services to support students, including a Careers and Employability service, which provides advice, events and considerable online support.

Standard 7: Support and development for academic staff

All criteria relating to this standard are met.

The University requires all teaching staff, including those who are part-time, to have a teaching qualification; this is achieved through members of staff achieving Fellowships of the Higher Education Academy (FHEA). New staff members without a teaching qualification undertake an 'Introduction to Teaching and Learning' (ILT) course, from which they build their portfolios to apply for Fellowships. All staff members either have a postgraduate diploma, or have achieved, or are working towards achieving Fellowship of the HEA. The University has a Learning and Teaching Enhancement Centre (LTEC) the role of which is to enhance staff members' teaching and learning practice. In addition to running the HEA-accredited framework that provides the teaching qualification, it also supports continual professional development through this framework to Senior and Principal Fellow level, as well as providing a range of other teaching and learning support through a number of programmes. These programmes are supported by regular School- and Faculty-based sessions on teaching and learning development. The University and Faculty run a number of professional development meetings, covering a range of subjects from management to presentation of current research. The School has at least one away day each year for staff development, and runs a series of research colloquia over the year with speakers from within the School and from other institutions. The mandatory annual staff performance, development and appraisal scheme is designed to assist staff members with their personal and professional development. There is now a formal peer-observation scheme whereby an individual's teaching is observed by other members of academic staff who have undertaken specific training in that role.

Standard 8: Management of an OSPAP

Both criteria relating to this standard are met.

Assessment, quality management and determination of progression and awards are conducted within the Department of Pharmacy. The Department is part of the School of Life Sciences, Pharmacy and Chemistry, which is one of three schools within the Faculty of Science, Engineering and Computing (SEC), the others being the School of Computer Science and Mathematics, and the School of Engineering, Natural and Built Environments. The Dean, Vice Dean, Heads of Schools, and the Finance Business Partner form the Faculty Leadership Team (FLT). Key decisions, which are informed by key policy decisions made by the Senior Management Team, regarding all aspects of faculty business are made via the FLT. Directives and initiatives from the FLT are discussed at School Management Group meetings, where School policy and action plans are determined. The School Management Group is chaired by the Head of School, and comprises the Heads of Departments, the School Director of Learning and Teaching, and the School Director for Research and Enterprise. Important decisions regarding the OSPAP always require the approval of the Head of the Department of Pharmacy, who is responsible for promulgating and implementing these decisions within the Department. Monthly Department of Pharmacy staff meetings are held to disseminate information, including University decisions, as well as professional developments; these staff meetings develop and agree strategy, policies and procedures and address current problems. The OSPAP is led by a Course Director. The Pharmacy Board of Studies, which meets three times a year, is the formal body that approves academic business, while the Assessment Boards have the responsibility for approving student marks and progress; these boards are all chaired by the Head of the Department of Pharmacy.

Standard 9: Resources and capacity

All criteria relating to this standard are met.

The University's budgeting system is the Resource Allocation Methodology (RAM) which is transparent and robust in terms its allocation of resources to faculties, and how the University spends its central funds. Financial planning is undertaken annually but covers the following three years, with plans undergoing iterative refinement until being agreed and signed off each July by the Dean, who is the budget holder. The Faculty contributes 52% of its income to the Centre, retaining 48%, and with all non-pay income devolved to the School; the central contribution covers costs of physical and virtual infrastructure, running the library, student services, and professional support services such as HR and finance, as well as University restructuring costs. The start of the annual process is the creation of the University's Financial Plan, based on forecast student numbers, fees per student and funding, pay costs, non-pay costs and capital costs relating to investment in the University estate and in Information Services. Income is then allocated to faculties based on student numbers, fee income and any additional HEFCE funding; this process ensures that the appropriate level of resource is allocated to faculties. The allocation is agreed by the Faculty Leadership Team, following which budgets are allocated to Schools in line with the resource commitments for staffing and non-pay costs, and with reference to student numbers within each school, subject to the Dean's final approval. The business plan presented in the original documentation showed large and variable deficits from the current academic year onwards associated with a marked increase in central costs and a reduction in income from the OSPAP, where student numbers decreased from 16 to 10 per year. A revised, updated business plan demonstrated a net, albeit progressively declining, surplus until 2022/23. The target for student numbers on the OSPAP remains at 10, as identified in the business plan; a significant and persistent fall below this number would result in the sustainability of the programme being reviewed. Recruitment is significantly influenced by external factors such as visas, although currently the impact of this on the OSPAP is low, as half to three quarters of the cohort are already resident in the UK and do not need visas, which otherwise may have affected recruitment. Numbers expected for any one intake are unclear until late in the recruitment process, because, while applications start to appear in September of the previous year, these are still

coming in until the August before the start of the programme; the Department maintains records, including of those applicants whose first choice is Kingston.

OSPAP students are taught by staff members from the Department of Pharmacy and the Department of Chemical and Pharmaceutical Sciences, who have a wide range of expertise, including medicinal chemistry, analytical chemistry, physiology, pharmacology, pharmaceuticals, pharmaceutical microbiology, pharmacy practice and clinical pharmacy. The staff includes pharmacists and pharmaceutical scientists who undertake teaching and research in the School.

The resources available to the students include the Learning Resource Centre, providing over 450 study places, including places for individual or group study, and approximately 180 networked computers, as well as access to numerous books and journals in both hard copy and electronic format. The Department has access to a wide range of well-equipped lecture theatres and teaching rooms of various sizes, as well as teaching and research space laboratories, a dedicated pharmacy practice suite, a clinical skills laboratory, and a small aseptic preparation room; the School also utilises the School of Nursing's simulation suite, which is a 10-bed hospital ward facility which is fully fitted with modern healthcare equipment.

Standard 10: Outcomes

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

The learning outcomes were scrutinised by discussions with the teaching staff, as well as by reading the documentation. The outcomes selected for discussion in depth were 10.2.2.g, 10.2.3.f, 10.2.4.e, and 10.2.5.g. Having discussed the selected four outcomes with the staff, and having scrutinised the documentation relating to these and to the other outcomes, the team was confident that all 58 outcomes are met at the appropriate levels.

Indicative syllabus

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

Appendix 1 - Standing conditions

The following are standing conditions of accreditation and apply to all providers:

1. The record and report include other comments from the team, and providers are required to take all comments into account as part of the accreditation process. The provider must confirm to the GPhC that required amendments have been made.
2. The provider must respond to the definitive version of the record and report within three months of receipt. The summary report, along with the provider's response, will be published on the GPhC's website for the duration of the accreditation period.
3. The provider must seek approval from the GPhC for any substantial change (or proposed change) which is, or has the potential to be, material to the delivery of an accredited course. This includes, but is not limited to:
 - a. the content, structure or delivery of the accredited programme;
 - b. ownership or management structure of the institution;
 - c. resources and/or funding;
 - d. student numbers and/or admissions policy;
 - e. any existing partnership, licensing or franchise agreement;
 - f. staff associated with the programme.
4. The provider must produce and submit to the GPhC on an annual basis:
 - a. requested data on student numbers and progression and degree awards;
 - b. requested information about the extent of human and physical resources it enjoys for the delivery and support of the degree course.
5. The provider must make students and potential students aware that successful completion of an accredited course is not a guarantee of a placement for a pre-registration year or of future employment as a pharmacist.
6. The provider must make students and potential students aware of the existence and website address where they can view the GPhC's accreditation reports and the timescales for future accreditations.
7. Whenever required to do so by the GPhC, providers must give such information and assistance as the GPhC may reasonably require in connection with the exercise of its functions. Any information in relation to fulfilment of these standing conditions must be provided in a proactive and timely manner.

Appendix 2 – Standards

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

Standard 1: Patient and public safety

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

1.1 There must be effective systems in place to ensure that students:

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

Standard 2: Monitoring, review and evaluation of an OSPAP

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

2.1 There must be systems and policies in place covering:

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

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

Standard 3: Equality, diversity and fairness

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

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

addressed and disseminated;

3.2 Strategies for staff training in equality and diversity

Standard 4: Selection of students

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

- 4.1 Selection process must give applicants the information they need to make an informed application.
- 4.2 Selection criteria must be explicit. They should include:
 - 4.2.a meeting the GPhC's adjudication requirements;
 - 4.2.b meeting academic and professional entry requirements;
 - 4.2.c meeting numeracy requirements;
 - 4.2.d recognizing prior learning, where that is appropriate.
- 4.3 Selectors should apply selection criteria fairly. They should be trained to do this. Training should include equality and diversity matters

Standard 5: Curriculum delivery and the student experience

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

- 5.1 Curricula must be integrated. By this the GPhC does not mean that an OSPAP and pre-registration training must be delivered as single two tier course, but that the component parts of an OSPAP must be linked in a coherent way.
- 5.2 Curricula must be progressive, dealing with issues in an increasing more complex way until the right level of understanding is reached.
- 5.3 An OSPAP must be delivered in an environment which places study in a professional and academic context and requires students to conduct themselves professionally.
- 5.4 An OSPAP must be delivered in an environment informed by research. This means that whether or not all staff are engaged in research, their teaching must be informed by research.
- 5.5 An OSPAP teaching and learning strategy must set out how students will achieve the outcomes in Standard 10. Learning opportunities must be structured to provide:
 - 5.5.a an integrated experience of relevant science and pharmacy practice;
 - 5.5.b a balance of theory and practice;
 - 5.5.c independent learning skills.
- 5.6 The OSPAP curriculum must include practical experience of working with patients, carers and other healthcare professionals. We are not suggesting that off-site placement visits are the only way to achieve this. Schools should articulate their strategy for meeting this criterion, which may include off-site placement visits, using patients, carers and other healthcare professions in-class and simulations.
- 5.7 There must be a clear assessment strategy for the OSPAP. Assessment methods must measure the outcomes in Standard 10.
- 5.8 The OSPAP assessment strategy should include:
 - 5.8.a diagnostic assessments;
 - 5.8.b formative assessments;
 - 5.8.c summative assessments;
 - 5.8.d timely feedback.
- 5.9 Academic regulations must be appropriate for a postgraduate qualification that is both academic and professional and may lead to further professional training. As a general principle, all assessments must be passed. This means that condonation, compensation, trailing, extended re-sit opportunities and other remedial measures should be extremely limited, if they are permitted at all. Course academic regulations may be more stringent than university norms. This may include higher than

usual pass marks for assessments demonstrating knowledge and skills essential to safe and effective pharmacy practice.

- 5.10** Marking criteria must be used for all assessments and all pass criteria must reflect safe and effective practice.
- 5.11** Patient safety must be paramount in assessments: any evidence of an assessment demonstrating unsafe practise must result in failure.
- 5.12** OSPAPs must include an induction programme orientating students to study in the UK. The programme should include diagnostic testing.

Standard 6: Support and development for students

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

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

Standard 7: Support and development for academic staff

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

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

Standard 8: Management of an OSPAP

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

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

Standard 9: Resources and capacity

9. Resources and capacity are sufficient to deliver outcomes.

- 9.1** There must be:
 - 9.1.a** robust and transparent mechanisms for securing an appropriate level of resource for delivering an accreditable OSPAP;
 - 9.1.b** sufficient staff from relevant disciplines to deliver the curriculum to students. Staff must be appropriately qualified and experienced. The staffing profile must include:
 - 9.1.b.i** sufficient numbers of pharmacists – registrants of the GPhC – with experience of teaching in higher education to ensure that an OSPAP can produce students equipped to enter pharmacist pre-registration training in Great Britain.

- 9.1.b.ii** sufficient numbers of pharmacists to act as tutors and professional mentors at university. Not all personal tutors must be pharmacists.
- 9.1.b.iii** pharmacists who are leaders in the profession and in their university, who can influence university policy relevant to pharmacy
- 9.1.b.iv** non-pharmacist academics who can influence school and university policy relevant to pharmacy
- 9.1.b.v** staff who are sufficiently experienced to supervise research. It would be unusual for anyone to supervise research at a particular level unless they had researched to that level or beyond. New research supervisors must be mentored and signed off as being fit to supervise after a period of mentoring
- 9.1.b.vi** science academics who understand the relevance of their discipline to pharmacy and deliver their area of expertise in a pharmaceutical context
- 9.1.b.vii** academic pharmacists and other experienced pharmacy staff who are able to act as mentors to non-pharmacist colleagues
- 9.1.c** career pathways in universities for all staff teaching on OSPAPs, including pathways for practice staff
- 9.1.d** clear lines of authority and responsibility for the strategic organisation and day-to-day management of placements;
- 9.1.e** training and ongoing support for all non-pharmacists involved in the delivery of OSPAPs, which must help them understand:
 - 9.1.f.i** help and understand the relevance of their work to pharmacy
 - 9.1.f.ii** how to deliver their area of expertise in a pharmaceutical context
- 9.1.f** appropriate learning resources
- 9.1.g** accommodation and learning resources that are fit for purpose

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

10.1 Expectations of a pharmacy professional

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

10.2 The skills required in practice

10.2.1 Implementing health policy

Learning outcome	OSPAP	Pre-reg (for reference only)
10.2.1.a Promote healthy lifestyles by facilitating access to and understanding of health promotion information	Shows how	Does
10.2.1.b Access & critically evaluate evidence to support safe, rational & cost effective use of medicines	Shows how	Does
10.2.1.c Use the evidence base to review current practice	Shows how	Show how
10.2.1.d Apply knowledge of current pharmacy-related policy to improve health outcomes	Knows how	Shows how
10.2.1.e Collaborate with patients, the public and other healthcare professionals to improve patient outcomes	Knows how	Does
10.2.1.f Play an active role with public and professional groups to promote improved health outcomes	Knows how	Knows how
10.2.1.g Contribute to research & development activities to improve health outcomes	Knows how	Knows how
10.2.1.h Provide evidence- based medicines information	Shows how	Does

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

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

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

Learning outcome	OSPAP	Pre-reg (for reference only)
10.2.3.a Ensure quality of ingredients to produce medicines and products	-	Shows how
10.2.3.b Apply pharmaceutical principles to the formulation, preparation and packaging of products	Shows how	Shows how
10.2.3.c Verify safety and accuracy utilising pharmaceutical calculations	Does	Does
10.2.3.d Develop quality management systems including maintaining	Shows how	Shows how

appropriate records		
10.2.3.e Manage and maintain quality management systems including maintaining appropriate records	Shows how	<i>Does</i>
10.2.3.f Procure and store medicines and other pharmaceutical products working within a quality assurance framework	Knows how	<i>Does</i>
10.2.3.g Distribute medicines safely, legally and effectively	Knows how	<i>Does</i>
10.2.3.h Dispose of medicines safely, legally and effectively	Knows how	<i>Does</i>
10.2.3.i Manage resources in order to ensure work flow and minimise risk in the workplace	Knows how	<i>Shows how</i>
10.2.3.j Take personal responsibility for health and safety	Does	<i>Does</i>
10.2.3.k Work effectively within teams to ensure safe and effective systems are being followed	Knows how	<i>Does</i>
10.2.3.l Ensure the application of appropriate infection control measures	Shows how	<i>Does</i>
10.2.3.m Supervise others involved in service delivery	Knows how	<i>Does</i>
10.2.3.n Identify, report and prevent errors and unsafe practice	Shows how	<i>Does</i>
10.2.3.o Procure, store and dispense and supply veterinary medicines safely and legally	Knows how	<i>Knows how</i>

10.2.4 Working with patients and the public

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

10.2.5 Maintaining and improving professional performance

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

10.2.5.g Contribute to the development and support of individuals and teams	Knows how	<i>Does</i>
10.2.5.h Anticipate and lead change	Knows how	<i>Shows how</i>

Appendix 3 – Indicative syllabus

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

A1.1 How medicines work

Therapeutics

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

Applied Physical, Chemical and Biological sciences

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

Pharmacology, pharmacokinetics & pharmacodynamics

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

Pharmaceutical technology including manufacturing & engineering science

- Biotechnology
- Manufacturing methods
- Quality assurance processes
- Sterilisation and asepsis
- Environmental control in manufacturing

Formulation and material science

- Materials used in formulations and devices
- Biopharmaceutics, developmental pharmaceuticals, pre-formulation and formulation studies
- Design and standardization of medicines
- Microbiological contamination
- Contamination control
- Product stability
- Medical devices

A1.2 How people work

Normal & abnormal structure & function

- Nutrition
- Physiology
- Pathology
- Infective processes

Sociology

- Social and behavioural science

Health psychology

- Health promotion
- Disease prevention
- Behavioural medicine

Objective diagnosis

- Differential diagnosis
- Symptom recognition
- Diagnostic tests

Epidemiology

- Aetiology and epidemiology of (major) diseases

A1.3 How systems work

Healthcare management

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

Evidence-based practice

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

Professional regulation

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

Medicines regulation

- Evaluation and regulation of new drugs and medicines

- Pharmacopoeial specifications and biological standards
- Medicines licensing
- Product quality, safety and efficacy
- The supply chain
- Packaging, labelling and patient information

Clinical governance

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

Clinical management

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

Workplace Regulation

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

A1.4 Core and transferable skills

Professionalism

Research and research methods

Critical appraisal

- Audit and learning from errors

Problem solving

- Study skills
- Team-working skills

Clinical decision making

- Leadership skills

Accurate record keeping

Reflective practice (incl. continuing professional development)

Effective communication

- Interpersonal skills
- Medical terminology

Interpret & interrogate clinical data

Analyse & use numerical data

Pharmaceutical numeracy

Technological literacy

A1.5 Attitudes and values

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

Appendix 2 - Supporting evidence

The university provided the following documentation in support of their submission:

- XXX
- XXX
- XXX
- XXX

[Delete this whole section if all documentation is listed in main body of the record]