

**Master of Pharmacy
degree (MPharm)**

Interim events: guidance for course providers
For 2018/19 academic year

1. Introduction

The Pharmacy Order 2010 requires that the 'nature, content and quality' of education and training provision is reported to the GPhC by its accreditation panel. This requirement is more explicit than previous legislation, and as such the GPhC has incorporated within its accreditation methodology opportunities to allow course provision to be reviewed in this way.

The accreditation methodology for MPharm degrees includes the requirement for an interim event to be carried out to all accredited providers, so that teaching/learning and placement activities may be observed. The interim event will take place three years after a main successful accreditation or reaccreditation visit and the results of the visit will form an appendix to the main report.

Interim event will be conducted by an accreditation team drawn from the GPhC accreditation panel, which will be responsible for reporting to the GPhC on the nature, content and quality of the accredited MPharm degree.

We will invite the providers to share with the GPhC what range of activities we can observe over the academic year. This means that we don't have to limit the observations to one day and allows the team to have evidence of a range of student activities in different settings. These visits will be undertaken by individual team members at a time agreed by the University and the GPhC. The team member will report back to the accreditation team at the main event. The team member may or may not be a member of the accreditation team that visit the university for the main interim visit.

Example

The second year students may be attending an inter-professional education session at another university in the autumn term. Another session could be taking place with third year students undertaking a clinical skills session at the local trust in the spring term. Members of the team could attend these sessions and speak to the tutors and students on that day. They will make notes and report back from these satellite visits to the full team at the main visit that takes place later in the spring term.

The interim visit is not a secondary accreditation and the GPhC's accreditation judgement from the main accreditation will stand unless evidence comes to light requiring it to be reconsidered. This evidence could come from an interim visit or from any other source or activity.

This document is aimed at providers of accredited MPharm degrees, and is designed to set out the operational aspects of an interim visit and what is required of the course provider.

1.1. GDPR

The GPhC is committed to compliance with the General Data Protection Regulation (GDPR), details for our **privacy policy** can be found on our website - <https://www.pharmacyregulation.org/privacy-policy>

2. Purpose of the interim event

To allow an accreditation team to:

- To monitor progress of delivery of the accredited MPharm degree since the accreditation or reaccreditation to the *GPhC Standards for initial education and training of pharmacists*.
- Evaluate a selection of the educational activities on the accredited course that were articulated within the main re/accreditation event the accreditation team will wish to satisfy itself of the quality, particularly of the practice opportunities available, and to ensure that they continue to meet the *GPhC Standards for initial education and training of pharmacists*,

In particular, the accreditation team will be evaluating how well the accredited MPharm degree meets standard 5.6 which states:

The MPharm/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 professionals' in-class, and simulation.

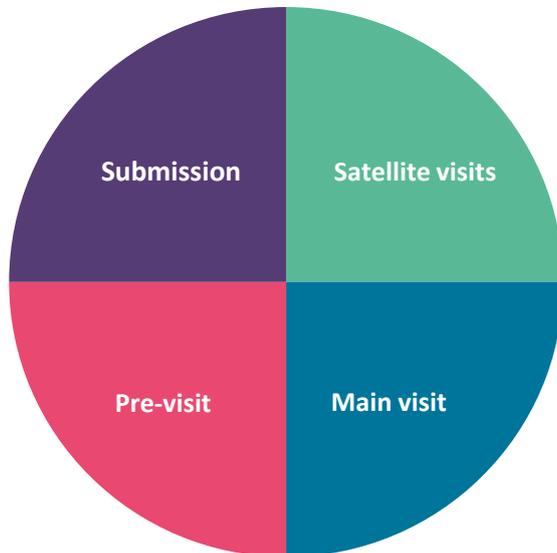
And the teaching and learning strategy set out in 10.11, which states:

Learning is based on experience that provides education in interprofessional practices and procedures with other healthcare professionals

- To evaluate these practice activities in relation to the student's ability to demonstrate the relevant outcomes in Standard 10.
- To meet with students to evaluate their level of meaningful engagement and progress in the current MPharm degree.

3. Structure of the interim event

The four components of the interim event



The structure of the interim event is composed of four elements:

1. Submission – Evidence and documentation
2. Satellite visit
3. Pre-visit
4. Main interim visit

4. Practice activities

There is a wide scope of activities that the accreditation team could observe. The principle being that the activities relate to all aspects of modern pharmacy practice. The observations may take place at sites outside the university before the main event.

These could be:

- Any activities that relate to patients, carers or service users.
- Any activities involving students/practitioners of other health professionals.
- Science-based activities which lead directly to the application in practice, such as industrial related activities.
- Virtual, simulated or web based initiatives

5. Submission documentation

Unless otherwise advised, the course provider must submit documentation to the GPhC at least one month in advance of the main interim visit.

Any documents or information required for the satellite visits can be provided a few days prior to this visit or on the day of the visit if appropriate.

The submission documentation must be in the style of an executive summary which includes the following:

- i. An evaluation of the MPharm degree and progress made since the last accreditation to the GPhC Standards of education and training for pharmacists. The narrative should include how the conditions and recommendations have been addressed.
- ii. There should also be explanations of progress on points identified in the report/record by the accreditation team as being areas that the University have stated they are working towards or was work in progress. As related to you at the main accreditation event, the full record and report includes other comments from the team and the Registrar regards the record and report in its entirety as its formal view on provision. Providers are required to take all comments into account as part of the reaccreditation process.

The team's focus will be the key areas identified in the original record by the providers of plans and commitments to the provision.

- iii. The range of practice activities taking place on the MPharm degree (not just those being observed during the visit)
- iv. How these activities enable students to meet the Outcomes of Standard 10, and at which level. (e.g. a first year may only be able to achieve a 'knows' or 'knows how'). This is an extension of what we ask at the main accreditation.
- v. How these activities relate to each other (horizontal) and how they build on the previous experience and progress to further experience (vertical)
- vi. A short report of how these activities have progressed since the main accreditation of the programme.
- vii. Any changes to the initial strategy presented at the main accreditation.
- viii. Any areas of good practice that have been identified.
- ix. Any areas of improvement identified.
- x. Any feedback collected from students or other stakeholders.
- xi. Results from the most recent NSS.
- xii. What action taken as a result of this feedback and NSS.

- xiii. Table of student numbers, attrition rates and performance in assessment.
- xiv. Future developments

6. Preparing for the visits

Satellite visits

If it is decided that a satellite visit/s will be included in the interim visit then the GPhC will arrange these directly with the university prior to the main visit, and depending on the time of this visit, before the submission documents being required.

This can be done by email or telephone call with the Quality Assurance Manager (Education).
Information required:

- The nature of the visit e.g. Placement or IPE session
- The time and place of the visit
- The length of the session
- The number of students participating
- The level of the students being observed e.g. year 1,
- The contact name of staff/tutor responsible and present at the visit
- Any specific requirements for the accreditation team member/s such as special protective clothing or vaccination check
- Summary of the activity being observed
- Any other pertinent information that you think would be helpful for the visit to run smoothly.

After the satellite visit the GPhC QA education team will contact the University to confirm the visit took place and discuss any general feedback from the session. The team member will feedback detailed findings to the team at the main interim visit.

The pre-visit

The pre-visit adopts the same principles as the pre-visit for a full accreditation event and will only relate to the main interim visit at the University.

The aim of the pre-visit is to:

- Set out the purpose of the pre-visit
- Agree the activities we will be observing at the main visit
- Summarise the activities observed at the satellite visit if applicable
- Wish for clarifications before the visits
- Request additional documentation or amendments to the documentation prior to the visit.
- Agree a schedule and content of the interim visit
- Introduce members of the accreditation team
- Identify what facilities we will need on the event
- Advise you on how to prepare for the event

Please note the pre-visit will be a teleconference with the Quality Assurance Manager (Education), the Team Leader and the provider.

7. The main visit

The following is provided as a guide:

Day 1

- i. The team arrive at the specified location (University or other) early afternoon.
- ii. The team meet privately for 90 minutes at the start of the visit
- iii. The team meet with a small group of staff, including the Head of School or another designated staff member.

This meeting will include a briefing on the progress and updates of how the MPharm programme is progressing under the GPhC standards education and training for pharmacists and to briefly introduce the activities we will observe during the visit the following day

Day 2

- iv. Team Observe the activities

The team will take direction from the staff members as to where we can observe these activities. The team members will observe activities and speak to students during the observations. They will not be intrusive and the questions will be enquiring in nature and not to test the students. The team will be happy to answer any questions the students may have. The team will observe the activities for an agreed period. During this time, the rapporteur will make notes of what the team see and hear so this can be written in the report.

After the observations:

- v. The team meet with the students informally to discuss their experience.
- vi. The team will hold a private meeting to discuss the findings of the observation for a short period (30 minutes)
- vii. The team will meet with the staff team to feedback a summary of the visit findings. These will be highlighted in the report after the event.
The staff team will have the opportunity to ask questions of the team at this point. This session is intended to be collegiate.

8. The visiting team

The visiting team will comprise:

- An accreditation team leader
- Between 2 and 3 accreditation team members.
- The team may or may not include a lay member. This will be determined by the practice activities that will be observed during the visit. Where practice activities involve patient interface, we will endeavour to include a lay member.

- A representative of the GPhC. This will normally be the Quality Assurance Manager (Education).
- A Rapporteur, who will take notes during the visit and will prepare a report of the accreditation team's findings.

The accreditation team leader and team members will be selected for the visit according to their expertise and experience. This will relate to type of activity that will be observed.

We strongly recommend that each course provider undertakes a risk assessment in advance of the visit, particularly if the visiting team will be required to visit a clinical or industrial placement. Each provider should consider whether the visiting team will need to wear any specific clothing, or need to check that they are up to date with their vaccinations. Once the risk assessment is complete, the GPhC must be advised within in the submission document of any areas of note.

9. Outcome of the interim event

If the MPharm degree continues to meet the GPhC education and training standards for pharmacists, accreditation will be confirmed for the remainder of the accreditation period. If the MPharm degree is found to fall short of meeting the GPhC education and training standards, the accreditation team may impose conditions or recommendations.

The Registrar of the GPhC will be required to ratify the team's decision on the outcome of the interim event.

Areas of good practice will be recognised. These may relate to meaningful practical experience of:

- patient and public and carers engagement activities
- inter-professional education activities
- clinical placement or simulation activities

The team may also make suggestions for improvements on the MPharm degree provision.

10. After the visit

Record and report

Following the interim event, a record and report will be prepared and sent to the accreditation team for review. The provider will be sent a draft of the record and report for comments on factual accuracy. Once agreed, the record and report will be sent to the Registrar of the GPhC for approval.

The record includes the accreditation team's detailed findings against the GPhC standards for the initial education and training of pharmacists together with a summary of the team's findings in relation to each of the activities observed during the interim event.

The report provides a summarised account of the team's findings against each of the GPhC standards together with an overall summary of all the activities observed during the interim event.

Once the record and report have been approved, the provider will be sent final versions of both documents and the report will be posted on the [GPhC website](#) alongside the original accreditation report.

Evaluation and feedback

We will require you to complete an evaluation of the visit via an online survey. This is to ensure our quality assurance processes remain robust and fit-for-purpose.

Access details will be sent to you by the GPhC education team.

References

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

https://www.pharmacyregulation.org/sites/default/files/standards_for_pharmacy_professionals_may_2017_0.pdf

https://www.pharmacyregulation.org/sites/default/files/document/gphc_future_pharmacists_may_2011.pdf

<http://www.pharmacyregulation.org/sites/default/files/GPhC%20Accreditation%20Methodology.pdf>

Interim event process flowchart

