



Master of Pharmacy
degree (MPharm)

The Robert Gordon University
Report of a pilot interim visit
March 2020

Event summary and conclusions

Provider	The Robert Gordon University
Course	Master of Pharmacy degree (MPharm)
Event type	Pilot interim accreditation visit
Step	N/A
Event date	4 th March 2020
Accreditation period	<p>The current accreditation period ending in 2020 is being extended to 2022 and this interim visit is taking the place of the 2020 full reaccreditation</p> <p>The next accreditation event, a full reaccreditation, will take place in or before March 2022</p>
Conditions	None
Recommendations	None
Registrar decision	The Registrar of the GPhC approved the continued accreditation of the programme for an extended period of two years. A full reaccreditation will be due in or before March 2022 (2021/22).
Key contact (provider)	Professor Don Cairns, Head of School, School of Pharmacy and Life Sciences, The Robert Gordon University
Accreditation team	<ul style="list-style-type: none"> • Professor Andy Husband (accreditation team leader, pharmacist), Professor of Clinical Pharmacy and Head of School, Newcastle University • Susan Bradford (accreditation team lay member), Adjudicator, Social Work England • Dr Geoff Hall, (academic accreditation team member), formerly Associate Head, Leicester School of Pharmacy, De Montfort University • Professor Barrie Kellam (academic accreditation team member), Professor of Medicinal Chemistry, University of Nottingham • Alastair Paterson (recently -registered accreditation team member, pharmacist), Clinical Pharmacist, Northumberland Tyne and Wear NHS Foundation Trust • Raminder Sihota (accreditation team member, pharmacist), Senior Professional Standards Manager, Boots UK Limited

GPhC representative and rapporteur	Damian Day, Head of Education, GPhC
Observer	Laura Fraser, Director for Scotland, GPhC
RGU staff attendees	<ul style="list-style-type: none"> • Dr Brian Addison, Lecturer in Pharmacy Practice (Master of Pharmacy Course Leader) • Dr Amy Arnold, Lecturer – MPharm Placement Officer • Mrs Alyson Brown, Academic Team Leader – MPharm Professional Experiences Lead • Professor Donald Cairns, Head of School of Pharmacy & Life Sciences • Mrs Laura Chalmers, RGU Strategic Lead Collaborative Practice and Interprofessional Learning Hub • Dr Duncan Cockburn, Director of Planning and Policy • Dr Stuart Cruickshank, Academic Team Leader & MPharm Stage 1 Year Leader • Professor Scott Cunningham, Academic Strategic Lead (Clinical Practice) • Professor Susan Duthie, Associate Head of School • Linda Fraser, Admissions Officer • Dr Marie Goua, Academic Strategic Lead (Biological Sciences) • Mrs Gwen Gray, Lecturer in Pharmacy Practice – MPharm Assessment Officer and Inclusion Officer • Dr Emma Hector, Lecturer – MPharm Stage 3 Year Leader • Dr Graeme Kay, Academic Strategic Lead (Chemical Sciences) • Mr Craig MacDonald, MPharm Recruitment Representative • Jennifer MacDougall, NHS Education for Scotland, Senior Educator (ACT) • Dr Babs MacKenzie, MPharm Admissions Tutor • Dr Iain Rowe, Lecturer – MPharm Stage 2 Year Leader • Donna Simpson, Admissions Manager • Professor Anne Watson, NHS Education for Scotland, Pharmacy Postgraduate Dean • Mrs Elaine Youngson, Lecturer - MPharm Stage 4 Year Leader
Student attendees	8 students from years 2 and 4

Introduction

Role of the GPhC

The General Pharmaceutical Council (GPhC) is the statutory regulator for pharmacists, 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 accreditation 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/uksi/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 MPharm degree at The Robert Gordon University (hereafter 'RGU') is accredited by the GPhC. The last GPhC accreditation was in March 2013, when the MPharm degree was accredited for a full period of six years. This was followed by an interim visit three years later in March 2016. No conditions or recommendations were applied at either visit.

This event was to have been a full reaccreditation, but Scottish Government is sponsoring a review of the initial education and training (IET) of pharmacists, launched in 2017, which has yet to report in full to the Cabinet Secretary for Health and Sport. Once the report has been delivered and, if it is accepted, the two Scottish schools of pharmacy, NHS Education Scotland and other stakeholders will work on a new model of delivery for pharmacist IET based on closer integration of the five years of IET. This will then be submitted to the GPhC for accreditation. With this in mind, and with the agreement of the two Scottish Schools and the Chief Pharmaceutical Officer for Scotland, the GPhC has substituted a full reaccreditation visit with an additional interim visit in 2020¹.

¹ The GPhC has taken this opportunity to pilot a new style interim visit, which it is doing at two other schools of pharmacy in the 2019-2020 academic year.

Turning to the MPharm degree itself, RGU's overview of its course is²:

'The overall philosophy of the MPharm course remains unchanged since the last interim visit in 2013. A student-centred approach is still central to the course, developing the student pharmacist to be a life-long learner and reflective practitioner with the patient being at the core of all experiences and an emphasis placed on interprofessional learning and on other professional experiences.

The teaching, learning and application of the underpinning sciences are integrated and delivered in the context of pharmacy practice in order to promote patient safety and quality healthcare by developing students to become confident and competent professional practitioners committed to lifelong learning and continuing professional development. To achieve this the course is structured around three broad themes of, 'The Patient', 'The Medicine' and 'The Pharmacist'. These three themes commence with clear definition in stage one of the course and become increasingly blurred as integration and contextualisation increases through the spiral development of topics, becoming more complex and closely intertwined until fully integrated in stage four.

The Patient theme develops the cell and molecular-based approach to physiology and pharmacology into clinical pharmacy and therapeutics, incorporating an understanding of health beliefs and behaviours. The Pharmacist theme integrates the underpinning science and clinical teaching with a focus on the principles of Miller's triangle (knows, knows how, shows how and does). The theme clearly demonstrates the importance of the profession for safe and effective patient care and prepares student pharmacists for practice as healthcare practitioners. The Medicine theme deals with the chemical and physical sciences fundamental to the design and/or discovery of medicinal substances, their properties, formulation, manufacture and quality assurance, culminating in the most recent advances in therapeutic delivery, providing the underpinning science of medicines required for effective pharmaceutical care.'

Documentation

In advance of the checking visit, RGU submitted:

1. RGU interim visit submission 2020
2. School of Pharmacy and Life Sciences organigram
3. 'Patient and Public Involvement in the MPharm Course'

² RGU MPharm degree interim visit submission 2020, p2

Pre-visit

The pre-visit took place by phone on the 11th February 2020 between:

- Dr Brian Addison
- Professor Donald Cairns
- Professor Andy Husband
- Damian Day

The event

The interim visit took place on the 4th March 2020 and comprised:

9.00-11.00 Progress meeting: attendees were the accreditation team plus RGU staff

11.30-12.30 Student meeting: attendees were the accreditation team plus eight students from Stage 2 and Stage 4 of the MPharm degree (three from Stage 2 and five from Stage 4)

13.30-14.15 Admission and progression meeting: attendees were the accreditation team plus RGU staff

14.30-15.15 Significant pedagogical developments: attendees were the accreditation team plus RGU staff

16.15 Feedback to course provider: attendees were the accreditation team plus RGU staff

Declarations of interest

Dr Geoff Hall was an external examiner in medicinal chemistry at RGU 2003-2008.

Damian Day has been a member of the Scottish Government's Five Year Integrated Initial Education Programme for Pharmacists (5YIIEPP) in Scotland, Programme Development, Governance and Quality Management groups. Both groups are now disbanded.

Key findings

Standard 1: Patient and public safety

Not a focus of the interim visit.

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

Not a focus of the interim visit.

Standard 3: Equality, diversity and fairness

Differential degree classifications by ethnicity: In relation to equality, the accreditation team noted that degree outcomes were differentiated markedly by ethnicity. Specifically, 'White – Scottish' students were awarded a spread of 'Pass', 'Merit' and 'Distinction' degree classifications whereas 'Asian or Asian British – Pakistani' students achieved only 'Pass' classifications (with a few exceptions). RGU told the accreditation team that this was not unique to pharmacy at RGU. The accreditation team was told that possible reasons for the disparity might be that:

1. some students were living at a distance from Aberdeen (particularly in Glasgow), spending perhaps 2/3 days on campus and relying more heavily on distance learning than local or campus-based students;
2. some students might be working part-time and/or might have family commitments as well as studying, which limited their time to study;
3. some students might be from outside the UK, choosing to socialise and study within their friendship group rather than mixing with other students, which may have reinforced some negative attitudes to study; and that
4. some students, who may be 'first in family' (the first person in their family to attend university), did not fully appreciate the difference between school learning and university learning.

The accreditation team noted the points and also noted that they were of concern to RGU. Nevertheless, the team agreed that identifying possible causes of differential attainment was very much a first step and that RGU would have to address them - the test for success would be no differential attainment by protected characteristic in time.

Standard 4: Selection of students *and* trainees

The accreditation team discussed two aspects of student selection: 1. the current MPharm degree application process and 2. the national 'Once for Scotland' process in development.

The current MPharm application process: The current paper-based process relies, to a large extent, on predicted – and then confirmed - academic ability (rather than other more mixed and interactive ones which include assessments of professionalism and problem solving as well).

Applications: RGU is experiencing a dip in applications which it believes is in line with a Scottish demographic downturn. 50% of RGU's MPharm students are from the local area and the projected demographics for Aberdeen city and Aberdeenshire suggest that there will be a general decline in applications for RGU for several more years. The accreditation team was told, however, that MPharm applications had increased in the last year. When asked whether the student profile was changing, the accreditation team was told that students were now presenting as different learners with different needs (part of which is discussed under Standard 3). The team noted that while identifying that was important, translating that in to changes to curriculum delivery was the necessary next step.

Clearing: RGU would prefer not to enter Clearing to recruit MPharm students but had done so in the last few years.

Widening access: RGU takes its responsibility to widen access seriously and from September 2020 applicants with an MD020 socio-economic profile will be made contextual offers, within the parameters of RGU's widening access policy.

A new application process for Scottish MPharm degrees: As was noted in the Background section above, RGU is participating in a Scottish review of initial education and training for pharmacists which includes the introduction of a single application system for MPharm students – based on the 'Once for Scotland' principle. A working group has produced proposals for the system which are currently being considered by the Chief Pharmaceutical Officer. The proposals include the introduction of evaluative activities such as multiple mini interviews (MMIs) and situational judgement tests (SJTs) as well as more standard evaluations of academic ability.

RGU has decided to wait for the proposals to be agreed before implementing them and expressed a concern that their introduction might place Scottish schools at a disadvantage if the admissions burden was greater than in the rest of Great Britain. The accreditation team pointed out that the majority of schools had implemented application processes similar to the 'Once for Scotland' proposal already.

Note: Since the accreditation visit, GB has been placed in lockdown due to the COVID-19 pandemic and this has affected the awarding of Scottish Highers/A levels and is likely to affect MPharm degree recruitment in 2020-2021.

Standard 5: Curriculum delivery and the student experience

Perhaps the most significant curriculum development is the expansion of experiential learning funded by Additional Cost of Teaching for Pharmacy funding (ACTp) monies, which the Head of School described as a 'game changer'. In this section the use of ACTp is discussed; under Standard 9 its resourcing aspects are considered. Professional placement experiences have been formalised as Professional Development modules in Year 3 and Year 4 and will be rolled out to Year 1 and 2 at a later date. The current experiential learning offering is:



What is currently c.24 days across four years will increase to 35 days with ACTp funding and students will be able to experience the following settings:

- Community pharmacy;
- Out of hours/NHS24 services;
- Specialist hospitals;
- Hospital prison services;
- Primary care; and
- Remote and rural settings.

It is RGU's view that it is not necessary for every student to experience every practice setting because skills are transferable. This approach also allows RGU to place students in settings from which they will gain maximum benefit.

Real and simulated patients are used in the course for experiential learning activities already.

Other changes to the course include:

Chemistry teaching: students have struggled with two semester-long chemistry modules run in parallel. Better sequencing and co-ordination of material between modules has improved the situation.

Low pass rates: RGU is concerned at the relatively low pass rate for first time sitters in Year 2 and Year 3. Having reviewed the Year 3 assessment diet – which was generally regarded as somewhat unrelenting – it has been rationalised. The changes have been implemented in 2019-2020: RGU will know whether it has been successful in June 2020.

Numeracy teaching: Responding to course feedback, external examiner feedback and reflecting on candidate performance in the GPhC's Registration Assessment, RGU has redesigned numeracy teaching. As a result, in Year 1 students are introduced to numbers and numeracy without a calculator. As students progress through the course the breadth of application is increased, calculators are allowed and numeracy is aligned with the full requirements of the GPhC's Registration Assessment.

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

Not a focus of the interim visit.

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

Not a focus of the interim visit.

Standard 8: Management of initial education and training

Institutional structural and staff restructuring: Starting in 2016, and for the last few years, RGU been restructuring, principally by removing faculties and requiring the 11 heads of school to report directly to the University Executive. In tandem, RGU launched an Academic Role Review, a Career Progression Framework and two voluntary severance schemes, the last of which ended in 2019-2020.

The purpose of the Academic Role Review is to create a more delegated structure in schools and to empower subject/discipline experts – 'Academic Strategic Leads' (ASLs) – who support heads

of school. ASLs are, essentially, heads of subject/discipline who run a disciplinary 'school within a school'. They are the strategic leads for their area with responsibility for horizon scanning across a school's academic portfolio, both undergraduate and postgraduate, and research. Each ASL also has a school-wide role not linked primarily to their subject/discipline.

Each course, such as the MPharm, has a course management team and a course leader.

Activity in the School of Pharmacy and Life Sciences is co-ordinated by the School Executive, comprising the Head of School, Associate Head of School, the School Manager and the three ASLs.

It was not clear to the accreditation team whether the institution-wide new structure would be reviewed formally. (The accreditation team's main concern was a review of pharmacy provision, of course.)

Standard 9: Resources and capacity

As a result of restructuring activity and the two voluntary severance schemes mentioned in the previous section, the staffing complement in pharmacy has reduced and has been refocused. 11 staff were lost in the school at the end of 2019, including seven academics, one of whom was a pharmacist. Overall, the salary bill in pharmacy had been reduced by £500,000.

RGU did acknowledge that in the short term, particularly the second semester of 2019-2020, there would be an additional burden on staff. For example, the Head of School has had to become the personal tutor for students previously allocated to a member of staff who has left.

Set against that, ACTp funding had supported the development of experiential learning and the appointment of staff in that area. Nationally, the funding pot is £2,400,000, administered by NHS Education Scotland (NES). The two Scottish schools have decided to use the funds allocated to them differently and RGU has opted for appointing four regional experiential learning tutors working in NHS health boards two days per week, along with a placement administrator and a technical services officer to work in the Pharmacy Simulation Centre. ACTp funding is for three years but two tutors have been appointed permanently. Additionally, ACTp is being used to fund training fees for experiential learning tutors and the cost of student travel.

Linked to the review of initial education and training in Scotland, Deloitte, a consultancy, costed the education of 500 RGU students at £7,800,000. The cost of pre-registration is known already and will be factored in to the review.

The accreditation team asked what the likely outcome of the review would be and was told that it remained unclear. RGU's view was that it could be a five-year integrated degree or a 4+1 model in which links between the two parts were linked closely (and more closely than they are at present).

Significant pedagogical developments

The significant pedagogic developments presented to the panel were:

1. *Experiential Learning Placements: Integration into the MPharm Curriculum* (Dr Amy Arnold, RGU Lecturer and MPharm Placement Officer & Jennifer MacDougall, NES Senior Educator-ACT)
2. *The Pharmacy Longitudinal Clerkship (PLC): developing students' clinical skills & competence through interprofessional experiential learning within a general practice setting in NHS Highland* (Catriona Innes, Academic Practitioner NHS Highland)
3. *Interprofessional learning in "the round" – professional conversations to promote learning – an organic disruptive simulation technique: The Point of Kairos* (Laura Chalmers, RGU Strategic Lead Collaborative Practice and Interprofessional Learning Hub)

At the end of the pilot year, all significant pedagogical developments will be published so that other course providers can learn from them.

Outcome of the interim visit

The accreditation team's decision

As a result of the visit, the accreditation team agreed that the 2013 MPharm degree reaccreditation outcome should be reconfirmed, without any additional conditions or recommendations.

The team noted that RGU had been through two rounds of voluntary redundancy, which had lowered the staffing bill. While noting that, the school was highly appreciative of the financial uplift provided by Additional Cost of Teaching for Pharmacy funding from NHS Education Scotland, which has allowed the appointment of four regional tutors to support experiential learning. While the school seemed content with the current staff mix and size, the team did want to express a concern that continuous rounds of voluntary redundancy and similar measures could build capacity out of the system incrementally and that staffing levels should be revisited at a future reaccreditation visit to ensure they were not compromised. This is in the context of staffing generally but particularly staff involvement in admissions and student support.

The accreditation team noted that differential attainment by students by protected characteristic had been identified and that the school was seeking to understand it more fully. The accreditation team agreed it should flag up this issue for consideration at a future reaccreditation event, specifically to explore whether the attainment gap had been addressed, rather than simply being acknowledged.

The accreditation team noted that the interim visit was a substitute for a full MPharm degree reaccreditation and while the accreditation team understood why the substitution was necessary (due to delays in implementing Scottish Government plans for education and training reforms), in order for the GPhC to exercise its statutory powers fully a reaccreditation visit would be necessary in the not too distant future. This being the case, the accreditation team agreed to recommend to the Registrar that the situation should be kept under review and if in a year's time Scottish Government's plans for revising the initial education and training of pharmacists in Scotland were still not finalised, the GPhC should require a full reaccreditation in March 2022 regardless of that. Should plans accelerate the GPhC reserves the right to visit earlier than that.

Postscript

Shortly after the accreditation visit, Great Britain was placed on lock-down as part of government efforts to address the COVID-19 pandemic. The GPhC understands that some of the positions adopted by RGU documented in this report may need to be revised. This will be true of all universities offering MPharm degrees.

The GPhC has issued guidance for schools on admissions and experiential learning in 2020-2021. In addition, Universities UK (the representative body for the 137 universities in the UK) has issued *Principles and considerations: emerging from lockdown* (June 2020, <https://www.universitiesuk.ac.uk/policy-and-analysis/reports/Pages/principles-considerations-emerging-lockdown-uk-universities-june-2020.aspx>). Scottish Government advice on the pandemic can be found at <https://www.gov.scot/coronavirus-covid-19/>.

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 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 timetable 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.