

**University of South Wales independent  
prescribing course reaccreditation event  
report - April 2020**



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## Event summary and conclusions

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| <b>Provider</b>                                   | University of South Wales  |
| <b>Course</b>                                     | Independent prescribing course   |
| <b>Event type</b>                                 | Reaccreditation  |
| <b>Event date</b>                                 | 06 April 2020  |
| <b>Reaccreditation period</b>                     | September 2020 - September 2023  |
| <b>Relevant standards</b>                         | GPhC education and training standards for pharmacist independent prescribers, January 2019.  |
| <b>Outcome</b>                                    | Approval<br>The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that pharmacist independent prescribing course provided by the University of South Wales should be reaccredited for a further period of three years.  |
| <b>Conditions</b>                                 | There were no conditions   |
| <b>Standing conditions</b>                        | Please refer to Appendix 1   |
| <b>Recommendations</b>                            | No recommendations were made   |
| <b>Minor amendments</b>                           | 1) The team noted that the hours listed for each activity are different in document 2 (Teaching and learning strategy), document 10 (Programme Handbook) and document 26 (Module Specification). The provider confirmed that they would investigate this and inform the GPhC of the definitive activity hours. (5.1) |
| <b>Maximum number of all students per cohort:</b> | 50   |
| <b>Number of pharmacist students per cohort:</b>  | 50 (maximum but the course is multi-professional)  |
| <b>Number of cohorts per academic year:</b>       | 2  |
| <b>Registrar decision</b>                         | Following the event, the Registrar of the GPhC accepted the accreditation team's recommendation and approved the reaccreditation of the programme for a further period of three years.   |
| <b>Key contact (provider)</b>                     | Ben Pitcher - Senior Lecturer  |

|                             |   |
|-----------------------------|---|
| <b>Reaccreditation team</b> | Sandra Hall, Retired Head of Pharmacy Practice, Leicester School of Pharmacy, De Montfort University<br>Professor Anne Watson, Postgraduate Pharmacy Dean, NHS Education for Scotland<br>Leonie Milliner, Lay Member, Senior Education Adviser, General Optical Council |
| <b>GPhC representative</b>  | Amy Beales, Quality Assurance Officer, GPhC   |
| <b>Rapporteur</b>           | Chris McKendrick, Quality Assurance Officer, GPhC   |

## 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 reaccreditation process is based on the GPhC's standards for the education and training of pharmacist independent prescribers January 2019.

The GPhC's right to check the standards of pharmacy qualifications leading to annotation as a pharmacist independent prescriber 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/ukxi/2010/231/contents/made>

### Background

The University of South Wales, previously the University of Glamorgan, was originally accredited by the Royal Pharmaceutical Society of Great Britain in 2008 to provide a course to train pharmacist independent prescribers, for a period of three years. It was then reaccredited in 2010, 2014 and 2017 for further three-year periods, with two conditions, one condition and no conditions respectively. In line with the standards for the education and training of pharmacist independent prescribers January 2019, an event was scheduled for 06 April 2020 to review the course's suitability for reaccreditation.

This course is commissioned by HEIW on behalf of the Welsh government, who secure several places each year, including a number of places specifically for pharmacists from both primary and secondary care.

The multi-professional nature of the team and courses delivered by the University of South Wales, encouraged the course to extend the provision of the prescribing course to a broader range of professionals.

Previously, the course had been delivering a 26-study day course which runs from September through until May. In order to ensure that the class sizes and teacher student ratios remain manageable, the course is split into two cohorts which run in parallel (one on Thursdays and one on Fridays).

Since the previous reaccreditation event, the course has run as accredited, with normal refinements and improvements as would be expected with a course of this nature. This has included the normal updating of delivered materials, refining of paperwork and admissions processes. The most significant change to the course in the last three years has been the inclusion of Advanced Practice Paramedics into the range of professionals accepted onto the course.

A notable proposed change for the next delivery of this course includes splitting the 26 study days into 15 face to face study days with an additional 11 days as distance content. This change is being implemented as an acknowledgment of the student's status as an experienced professional, who might benefit from a mixed method delivery strategy and allow a more efficient use of their time, minimising disruption to the provision of care in their work environment.

The course is also refining its assessment scheme, shifting away from essays and instead requiring students to develop a series of summatively assessed critical reflections evidencing competence across the 10 domains of the Royal Pharmaceutical society's competency framework for all prescribers and the GPhC learning outcomes.

The end of course assessments, which have until now been a separate calculation and Pharmacology MCQ, are being combined. The new assessment, which follows the ethos of the Prescribing Safety Assessment, builds on the model of scenario based contextualised assessment. Each scenario will present the students with a patient for whom they must select appropriate treatments, calculate correct dosages, and write a prescription. Each scenario will also include additional short answer questions relevant to the drugs being prescribed in the scenario, testing the students understanding of pharmacology, prescribing regulations and medicines management.

## Documentation

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

## The event

The event was held via teleconference on 06 April 2020 and comprised of a number of meetings between the GPhC reaccreditation team and representatives of the University of South Wales prescribing course. Student feedback was obtained via a survey style feedback form sent to them prior to the event which was reviewed by the reaccreditation team.

## Declarations of interest

There were no declarations of interest.

## Schedule

### The event

| Meeting number | Meeting  | Time          |
|----------------|--|---------------|
| 1.             | Private meeting of accreditation team and GPhC representatives | 09:30 – 11:00 |
| 2.             | Meeting with provider and learning outcomes testing session    | 11:00 – 13:00 |
| 3.             | Working lunch  | 13:00 – 14:00 |
| 4.             | Private meeting of the accreditation team                      | 14:00 – 15:00 |
| 5.             | Feedback to provider   | 15:00 – 15:10 |

# Key findings

## Part 1 - Learning outcomes

During the event the team reviewed all 32 learning outcomes relating to the independent prescribing course. To gain additional assurance the team also tested a sample of **five** learning outcomes during a separate meeting with the provider and was satisfied that **all 32 learning outcomes would be met** during the course to the level required by the GPhC standards.

### Domain - Person centred care (outcomes 1-6)

Learning outcomes met? Yes  No

### Domain - Professionalism (outcomes 7-15)

Learning outcomes met? Yes  No

### Domain - Professional knowledge and skills (outcomes 16-26)

Learning outcomes met? Yes  No

### Domain - Collaboration (outcomes 27-32)

Learning outcomes met? Yes  No

## Part 2 - Standards for pharmacist independent prescribing course providers

### Standards 1 - Selection and entry requirements

**The team was satisfied that all six criteria relating to the selection and entry requirements are met.**

The selection process and criteria of entry to the course is clearly stated on the course website. Additionally, this information is sent out to potential applicants and is included in the student handbook. The entry requirements are based upon the entry requirements set by the GPhC and applicants must meet these requirements to be offered a place.

Confirmation that pharmacists are fit to train is established through information submitted through the online application form. The supporting evidence must confirm the applicant's competence and good character from the applicant's line manager via declaration. This is further checked through questions asked within the standardised Interview. All aspects of the application, including experience, are checked at the interview stage. In terms of self-employed applicants' and application scrutiny, there is a 'third-party' reference system which requires a registered health care professional to support the applicants experience claims which are also checked at interview. This information is reviewed, and the meeting of each criteria is logged. If any criterion is apparently not met, further information may be requested ahead of the interview. Any unclear or borderline cases are discussed within the team.

It was confirmed that the GPhC registration is checked as part of the application review. This is done by the applicants GPhC registration number and is checked on the GPhC website to ensure there are no fitness to practise issues or sanctions. All applications are reviewed by the 'core' course team to ensure consistency. A large proportion of students on the course come from funding commissioned from the Welsh government.

The course provider confirmed that in addition to the designated prescribing practitioner (DPP) having appropriate patient-facing clinical and diagnostic skills, the course requirements also state that they must have at least 3 years of active prescribing experience.

### Standard 2 - Equality, diversity and inclusion

**The team was satisfied that all five criteria relating to the equality, diversity and inclusion are met.**

At university level, equality, diversity and inclusion data is collected and used to inform considerations for academic and teaching staff, as well as to inform specific guidance on admissions, attainment and making adjustments for students. It was noted that at course level it is difficult to monitor all protected characteristics due to sample size limitations (number of students in each cohort). Due to the small student numbers, identifying specific characteristics could lead to the student becoming identifiable. The provider explained that in respect of course design and delivery any additional and/or protected characteristics are taken into consideration. At a university level, any new course that is developed must have a detailed impact assessment

which includes information on protected characteristics. As part of the course development there was service user and wider stakeholder engagement.

The university prioritises the fair treatment of students and maintains the principles of equality and diversity in all of its activities. It was confirmed that the course is delivered in accordance with the university's Equality Policy. Consideration of individual students' needs and adjustments are made in accordance with the university's Disability Support Policy. Students can have individual support plans agreed by the disability service and with the relevant course leader and practice partner if reasonable adjustments are required in practice. However, all learning outcomes must be met by all students.

Legal responsibilities under equality and human rights legislation, is covered specifically within the teaching sessions on "law and prescribing". These principles are considered throughout the course and are considered within the assessment process.

### Standard 3 - Management, resources and capacity

**The team was satisfied that all six criteria relating to the management, resources and capacity are met.**

The provider explained that in relation to placement learning environments there is an audit tool used which includes a placement self-declaration, and the use of reports from Health Inspectorate Wales and/or other relevant agencies. This is fed into a central university managed placement database. If risks are identified these are then escalated to a risk assessment panel who review any risks identified and has the right to impose sanctions, limitations, or request termination of a placement.

The team noted that if a student exhibits any behaviour which could be considered either unsafe, putting patients or public at risk, they may fail the course and the issue may be referred to their professional regulator. Additionally, if the DPP has any serious concerns about the competence, safety or character of a student, these concerns would be directed to the course leader so that appropriate steps could be taken.

The roles and responsibilities of all parties within the delivery of course and in the 'Programme Handbook' are provided to all parties as part of their preparation for involvement in the course. Agreement to these arrangements and responsibilities are formally agreed to by signed documents submitted by the applicants prospective DPP and line manager.

Students are provided with information relating to the roles and responsibilities of all parties involved in the course. This includes supervision and assessment policies and information regarding how to raise concerns about any aspect of the course. In clinical learning environments, DPP's will have signed an agreement to confirm their roles and responsibilities.

The course will run two cohorts per year, running in parallel on different days. The maximum number of students on each cohort will be 50 students. Historically there have been low numbers of pharmacists on the course. The provider confirmed the viability of the course for pharmacists. The course is multi-professional by its nature and pharmacists, in the view of the provider, continue to be a part of this. A majority of students on the course come from the

commissioned route and therefore numbers of pharmacists on the course varies based on available funding from the Welsh government.

Students are provided with a wide range of support whilst studying on the course. This includes induction to the university and course, tour of facilities, instruction in the use of the universities online learning environment and how to access learning resources. Students are assigned a personal tutor who can provide academic and pastoral support for students throughout the course.

The students interviewed commented that they felt well supported by well qualified staff, that facilities were excellent, and the timetabling was comprehensive and accessible. The course itself was well organised and managed by the course team. One student felt the course would benefit from more clinical scenario rooms, which were not offered often and when they were, sessions were brief.

The students also commented that the multi-disciplinary nature of the course was beneficial, however the pharmacists on the course may have benefited for more time dedicated to clinical skills.

#### Standard 4 - Monitoring, review and evaluation

**The team was satisfied that all six criteria relating to the monitoring, review and evaluation are met.**

In March 2020 the course went through internal validation and was also reviewed by the NMC for approval. It was explained that the course is under a continuous quality improvement model whereby the course leader can make smaller changes immediately. Wider changes would be reviewed by the faculty quality assurance committee.

The course is delivered in accordance with the university's standard quality assurance process. This involves annual module reports, examination and progression boards where the outcomes of assessments and the completion status of students are scrutinised.

Student feedback is sought throughout the program using the university's 'LOOP' continuous feedback system. Specific feedback relating to the module is also sought at the end of the course. In terms of quality assurance, there is the standard internal moderation and external examiner system to check the standardisation of all students work.

All members of the teaching team are reviewed annually by their line manager and all of the team partake in the Reflection and Observation of Practice Scheme (ROPS) to facilitate development of teaching practice.

Assessments are developed by the members of the course team and circulated to the wider team for comment. The assessments are refined before being submitted to the external examiner for review.

DPPs are vetted ahead of time upon the acceptance of the student onto the course. At this point DPPs are given induction packs and must sign to say they have read and understood their role as DPPs. DPPs that have previously had students must also still confirm they understand their role.

DPPs are provided with contact information for the course team and are invited to contact the university should they ever have questions or comments.

The core teaching team regularly meet and discuss the subject and consider any changes in practice and how this might affect the delivery of the course. The university's annual review system means that each year the course team consider the content and delivery of the course and look at opportunities to refine and improve content and delivery. Members of the teaching team are all registered healthcare professionals, some of whom continue to work in clinical areas and are therefore acutely aware of the changing needs of practice.

## Standard 5 - Course design and delivery

**The team was satisfied that all ten criteria relating to the course design and delivery are met.**

At the beginning of the course there is a self-assessment action plan against the RPS Competency Framework for all Prescribers, completed by the student which identifies specific areas of needs. These are then looked at individually by the course team to identify specific themes and area of need. The provider then allocates these students into groups of similar proposed areas of practice and needs so that tailored support can be provided by the course team to develop the student's role in practice.

In terms of assessment, each individual student is assessed holistically based on their proposed practice area as well as generic prescribing skills. There is focused development such as with the physical clinical skills related to area of practice. Further, academic tutors have an active role as well as DPPs in developing the students pre-existing knowledge and practice skills.

The provider confirmed that service users had reviewed course material and was involved in the design of simulated materials. From a delivery point of view, local stakeholders have been heavily involved with the course design. The provider explained that historically the course had service users come in to meet students. Now the involvement of service users is by the use of real patients in the clinical assessments. There are plans to build a bank of patient experience to use in the future design and development of the course. This will be done via a university wide service user engagement forum on an ongoing basis.

Students are reminded from the outset of the course that they may only undertake tasks in which they are competent. And that whilst they may develop new skills as part of the course, they may only be undertaken under supervision until they have been signed off as competent. As failure to adhere to this could potentially compromise patient safety, any evidence of unsafe practice may result in them failing the course. Fitness to practise and scope of practice or experience is clearly defined at the beginning of the course through materials, the induction session and student handbook. The university has a cause for concern committee (panel) and a Fitness to Practise Committee which will investigate and deliberate any concerns that meet the defined threshold criteria. The student is informed at the start of the course that should any concerns be upheld it may result in the overall failure of the course and could be referred to the regulator. This process has been designed for any concerns while the student is on the course, during assessments, and in supervised practice.

## Standard 6 - Learning in practice

**The team was satisfied that all five criteria relating to the learning in practice are met.**

The course lead and the wider course team are the main points of contact for DPPs should they have any concerns or questions. Further, the suitability and registration status of DPPs are checked during the student application stage. There are no set dates for communicating directly with the DPP, but it would be expected that contact would be made at the beginning of the course to confirm the role, mid-way to check on the progress of the student in supervised practice, and at the end during competency declaration stage by the DPP.

The DPP is responsible for the final sign off of student competence. At the end of the course, the student must have successfully completed their 100 hours of supervised practice and in practice assessments (ACEs), the DPP will sign off a statement confirming that they are competent as a pharmacist prescriber.

The provider confirmed that DPPs, by virtue of the course stipulated requirements, are experienced competent professionals with active prescribing experience within a defined scope of practice. Further, standardisation of DPP decisions occurs as part of the ACE assessment process and portfolios are checked by the course team.

## Standard 7 - Assessment

**The team was satisfied all eleven criteria relating to the assessment are met.**

Students are monitored throughout the course in order to confirm their engagement, development and eventual competence of required skills. All face-to-face sessions are compulsory, and attendance is recorded, with any absences needing to be accounted for and work caught up. All distance learning material must be engaged with and activities completed/work submitted. Within the clinical areas, the students' progress will be monitored by the DPP. All time spent with the DPP (or appropriate professional) is logged and signed for by the DPP. The self-assessment and action plan provide an initial appraisal of the students capabilities and the progress towards completion is assessed and feedback at specific intervals through the course.

It was noted that in the last 3 years since the re-accreditation of the course in 2017 the course has run as accredited, with normal refinements made when required. It is proposed for the next delivery of this course to include; splitting the 26 study days into 15 face to face study days and the equivalent of 11 days distance content; refining the assessment scheme, shifting away from essays and instead requiring students to develop a series of summatively assessed critical reflections evidencing competence across the 10 domains of the Royal Pharmaceutical Society's competency framework for all prescribers and the GPhC learning outcomes; assessments which have until now been a separate calculation and Pharmacology MCQ to be combined with a new assessment which follows the ethos of the Prescribing Safety Assessment. Based on the paperwork and provider justification, the team accepted the rationale for these changes. It was noted that these changes had already been accepted by the university validation process, NMC and HCPC.

The team enquired as to how student engagement with the distance learning materials was monitored. The provider confirmed that the VLE (Blackboard) has an analytics section which logs and shows how the student is interacting with the module.

All assessments on the independent prescribing module are undertaken by appropriately experienced health care professionals. Coursework is assessed by the teaching team who are all health care professionals with appropriate knowledge and experience to assess the students work. All members of the teaching team possess or are working towards a PGCEd and membership of the HEA. In practice assessments are undertaken by the DPP, who are selected specifically as they are experienced prescribers within the appropriate area of practice.

Within the university environment students will receive feedback on their performance and development throughout the course. In preparation for the written examination the students will be provided with practice papers and mock examinations to prepare them for the assessment and gauge their progress.

The students will develop their ten critical reflections as part of the course work element of the course. This will be supervised and marked in staggered sections throughout the course to allow students to be supported and to improve their work based on feedback.

In the clinical environment the students will develop a self-assessment and action plan in conjunction with the DPP. This will be reviewed informally throughout their supervised practice and formally at the midpoint of the course.

All assessments are confirmed through a two stage process involving a “subject board” where the results for the module are discussed and ratified and an “Award board” where the status, the student, and their eventual outcome is ratified. These processes happen in conjunction with the external examiner who is invited to attend the board. These processes must all be completed before the pass list is sent to the GPhC.

When a pharmacist successfully passes all aspects of the course, they will be awarded a Practice Certificate in Independent Prescribing, which they require for annotation to the GPhC register.

## Standard 8 - Support and the learning experience

**The team was satisfied that all four criteria relating the support and the learning experience are met.**

Students receive correspondence from the course team in preparation for the course, providing them with details for required texts. The first day of the course includes orientation to the campus, the course and relevant policies and regulations. Students will be assigned an academic tutor to provide supervision for all of their academic work. The work load for this module has been calculated as 400 hours of student effort in accordance with the university’s Assessment Tariff.

Within the first few weeks of the course students are assigned an academic supervisor who can provide academic and personal support. The university has a number of student support services to promote student physical and mental health wellbeing. These services include the health service, mental health well-being, disability services, counselling services, money advice, study skills, extenuating circumstances and equality and diversity. All of these services are

detailed in the Student Handbooks by use of e-links. They are also discussed as part of induction and students are directed to them throughout their course as required. All students can access the support facilities available within the University and Practice Learning Environments. Students have electronic access to the LRC databases, Blackboard learning environment both on and off campus. Students have access to the university's wide range of learning resources, including access to the extensive range of online resources (online texts and journal databases).

The team asked for more detail around how and when students receive feedback on their performance, including lines of responsibility and any themes that have developed. The provider explained that feedback from the clinical skills sessions are provided after every session, with practice assessments held early on. Regular testing of practice questions as part of the course material enables students to practice areas they may not feel as confident with. Academic advisors always give feedback on course assignments, both written and verbal. Critical reflection has a large part to play in this as it is expected that the student will justify how they believe they have met the outcome which is then moderated by an academic course staff member.

## Standard 9 - Designated prescribing practitioners

**The team was satisfied that all five criteria relating to the designated prescribing practitioners are met.**

All applicants must submit information about their prospective DPPs professional registration, clinical experience and teaching experience as part of the application process. This information is reviewed and verified by the course team. If the prospective DPP does not meet the core competencies (as outlined by the RPS Competency Framework for Designated prescribing practitioners), the applicant will not be offered a place.

The team noted that the student must identify their own DPP and that this is checked during the application stage. If the student cannot find a DPP the course may suggest ways to help the student in identifying a suitable DPP. During the course if an issue develops between the DPP and student, the course would attempt to support both parties by calling a tripartite meeting. Should the relationship between the DPP and student break down the student has the option to switch to another DPP. The course would attempt to verify the number of hours completed by the portfolio and sign offs so that the student would not be disadvantaged, however this is not guaranteed. Any new DPP would be required to undertake the same vetting and induction process.

All DPPs are provided with an educational package to ensure they are fully capable and have full understanding of their responsibilities as a DPP. They are required to sign that they have read the training documents, GPhC guidance and RPS DPP competency framework and agree to supervise the student accordingly.

The students interviewed confirmed that their DPPs received prompt responses from the course team with any questions they had, and that the resource pack provided was comprehensive and informative.

The team enquired as to the availability of any additional material or training for DPPs. The provider explained that should a DPP wish to clarify anything beyond the induction material and training package, the course lead and team are always happy to answer DPP questions via

telephone, email, online support, and would go out and have a face to face meeting if required. Additionally, there is a university wide development and preparation course for all that deliver or supervise practice, which should a DPP wish to undertake, they can.

Feedback on the DPPs performance will be sought via End of Course evaluation review of their contributions to the student portfolio, verification of ACEs and an Evaluation of DPP completed by the student. Any salient feedback will be communicated back to the DPP at the end of the module. If the feedback suggests that the DPP needs more support in the effective execution of their responsibilities, additional training can be provided.

## 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 course;
  - 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 course.
4. The provider must make students and potential students aware that successful completion of an accredited course is not a guarantee of annotation or of future employment as a pharmacist independent prescriber.
5. 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.
6. 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.

