

**Queen's University Belfast Master of Pharmacy
(MPharm) degree interim event report, March
2021**



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Event summary and conclusions

Provider	Queen's University Belfast
Course	Master of Pharmacy (MPharm) degree
Event type	Interim
Event date	4-5 March 2021
Current accreditation period	2020/21 - 2022/23
Relevant standards	Future pharmacists Standards for the initial education and training of pharmacists, May 2011
Outcome	<p>Continued accreditation confirmed.</p> <p>This period of extension follows the GPhC's policy for MPharm degrees being reviewed this academic year that continue to meet the 2011 standards. The next MPharm event will be full reaccreditation to the 2021 standards of initial education and training for pharmacists.</p> <p>The team noted the appropriate adaptations that have been made to manage the delivery of the MPharm degree during the pandemic, and that both staff and students appear to be well supported during this time.</p>
Conditions	There were no conditions.
Standing conditions	The standing conditions of accreditation can be found here .
Recommendations	No recommendations were made
Registrar decision	Following the event, the Registrar of the GPhC accepted the accreditation team's recommendation and approved the continued accreditation of the programme until 2022/23.
Key contact (provider)	Dr Sharon Haughey, Director of Education (Pharmacy)
Accreditation team	<p>Professor Chris Langley (Team Leader) Professor of Pharmacy Law & Practice and Head of the School of Pharmacy, Aston University; Deputy Dean, College of Health and Life Sciences</p> <p>Professor Barrie Kellam (Team member-academic) Professor of Medicinal Chemistry, University of Nottingham</p>

	<p>Mike Pettit (Team member-pharmacist) Retired Senior Lecturer, Pharmacy Practice and Hospital Pharmacy Manager</p> <p>Raminder Sihota (Team member-pharmacist) Senior Professional Standards Manager, Boots</p> <p>Dr Daniel Greenwood (Team member-pharmacist recently registered) Senior Lecturer in Clinical Pharmacy, Anglia Ruskin University School of Medicine</p> <p>Catherine Boyd (Team member-lay) Chair of Fitness to Practise Panels HCPTS</p>
GPhC representative	Philippa McSimpson, Quality Assurance Manager, GPhC
Rapporteur	<p>Rachael Mendel, Quality Assurance Officer, GPhC</p> <p>Philippa McSimpson, Quality Assurance Manager, GPhC</p>
Observers	<p>Professor Antony D'Emanuele (accreditation panel member in training) Head of the Leicester School of Pharmacy, De Montfort University</p> <p>Daniel Young, Pre-registration Lead, PSNI</p>

Introduction

Role of the GPhC

The General Pharmaceutical Council (GPhC) is the statutory regulator for pharmacists and pharmacy technicians and registered pharmacies and is the accrediting body for pharmacy education in Great Britain (GB). The GPhC is responsible for setting standards and approving education and training courses which form part of the pathway towards registration for pharmacists. The GB qualification required as part of the pathway to registration as a pharmacist is a GPhC-accredited Master of Pharmacy degree course (MPharm).

This interim 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* (<http://www.legislation.gov.uk/ukxi/2010/231/contents/made>). It requires the GPhC to 'approve' courses by appointing 'visitors' (accreditors) to report to the GPhC's Council on the 'nature, content and quality' of education as well as 'any other matters' the Council may require.

Background

The Queen's University MPharm degree was reaccredited in 2018 for a full period of 6 years with no conditions or recommendations. Since 2018 the School has continued to develop the course in line with changing practice and future developments in foundation training and prescribing. These include a final year module on Preparation for Practice focussing on managing change, reflective practice, decision-making and leadership within the health service. In response to student requests for exposure to more patients and products in all years of the course, additional sessions have been designed with teaching staff from primary and secondary care, working across a number of modules, and some include patients. Additionally, over the last three years the School has been reviewing and adapting the course with a renewed focus on clinical and prescribing skills. To support these activities, a new interprofessional simulation centre, the KN Cheung SK Chin Intersim Centre, was completed in January 2021. This a cutting-edge training facility for Queen's University Medical, Pharmacy, Dentistry, and Nursing and Midwifery students.

To manage the programme during the COVID-19 pandemic, in March 2020 the University moved all teaching and assessment online for the remainder of the 2019/20 academic year. Lectures and workshops were delivered remotely using the University virtual learning environment and Microsoft (MS) Teams. Although the majority of practical classes had already been completed, module teams cross-checked with previously-mapped Standard 10 outcomes and a full risk analysis for assessments was completed and submitted to the PSNI and GPhC in April 2020. For the Academic Year 2020/21, a risk assessment was completed for all students prior to return to campus. A blended approach to teaching was adopted with lectures delivered online, and in-person teaching facilitated with health and safety restrictions, in tandem with guidance from University Occupational Health Service about individual students. The School invested in the Learning Science platform to help deliver educational materials around practical teaching. Online assessment for Years 1-3 will continue but an exemption for some face-to-face assessment has been made for final year students for May 2021 and for Year 3 students undertaking face-to-face proprietary dispensing classes. Placements have been adjusted to accommodate pressurised clinical environments.

Documentation

Prior to the event, the provider submitted documentation to the GPhC in line with the agreed timescales:

- Final QUB submission MPharm interim 2020-2021
- Appendix 1: Admissions and interviewing policy and standards, including contextual offers policy
- Appendix 2: Aggregate applications data and entry profiles for the last three academic years
- Appendix 3: Critical evaluation of the applications data and entry profiles in Appendix 2
- Appendix 4: Aggregate progression data for the three cohorts

- Appendix 5: Critical evaluation of the progression data in Appendix 4
- Appendix 6: MPharm risk register for the next two academic years
- Appendix 7: Staff list and vacancies

The documentation was reviewed by the accreditation team and it was deemed to be satisfactory to provide a basis for discussion.

Pre-event

In advance of the main event, a pre-event meeting took place via videoconference on 18 February 2021. The purpose of the pre-event 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 event.

The event

Due to the COVID-19 pandemic, the GPhC modified the structure of the event so that it could be held remotely. The event was held via videoconference between Queen's University Belfast and the GPhC accreditation team on 5 March 2021 and comprised of meetings between the GPhC accreditation team and representatives of the MPharm programme and the University Admissions team.

Declarations of interest

Reminder Sihota declared that she line managed Johanne Barry, Senior Lecturer (Education), around 15 years ago. Chris Langley declared that both himself and Johanne Barry were members of the GPhC Board of Assessors. It was agreed that neither presented a conflict of interest.

Schedule

Day 1 – 4 March 2021

Meeting number	Meeting	Time
1.	Accreditation team leader meeting with GPhC representative	13:30 – 13:50
2.	Private meeting of the accreditation team and GPhC representative	14:00 – 15:45

Day 2 – 5 March 2021

Meeting number	Meeting	Time
3.	Private meeting of the accreditation team	09:00 – 09:30
4.	Progress meeting including presentation	09:30 – 11:30
5.	Private meeting of the accreditation team	11:30 – 11:45
6.	Admission, progression, monitoring and support meeting	11:45 – 12:45

7.	Private meeting of the accreditation team	13:30 – 13:45
8.	Significant pedagogical developments presentation	13:45 – 14:30
9.	Student meeting	14:45 – 15:45
10.	Private meeting of the accreditation team	15:45 – 16:45
11.	Delivery of outcome to programme provider	16:45 – 17:00

Attendees

Course provider

The team met with the following representatives of the University:

Name	Designation at the time of accreditation event	Meetings attended
Professor Colin McCoy	Head of School	4, 6, 8, 11
Dr Sharon Haughey	Director of Education (Pharmacy)	4, 6, 8, 11
Professor Lezley-Anne Hanna	MPharm Lead Years 3 & 4	4, 6, 8, 11
Dr Paul McCague	MPharm Lead Years 1 & 2	4, 6, 8, 11
Dr Maurice Hall	Director of Education (BSc and CQC)	4, 6, 8, 11
Ms Johanne Barry	Senior Lecturer (Education)	6, 8, 11
Dr Briegen Girvin	Lecturer (Education)	6, 8, 11
Dr Carole Parsons	Lecturer and member of the EDI Committee	6
Dr Deirdre Gilpin	Lecturer, Chair of the EDI Committee and SWAN Champion	6
Ms Tara Brown	School Manager	4, 6, 8, 11
Mr Liam Barton	Admissions	6
Ms Rachel Stewart	Admissions	6

The team also met virtually with a group of 15 MPharm students, three from Year 1, three from Year 2, Four from Year 3, and five from Year 4

Key findings

Standard 1: Patient and public safety

Standard continues to be met? Yes No (accreditation team use only)

The accreditation team was satisfied that students have access to support for health, conduct and academic issues. In terms of academic support, the team was told that during the pandemic weekly year group meetings were introduced and held remotely to keep students updated and answer queries or address concerns. Personal tutors continued to meet with students at least 4 times a year, carried out remotely. The small cohort sizes allowed staff to get to know each student and easily pick up on issues and address matters quickly.

Students are continuously monitored in terms of engagement and performance and any concerns are raised and addressed timeously. They are taught about the PSNI Code and GPhC Standards during the induction sessions, followed up by Code of Conduct workshops which detail the fitness to practise procedures, including the new GPhC guidance on Fitness to Practise. There continues to be a very low number of academic offences each year. Where cases arise, the documented process is followed, and this process was adapted to an online format during the pandemic. Measures are used to discourage fitness to practise issues, and an example was provided of a recording of a student reflecting on their poor judgement, which led to an FTP case, who agreed for their reflections to be shared with year 1 students to highlight the importance of appropriate conduct as a pharmacy student.

Criminal record (good character) checks are carried out via an AccessNI Enhanced Level Disclosure check and health assessments are completed by the University Occupational Health Service which is provided by the Belfast Health and Social Care Trust (BHSCT).

Standard 2: Monitoring, review and evaluation of initial education and training

Standard continues to be met? Yes No (accreditation team use only)

The University management structures have remained unchanged since the last reaccreditation in 2018. Weekly Faculty Education meetings during 2020 have supported Directors of Education in decision-making on placements, student communications and remote learning developments. Management structures at a School level remain the same although the Education Committee working groups are currently being reviewed. Education Subgroups have met more often and remotely during the COVID-19 pandemic to support all staff in the changes and development of the blended learning approach.

The annual programme review process has been replaced with Continuous Action for Programme Enhancement (CAPE), a mechanism by which the University assures the quality and maintenance of the academic standards of its programmes. The School will be subject to a Periodic School Review in 2022/23 which will focus on the maintenance of quality and standards of educational provision and enhancement. Module reviews and teaching evaluations have been conducted remotely with any issues being addressed. An example of a change as a result of module evaluation was provided relating to the NICE Evidence Search Student Champion Scheme. This had previously been delivered in final year however has now been moved to Year 3 of the course to provide the training and support earlier in the degree and prepare students for more complex final year modules. It provides

a scaffold for students completing their Medicines Optimisation Tools (particularly principle 2 on Evidence-based choice of medication) during their third and fourth year placements at the hospital site, and during their Advanced Pharmaceutical Care module assignment later in Year 4.

Weekly catch-up meetings with year groups have allowed the School to work in close partnership with students and to act promptly to address questions or concerns. Overall student satisfaction levels in the National Student Survey have remained above 90% since 2018 (2019, 94.5%, 2020, 92.7%). A Student Voice Committee (SVC) replaced the Staff Student Consultative Committee in 2020/21 to receive evaluation and feedback from students, to allow Heads of Schools to seek the views of students on matters of policy related to course development and review, and to enable discussion of areas of concern for students. An example was given of a course change following recent feedback received from students through the SVC, which was that students were happy with recorded lectures but wished to continue to have live sessions at the end of each topic to allow them to interact with lecturers and answer questions.

Standard 3: Equality, diversity and fairness

Standard continues to be met? Yes No (accreditation team use only)

An Equality, Diversity and Inclusion (EDI) School of Pharmacy group has been established with responsibilities including an ongoing evaluation of protected characteristics data and actions in relation to progression, attainment and retention.

The understanding by MPharm students and their application of EDI principles has been strengthened by developing and launching a bespoke student unconscious bias training package, introducing 'Mind the Gap' resources, enhancing interdisciplinary educational provision and engagement in team-working, and highlighting instances of racism and discrimination, including how to report these. All staff members that teach on the MPharm programme have completed the mandatory university EDI training packages and refresher courses.

The team was told that the Protected Characteristics MPharm Action plan continued to be rolled out and the actions are mostly ongoing at present.

Thorough protected characteristics data in the context of MPharm degree classifications and progression for 2017-18, 2018-19 and 2019-20 graduating cohorts have been analysed and reviewed. In some cases it had been difficult to draw meaningful conclusions given the demography of the student population and the small numbers involved for age, disabilities, and ethnic minorities. One consistent finding across the three cohorts was that female students outperformed males, but as the current cohorts have not completed their degree and only a small number have failed to progress there is limited data around progression. The School has started to look further into performance at assessment and module level for males and females, and to look at literature in this area. The School is working to develop more academically stimulating materials, as the literature suggests that males may experience academic boredom to a greater extent than females (which can subsequently affect the achievement of academic goals). The School strives to ensure it uses a diverse range of appropriate assessment approaches, and targeted male mental health at a recent School of Pharmacy virtual social event.

The School recognises that a large proportion of its staff have children, and so has made adaptations to the timing of key meetings to reflect this and has introduced core working hours.

Standard 4: Selection of students *and trainees*

Standard continues to be met? Yes No (accreditation team use only)

Entry requirements been maintained since the last reaccreditation in 2018. HESA average tariff points for each year were: 2017/18:162, 2018/19:159, and 2019/20:159, with health and good character checks continuing to be mandatory. The team noted that GCSE English Language (or equivalent) was not stated as an entry requirement for the MPharm on the University's website and sought confirmation as to whether this remained a requirement. The School confirmed that it was, but that as GCSE English Language was a required for all university courses, the University did not require it to be specified for each course.

The team noted that applicants whose first language is not English are signposted to English Language courses. The team enquired whether this had been found to be sufficient and was told that they also encourage all students whose first language is not English to undertake work in a patient-facing environment to familiarise themselves with language and culture in a UK healthcare setting. During the course staff make the students aware of colloquial expressions and encourage student to get used to regional accents through local media broadcasts.

Selection is based on application only for the time being, through review of academic ability. From 2023-24 onwards there are plans to introduce online interviewing. This is currently being rolled out for medicine and dentistry and so the School will take on board the findings from these Schools to develop the process for pharmacy.

The School is launching a widening participation pathway opportunity programme in 2021 aimed at young people aged 16-19, who meet at least one of several criteria based on needs. Successful candidates may be offered a reduction of one A-level grade. i.e. ABB instead of AAB. The School intends to make adjustments to the current selection process following the publication of the new GPhC Standards which state that "all admissions and selection processes must include an interactive component, to assess applicants' values and professional suitability". To support this change, several staff members have received training and conducted mini-interviews in the School of Nursing and Midwifery during the pandemic. One hundred and forty two students were admitted in 2020, a substantial increase over the previous two years.

Standard 5: Curriculum delivery and student experience

Standard continues to be met? Yes No (accreditation team use only)

The MPharm course is modular and comprises two 15-week semesters with six modules in Year 1, four in Year 2, five in Year 3 and six, including a project in Year 4. Since the last reaccreditation the School has continued to deliver a range of teaching and learning to meet the GPhC outcomes in Standard 10, although adjustments have been made since March 2020 to accommodate the restrictions during the pandemic.

Supplementary Regulations were invoked in April 2020 in order to allow Boards of Examiners to determine student progression when the normal course of assessments had been disrupted. An MPharm mapping exercise concluded that assessments were required for most modules and these were moved to online assessments, taking care to ensure that safe and effective practice was

maintained. Thus, OSCEs were moved to written, online OSCEs with assessment and essential criteria to pass each circuit still focussed primarily on patient safety and on making evidence-based choices. Assessments in certain modules were coursework-based and not affected.

A full risk assessment was completed and submitted to the GPhC and PSNI. The team enquired how academic quality and integrity of assessments was maintained with the move online and was told that for MCQ exams the questions and answers were randomised to reduce opportunity for collusion, the time to answer each SBA question was also limited for this reason. The team reviewed students work for signs of collusion such as sets of identical errors or wrong answers, or identical phrasing. Overall cohort performance was reviewed, and the team was assured to find performance was similar to previous cohorts. As a result of staff vigilance for potential collusion was maintained through careful marking; this subsequently resulted in a small number of students being investigated for academic offences and being subject to Fitness to Practise panel hearings and sanctions.

Although the University has decreed that all assessments remain online for 2020-21, the School has been given dispensation for final year examinations be completed face-to-face if possible. Class tests during the current year have used MCQs/SBAs/EMQs with much shorter time limits, using time-constrained environment software which shuffles the questions in the question bank; results to date have been very closely aligned to the results from the previous year under normal conditions. Pharmacy practice classes in Years 3 and 4 have continued in a face-to-face capacity allowing the assessment of safe and effective practice in clinical checking and interacting with prescribers and patients in a simulated environment. Final year students have completed the critical literature review for their project as normal, but the projects consist of students being issued with a full data set for analysis in most cases; for other projects data collection can be completed via online questionnaires and focus groups. Students that were unable to complete their community pharmacy placements in Semester 2 2019/20 due to COVID-19 completed these over the summer or during Semester 1 of 2020/21 when possible.

All Year 4 students have completed any outstanding community placements and the associated learning outcomes have been achieved. For the academic year 2020/21, Year 1 community placements have moved to remote learning using an online lecture, video, workbook and tutorials in small groups. It is envisaged that the Year 2 and 3 community placements will take place live in summer 2021. Year 1 hospital placements have moved to remote learning with the Teacher-Practitioner (TP) Team using synchronous virtual tutorials in small groups; Year 2 placements were completed using this approach in December 2020. Year 3 placements are due to take place in second semester 2021 and will involve an asynchronous virtual workshop on medicines optimisation, two half days at an experiential site with a synchronous small group formative tutorial. Year 4 placements were completed in Semester 1 of 20/21 with the associated learning outcomes for the placement being taught and assessed. The TP Team developed virtual cases, medication kardexes and laboratory and non-laboratory information for students who were not able to enter the clinical environment; these cases were discussed in synchronous virtual tutorials.

Standard 6: Support and development for students *and* trainees

Standard continues to be met? Yes No (accreditation team use only)

A similar range of mechanisms to that at the time of the previous reaccreditation in 2018 remains in place. Changes include the School using the two-week skills module at the start of Year 1 to help with the transition to university for Year 1 entrants. Additional virtual learning environment materials have been developed around orientation, transition skills, academic writing and careers to help all Year 1 students across the University. At a School level, the student-led Mental Health and Wellbeing group has continued to work, along with the Student Voice Committee and Student Representatives. This year an e-zine was created, along with social activities, and support networks for year groups to address concerns around social isolation during lockdown.

During the pandemic the School has seen an increased demand for support for students well being and the University has reacted to this by investing further to provide support, particularly in its counselling services.

Additional support for Year 1 students has been put in place with more regular meetings with personal tutors via MS Teams. The student-led International Undergraduate Student Peer Mentoring Scheme continues to run with new mentors being trained annually to support and develop Year 1 mentees. Students have continued to engage in Interprofessional Learning events using MS Teams activities. An additional student prize was introduced in 2019, the Community Pharmacy NI Prize for Engagement during Community Pharmacy Placement, recognising an individual student's dedication to learning, working with others and patient care in the community pharmacy setting. Over the last three years QUB MPharm students have been finalists and winners in the NI Healthcare Awards, and two QUB students have been recipients of the Pharmacy Student Leadership Award.

Standard 7: Support and development for academic staff *and pre-registration tutors*

Standard continues to be met? Yes No (accreditation team use only)

The team was told that all staff members have been affected by the pandemic, but that support has been provided throughout with tailored support for each staff member where necessary. An operations recovery group is in place and staff are fully involved in developments for returning to campus. Staff have been assured that they may focus on educational delivery aspects of their role during the pandemic and that they will not be expected to meet research targets.

During the initial months of the pandemic, staff members were supported to develop alternative teaching and assessment approaches by the University's Centre for Educational Development. VLE Support is available for staff 24 hours a day. There is a sharing culture amongst the staff team and staff supported each other through the transition and shared their learning.

As at the 2018 reaccreditation, the School continues to run an induction programme for all new academic staff, including mentorship of all staff on probation and a voluntary mentor scheme for staff beyond probation. The transition from the previous Appraisal system to a Personal Development Review (PDR) has represented a significant change with a new Academic Progression process in response to the feedback received from staff. PDR is designed to take account of the needs of all categories of staff, including practice staff and part-time staff. During the last three years 11 staff members have gained promotion, including six from the education profile. The University added the Reader (Education) profile for academics on the Education pathway in 2019, with two members of staff promoted to Reader (Education) in 2020. Since the last visit in 2018, one member of staff has received a National Teaching Fellowship, there are now three Senior Fellows

and one Principal Fellow of the Higher Education Academy (HEA). Several technicians who support the MPharm education provision have received HEA Associate Fellowships. As a result of employees responding to the 2016 Staff Survey indicating that they wanted more opportunities to make their voices heard, a Staff Forum has been established. This provides staff with an opportunity to engage with School representative, gathering their feedback and listening to their suggestions for positive change. This has enabled co-creation of solutions that help shape and design a more positive employee experience which meets both the needs of the employees and the University.

Standard 8: Management of initial education and training

Standard continues to be met? Yes No (accreditation team use only)

In August 2020 there was a planned change in the Head of School and a restructuring of a number of working groups reporting to the Education Committee, as well as appointment of two MPharm Programme Directors (Leads) in November 2020. In December 2019, a new Placement Subgroup was established to bring together placement coordinators from hospital, community and primary care. The School anticipates that this change will positively impact the student learning experience, by increasing student confidence in the workplace and providing exposure to complex patient cases and the decision-making process to better prepare them for practice.

Structured, off-site learning is quality assured and linked to specified areas of the curriculum and learning outcomes, and the School trains pharmacist tutors from all sectors of practice as part of the quality assurance processes for placements. Student attendance requirements have been maintained, although during 2019/2020 alternative arrangements have been made for vulnerable students. Engagement with online content can be monitored using the Canvas analytics functionality. A new category of exceptional circumstances has been established to deal with COVID-19-related personal circumstances that may impact students' academic performance, although a requirement to self-isolate is not, in itself, considered an exceptional circumstance if students are still able to engage remotely with their academic studies and assessments. The requirements for specific supporting medical evidence for other exceptional circumstances applications have been adjusted for the current year, given the constraints on the health service as a result of the pandemic. However, students have been advised that, as a result of mitigations that may be granted following a successful exceptional circumstances application, results may miss the normal Board of Examiners meeting and as such will not be ratified until the next Board of Examiners meeting, usually following the next assessment period. The team enquired how the School made sure that students are made aware of, and understood, the policy change and was told that the University has a COVID-19 section on the website with detailed FAQs. During weekly meetings with students the School made students made aware of which aspects of the supplementary university regulations during the pandemic applied to MPharm students, and which did not (such as carrying over modules) and answered queries.

Standard 9: Resources and capacity

Standard continues to be met? Yes No (accreditation team use only)

The financial strategy, budget approval, management and reporting mechanisms, and financial allocations and financial management processes within the School remain unchanged since the 2018 reaccreditation. A new University corporate plan, Strategy 2030, which will set out a revised

strategy and priorities for growth for the University is currently in the planning phase. Development of a vibrant curriculum which meets the revised GPhC standards is considered to be a key activity for the School in meeting the goals of Strategy 2030.

A new simulation centre (The KN Cheung SK Chin Intersim Centre) was completed in January 2021. This features a room dedicated to medicines and pharmacy alongside simulated settings for a patient home, primary care, secondary care and a simulation 'cave' or VR suite for other simulated scenarios. New interprofessional learning scenarios are under development and simulation/debriefing training will be completed by staff over the next 6-12 months.

There have been a number of changes to the staff profile since 2018 but the number of registered pharmacists working in a full-time capacity in academic positions has been maintained at 50%. Placement provision and additional teaching continue to be supported by a Boots Teacher-Practitioner and a team of Hospital Teacher-Practitioners. Academic staff members from the School continue to engage with Faculty and University Committees to provide leadership and influence University policy. The School is seeking funding for four additional staff post to support the delivery of the MPharm to the new standards.

Since the outbreak of the pandemic, staff have been involved in weekly meetings at both Faculty and University level and have influenced decision-making, student communication and policy. Additional learning resources have been put in place with a new VLE, and all laboratory equipment and other resources previously described for the 2018 reaccreditation documentation have been maintained.

Significant pedagogic developments

1. Increasing Interprofessional Learning (IPL) Opportunities in the Simulated Environment

Objective: to continue to increase IPL opportunities for students with the view to moving to the new Interim facility.

Pedagogic underpinning: Successful IPE can afford students a deeper understanding of the roles of their co-professionals, optimising the skills of health teams and improving outcomes. Simulation-based education (SBE) provides learners with an opportunity to practise and develop their skills before transferring them to practice, in a safe environment without compromising patient safety.

Design: After a briefing, groups of medical and pharmacy students consulted with a patient in a simulated GP office in small groups. The simulated patients described common general practice presentations.

Results: Detailed analysis of the data in 2018 yielded four main themes of participant's experiences of the interprofessional simulation based prescribing and dispensing activity: 1) IPE simulation activity: creating a broader learning experience; 2) Patient-centred practice: a shared understanding; 3) Professional skills: explored and shared; and 4) Professional roles: a journey of discovery, respect and stereotypes.

Conclusion: This approach broadens the scope of simulation-based learning, harnessing interprofessional education in prescribing in the community. Both professions felt that the interprofessional activity helped to improve their own clinical skills, and in turn, learned to trust the expertise of their colleagues. In addition, pharmacy and medical students alike believed the

activity would contribute to strengthening their future co-operations in striving for the mutual goal of improved patient-centred care – the 'person' behind the prescription. With the completion of the new QUB Interim facility this activity can be used as a template for other interprofessional simulated scenarios.

2. Developing Clinical Decision-Making and Examination Skills for Future Prescribers in Primary Care

Objective: to enhance student skills in decision-making and clinical examination skills in preparation for future roles in clinical care, particularly in the primary care setting.

Pedagogic underpinning: recent changes to the GPhC Standards for IET will move prescribing skills into the first 5 years of training. It is essential that students are prepared with the appropriate knowledge and skills for new roles.

Design: Students practise physical examination skills in small groups (5-6 students) on simulated patients and receive support and formative feedback from supervisors from a range of healthcare professions (pharmacy, nursing and medicine).

Results: The primary care teaching was evaluated in March 2020 via questionnaire. Sixty-six percent strongly agreed and 38% agreed with the statement 'Overall, I am satisfied with the quality of teaching around the role of a practice-based pharmacist (PBP)'. Sixty-two percent strongly agreed and 38% agreed with the statement 'I think that the series of lectures and workshops have given me a good insight into the role of the PBP'. Students were asked would they consider working as a PBP in the future. Ninety-three percent of total respondents said 'yes'.

Conclusion: The preliminary work on primary care placements has fed into the review process of the content of the primary care teaching, ensuring that teaching reflects real practice and that students have an immersive learning experience. Videos of PBP activities have been incorporated into the lectures.

3. Pioneering an Unconscious Bias Educational Activity with Pharmacy Students

Objective: This pilot study aimed to increase awareness of unconscious bias among undergraduate students at the School of Pharmacy. It also sought to establish whether changes in opinions had occurred by the end of the activity.

Pedagogic underpinning: bias can impact on teamwork and diversity, assessments, and actions towards others including patients. It has been suggested that teaching people about non-conscious thought processes may cause them to have doubts about their own objectivity and make them cognisant of biases. This is deemed to be a vital step in addressing the manifestation of bias.

Design: All first year MPharm and BSc Pharmacy students (n=121) were invited to complete an online and largely self-guided, educational activity on unconscious bias. This comprised several parts, namely: (i) a questionnaire to establish base-line knowledge; (ii) two validated Harvard Implicit Association Tests (IATs) about gender; (iii) a published training video relating to

unconscious bias; (iv) re-taking the two IATs and (v) a post-IAT and training questionnaire. Data analysis largely took the form of descriptive statistics; the Wilcoxon signed-rank test was used for before and after (the training) comparisons with significance set at $p < 0.05$ *a priori*.

Results: The initial questionnaire and post-training questionnaire were completed by 99 and 66 students, respectively. Unconscious bias training influenced students' IAT scores in relation to gender-career (3.24 post-training versus 2.83 pre-training, where 1 and 7 indicate biases towards male and female associations respectively; $p = 0.009$). After training, 98.5% stated they fully understood what is meant by the term 'unconscious bias' (compared with 62.6% pre-training). Additionally, 89.4% believed the activity had increased awareness about unconscious bias with positive comments including: "it encouraged me to make a conscience effort to eliminate bias", "my perspective has changed" and "it was thought-provoking and taught me about the harm that having certain biases and stereotypes can do."

Conclusion: This approach appears to be effective for reducing implicit bias and the activity will now be embedded into the undergraduate teaching within the School. However, additional work is warranted to measure the long-term impact of such an activity.

Since the pilot study outlined above was completed, funding has been secured to purchase a bespoke HE student unconscious bias training package rather than continue to use the more generic but publicly available video clips. This tailored training package was developed by two School of Pharmacy staff in tandem with an external company and launched in November 2020. It will be rolled out at several points across the MPharm (such as with Year 1 and Year 3 students). At the request of other schools and departments in the University, we have disseminated this new bespoke QUB training package more widely.

