General Pharmaceutical Council

University of Sunderland, Overseas Pharmacists' Assessment (OSPAP) interim event report, June 2021

Contents

Event summary and conclusions

Provider	University of Sunderland
Course	Overseas Pharmacists' Assessment Programme (OSPAP)
Event type	Interim
Event date	17-18 June 2021
Current accreditation period	2017-18 – 2023-24
Relevant standards	Standards for the education and training of non-EEA pharmacists wanting to register in GB, May 2011
Outcome	Continued accreditation confirmed. Reaccreditation in 2023-24 will be accredited against new Standards for the education and training of non-EEA pharmacists (date and title TBA). The team noted the appropriate adaptations that had been made to manage course delivery during the pandemic, and that both staff and students appeared to be well supported during this time.
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 2023-24.
Key contact (provider)	Deanne Marshall, Senior Lecturer, OSPAP Programme Leader
Accreditation team	Leonie Milliner (Team Leader), Director of Education, General Optical Council Professor Barrie Kellam (Team member-academic) Professor of Medicinal Chemistry, University of Nottingham Dr Gemma Quinn (Team member-academic), Associate Professor of Clinical Pharmacy, University of Bradford Dr Hayley Wickens (Team member-pharmacist) Lead Pharmacy Training Programme Director (South), Health Education England

	Bethan Sheppard (Team member-pharmacist recently registered) Specialist Rotational Pharmacist, University Hospital of North Midlands Catherine Boyd (Team member-lay), Chair of Fitness to Practise Panels HCPTS
GPhC representative and rapporteur	Philippa McSimpson, Quality Assurance Manager, GPhC Professor Brian Furman (rapporteur) Emeritus Professor of Pharmacology, University of Strathclyde

Introduction

Role of the GPhC

The General Pharmaceutical Council (GPhC) is the statutory regulator for pharmacists and pharmacy technicians and is the accrediting body for pharmacy education in Great Britain. The GPhC is responsible for setting standards and approving education and training courses which form part of the pathway towards registration for pharmacists. The UK qualification required as part of the pathway to registration for pharmacists who have qualified overseas (non-EEA) is a GPhC-accredited Overseas Pharmacists' Assessment Programme (OSPAP), which is a one-year post graduate diploma.

The GPhC's right to check the standards of pharmacy qualifications leading to annotation and registration as a pharmacist is the Pharmacy Order 2010. It requires the GPhC to 'approve' courses by appointing 'visitors' (accreditors) to report to the GPhC's Council on the 'nature, content and quality' of education as well as 'any other matters' the Council may require. This accreditation event was carried out in accordance with the GPhC's 2011 OSPAP Accreditation Methodology and the course was reviewed against the GPhC's 2011 education standards 'Standards for the education and training of non-EEA Pharmacists wanting to register in Great Britain.'

The powers and obligations of the GPhC in relation to the accreditation of pharmacy education are legislated in the Pharmacy Order 2010. For more information, visit: http://www.legislation.gov.uk/uksi/2010/231/contents/made

Background

The Overseas Pharmacist Assessment Programme (OSPAP) at the University of Sunderland (UoS) is delivered by the School of Pharmacy and Pharmaceutical Sciences, one of four schools within the Faculty of Health Sciences and Wellbeing along with the School of Nursing and Health Sciences, the School of Psychology and School of Medicine. The programme was reaccredited against the GPhC *'Standards for the education and training of non-EEA pharmacists wanting to register in Great Britain (2011)'* in July 2018; this was for a period of three years with no conditions or recommendations. Due to plans to review these standards the reaccreditation event due this academic year was replaced by an interim event. The purpose of the interim event was to provide assurance that the course continued to meet the 2011 standards, before

reaccreditation to new standards in 2023-24. The interim event was scheduled for 17-18 June 2021 and was conducted by videoconference; the following is a report of that event.

Documentation

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

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

Pre-event

In advance of the main event, a pre-event meeting took place via videoconference on 24 May 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 the University of Sunderland and the GPhC on 17-18 June 2021 and comprised of meetings between the GPhC team and representatives of the OSPAP programme.

Declarations of interest

Hayley Wicken's declared that a lecturer within the University of Sunderland School of pharmacy also holds a part time role at the HEE where she works, but for a different region. Gemma Quinn declared that the University of Bradford is part of a consortium that has recently won a contract with HEE and that a lecturer from the University of Sunderland is involved in this in their HEE role. The team agreed that neither of these constituted any conflict of interest.

Schedule

Day 0 – 16 June 2021

Meeting number	Meeting	Time
1.	Private meeting of team and GPhC representative (MPharm)	13:15 – 15:00
	Break	
2.	Private meeting of team and GPhC representative (OSPAP)	15:15 – 17:00
Day 1 – 17 June 2021		
3.	Private meeting of team and GPhC representative	09:00 – 09:30
4.	Progress meeting (presentation)	09:30 – 10:30
5.	Private meeting of team and GPhC representative	10:30 – 11:00
6.	Progress meeting (continued)	11:00 – 13:00

	Lunch	
7.	Meeting with students (MPharm)	14:00 – 15:00
8.	Meeting with students (OSPAP)	15:00 – 15:45
9.	Private meeting of team and GPhC representative	15:45 – 16:30
Day 2 – 18 June 2021		
10.	Private meeting of team and GPhC representative	09:00 – 09:30
11.	Admission, progression, monitoring and support meeting	09:30 – 11:30
	Break	
12.	Significant pedagogical developments presentations	11:45 – 13:00
	Lunch	
13.	Private meeting of team and GPhC representative	14:00 – 15:30
14.	Deliver outcome to programme provider	15:30 – 15:45

Attendees

Course provider

The team met with the following representatives of the University:

Name	Designation at the time of accreditation event	Meetings attended
Alabaster, Prof Tony	Academic Dean, Faculty of Health Sciences and Wellbeing	4, 6, 12
Boachie-Ansah, Dr Gabriel	Senior Lecturer in Pharmacology	4, 6, 11, 14
Bullen, Kathryn	Senior Lecturer Pharmacy Practice	4, 6, 11, 12, 14
Carter, Dr Paul	Senior Lecturer Pharmaceutics	4, 11, 14
Childs, Dr Stephen	Senior Lecturer Pharmaceutical Chemistry	11, 14
Darby, Dr Steve	Team Leader Pharmaceutical Sciences	4, 6, 11, 12, 14
Davison, Kathryn	Team Leader Pharmacy Practice and Clinical Therapeutics	4, 6, 11, 12, 14
Donavan, Gemma	Senior Lecturer Pharmacy Practice	4, 6, 12, 14
Earl Sinha, Charlotte	Senior Lecturer Pharmacy Practice	4, 11, 12, 14
Elkordy, Prof Amal	Professor Pharmaceutics	11, 14
Goring, Rob	Senior Lecturer Clinical Skills	4, 6, 11, 12, 14
Gray, Dr Mark	Senior Lecturer Chemistry	11, 14
Hardisty, Dr Jess	Principal Lecturer	4, 6, 11, 12, 14
Marshall, Deanne	OSPAP Programme Leader	4, 6, 11, 12, 14
Moore, Dr Adrian	Head of School of Pharmacy and Pharmaceutical Sciences	4, 6, 11, 12, 14
Myers, Dr Stephanie	Senior Lecturer Medicinal Chemistry	11, 14
Robertshaw, Carlie	Senior Lecturer Pharmacy Practice	4, 6, 11, 12, 14
Sherwood, John	Senior Lecturer Pharmacy Practice	4, 6, 11, 12, 14
Statham, Louise	Senior Lecturer Pharmacy Practice	4, 6, 11, 14
Sturrock, Dr Andrew	MPharm Programme Leader	4, 6, 11, 12, 14

Tierney, Callum	Senior Lecturer Pharmacy Practice	11, 12, 14
Williams, Paul	Senior Lecturer Clinical Skills	4, 6, 11, 12, 14

The team also met two OSPAP graduates from 2020, along with six current students.

Key findings

Standard 1: Patient and public safety

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

This standard was not discussed during the accreditation event. Student support was addressed under standard 6.

Standard 2: Monitoring, review and evaluation of an OSPAP

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

The team was informed in the presentation (meeting 4) that students who had studied on the University of Sunderland OSPAP achieved pass rates of just over 90% in each of the June 2019 and March 2021 GPhC registration assessments.

In response to the team's wish to learn of recent examples of issues or suggested improvements relating to the OSPAP raised through student feedback mechanisms, and the actions that were taken, the School's representatives (meeting 6) explained that students are invited to raise any issues at the end of lectures. One concern was the volume of online material that they had to manage on the VLE; while the University had encouraged the use of short video-recordings, the students preferred longer recordings and the VLE has been redesigned for the next academic year. Before the pandemic, the School had received positive feedback on its simulation-based teaching that allowed the application of knowledge; this had resulted in an expansion of the use of simulations. Another student concern had been the move to the use of online OSCEs as a consequence of the pandemic; the students wanted preparation for these. Accordingly, full mock online OSCEs were run for OSPAP students, who had no previous experience of OSCEs; students were also prepared through an online video recording that covered the format of the OSCE along with the marking schemes used. Some students had also expressed concerns about the use of proctoring software for monitoring online examinations (see standard 5); the concerns included data protection issues, such as storage of the video-recordings generated by the software, these recordings showing the students' home environments. Mock assessments were made available, so that students became comfortable with the proctoring software. However, a minority of students were uncomfortable undertaking online assessments in their own accommodation and were therefore offered the opportunity to attend campus for this purpose.

The presentation (meeting 4) described how the School had learned a number of things from the pandemic that will be taken forward for the future. These included the significant benefits of having a high quality VLE to support traditional learning, with the delivery of theoretical

knowledge using 'instructional design' principles, and the value of continuing the use of lecture capture along with supportive/directed material. The use of online teaching has emphasised the importance of embracing digital skills as a key element of healthcare provision. However, there remains the fundamental need for high-quality face-to-face teaching to develop skills, to address the application of knowledge, and to create a sense of community; regular face-to-face contact provides students with academic and pastoral support. Exploring this further and wishing to know how the pandemic-related changes had been evaluated and by whom, the team was told (meeting 6) that evaluation was undertaken by the Programme Studies Board, course leaders and informal staff meetings, as well as using feedback from students received via module feedback and through the SSLC, which meets three times per year. The team was told that the information obtained by speaking to students was more useful than that derived from module feedback on Canvas. Feedback was also obtained from external examiners and data were evaluated by the end of year Assessment Board. Although online teaching and assessment had worked well, as described in the presentation, face-to-face activities will be brought back, while maintaining the high quality VLE along with digital communication with students and retaining some online activity, as this forms part of the new model for healthcare; while online lectures will be retained, some will take place face-to-face as requested by student feedback. The teaching of clinical skills using a hands-on approach will be developed, bearing in mind the new GPhC standards; hands-on activities will be supplemented by the use of video-recordings and recorded sessions dealing with clinical skills protocols and procedures, as these were found to be useful teaching aids. Virtual lectures supported by interactive activities and group discussions will continue, along with maintaining the weekly pre-brief, as this was found to be a good way of keeping in touch. The OSPAP will mirror the MPharm, with continued online lectures alongside final year MPharm students, and face-to-face activities including those involving the simulated pharmacy. Face-to-face activities, which help to create a sense of community, are especially important for OSPAP students, who are only in the University for a year. The School representatives explained that where students are brought into the University for face-to-face activities, online teaching and learning cannot take place on the same day; online teaching and learning must be either on a different day or be pre-recorded. One protected day per week with no contact was especially important during the pandemic, particularly for students who work or who have childcare commitments. For assessments, the School will retain online MCQ examinations but OSCEs will revert to being face-to-face.

Noting that since the last reaccreditation the OSPAP had undergone a review by the programme team with contributions from key stakeholders and wishing to know the outcome of this review, the team was told (meeting 6) that the programme is reviewed annually in parallel with the MPharm to determine what needs updating. There is a close link between the OSPAP and the final year of the MPharm, both programmes having the same aim in preparing students for foundation training. The School maintains regular annual contact with key stakeholders including pre-registration tutors and placement supervisors, who always provide very positive feedback on OSPAP students and graduates, such individuals being much more mature. The students themselves also provide good feedback on the OSPAP, the structure of which has remained the same for the last three reaccreditations; this structure, which segregates the two main elements ('Clinical Therapeutics' and 'Law, Ethics and Practice'), works well, with the clinical module refreshing students' knowledge and ensuring that they have the appropriate background to move into the workplace. In meeting 8, the students confirmed that they had sufficient opportunity to provide feedback on the course, describing how they completed a

feedback form at end of each semester, as well as providing feedback in weekly 'question and answer' sessions. The students gave examples of issues that they had raised; these included asking for more information about what was expected in written reports including marking schemes, the need for more mock assessments, and the greater value of face-to-face, compared with online, teaching.

Standard 3: Equality, diversity and fairness

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

Noting from the documentation the factors that may contribute to a higher risk of failure of OSPAP students, the team was told (meeting 11) that data from the 2019 registration assessment data identified age as a more important factor than ethnicity in reducing success, and OSPAP students are older than MPharm graduates. Examination of the impact of age has revealed that their older age results in OSPAP students having work, parental and caring responsibilities which may lead to timetabling and home space problems; the University environment has been largely designed for younger individuals. Accordingly, the OSPAP has been timetabled to occupy three days per week, along with the provision of additional support mechanisms, for example, relating to numeracy and English for academic purposes, as well as the use of formative assessments with onward referral. The admissions interviews (see standard 4) will be used to provide a learning needs assessment, as currently students' problems may be discovered too late. Additionally, OSPAP students taking the MSc route previously did this concurrently with the OSPAP, this leading to reduced success for those who needed to re-sit their assessments. Students now focus on the two accredited OSPAP modules, before commencing the unaccredited MSc project component.

The documentation described the establishment of an MPharm EDI group in 2020. Wishing to learn about its composition, and how its work feeds into other reporting and governance structures, as well as how the group influences the OSPAP programme, the team was told (meeting 11) that while the Faculty EDI committee, which covers pharmacy, medicine, and nursing, feeds up to the University EDI Committee, which in turn reports to the University Executive, a specific focus was needed for the MPharm student voice; the OSPAP is included, especially as the current system creates some problems for those students undertaking the OSPAP with an MSc. The work of this group is also presented to the PCPI group. The documentation described how the group hosted a student EDI workshop in March 2021, which had identified and prioritised actions to improve inclusivity on the programme. In response to the team's wish to know what progress had been made on these actions, the School's representatives (meeting 11) explained that the workshop had captured a range of issues to address what a more inclusive course would look like. Accordingly, the School has established a process to action the points and these will be addressed in changing teaching materials for the next academic year.

Standard 4: Selection of students

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

The team learned from the presentation (meeting 4) that while recruitment decisions are currently largely informed by the GPhC adjudication process, the School is trialling an interview process for the 2022/23 intake to the OSPAP. Here, applicants will be introduced to the University and the OSPAP, with the interview helping to make safer recruitment decisions; interviews will allow the School to explore applicants' personal and professional values in more depth to establish their suitability, as well as identifying their learning needs. The process will be based on the School's experience of MPharm interviews over a number of years and the interviews will be conducted on a one-to-one basis by an academic member of staff using MS Teams; it will comprise a numeracy test and situational judgement tests (SJTs), and will include discussions about their application. The team was told (meeting 11) that currently there is little engagement with OSPAP applicants before admission, because, for example, they do not attend open days. Thus the main reasons for introducing the interviews were to establish early contact with the students, allowing staff to meet and get to know them before they join the programme, as well as checking their values and determining their learning needs. The early assessment of learning needs in this way is important, as some students join the course when it is already in progress, making it difficult to establish their requirements. The interviews will also allow early conversations about the Oriel process.

In response to the team's wish to learn of plans to address the ongoing issue relating to the numeracy standard of OSPAP students, the School's representatives (meeting 11) explained that, as described above, a numeracy test will be part of the interview. Applicants will receive the test before the interview, during which the member of staff will go through the answers and assess the applicant's needs. The team was told that numeracy ability among OSPAP students has increased since 2018, when a numeracy test was incorporated into their induction. The programme includes regular formative tests based on GPhC registration assessment-style calculations, with members of staff going through worked examples. Numeracy used to be addressed by several members of staff but the School now has a single person dedicated to acting as numeracy lead, and who also works with pre-registration trainees. Peer numeracy sessions are also undertaken in collaboration with the Sunderland Pharmaceutical Students Association (SPSA). Extensive support is offered to students having issues with calculations, this support being advertised on Canvas.

Noting that OSPAP applicants should normally evidence a suitable period of patient-facing experience, and wishing to learn what guidance is provided to applicants, as well as how the suitability of this experience is evaluated, the team was told (meeting 11) that this is addressed by the admissions team and referred to the School and the Programme Leader if there is a problem. Normally two years' such experience is required as part of the admission process. The team was told that a significant number of applicants have UK experience, having lived here for some time and worked as dispensers, drug representatives or technicians. Concerning the statement that "applicants may have worked as technicians", the team noted that that nobody can work as a pharmacy technician in the UK unless registered as such with the GPhC.

Wishing to know how the new, centralised 'interview and selection centre' will impact upon admissions processes for the MPharm and the OSPAP, the team was told (meeting 11) that this had arisen because of the demand on rooms, including the OSCE suite, for the interviews. The new bespoke facility, comprising rooms for interviews and presentations will provide a centralised interview and selection centre for the whole University on the city campus, which

will now exclusively house the Faculty of Health Sciences and Wellbeing. The facility will take the pressure off teaching rooms, and will allow all home applicants to be brought to a single environment on the campus. The team was told that interviews will be conducted face-to-face on campus rather than virtually, as soon as it is possible.

Standard 5: Curriculum delivery and student experience

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

The presentation outlined the structure of the OSPAP, which has not changed since the last reaccreditation. The programme comprises two 60-credit modules (Clinical Therapeutics; Pharmacy Law, Ethics and Practice) each spanning both semesters; successful completion of both modules leads to the award of a Postgraduate Diploma in Pharmaceutical Sciences for the Overseas Pharmacist Assessment Programme. Subsequent successful completion of a semester-long 'Research Project' module allows the student to obtain an MSc. The content of the programme is updated annually in line with current practice and changes have included an increase in the amount of inter-professional education, as well as an increase in the numeracy content, as described above under standard 4, with a summative, end-of-year assessment in the style of the GPhC registration assessment, this having a 70% pass mark. Noting that OSPAP students interact with pre-registration trainee pharmacists in some practical sessions, and undergraduates in others, and wishing to learn more about the integration of the OSPAP with Stage 4 of the MPharm, the team was told (meeting 11) that the OSPAP is treated as another, standalone, pharmacy module. Much of its content is similar to the clinical material presented at Stage 4 of the MPharm, so that clinical lecture material is combined for the two groups, allowing the OSPAP students to integrate with the MPharm students, although the OSPAP students are taught separately for law and for science. Pre-registration trainees are brought in for the OSPAP simulated pharmacy sessions, as well as to provide support to OSPAP students for calculations, where OSPAP students are paired with pre-registration trainees, providing mutual benefit. The students respond well to pre-registration trainees who understand the challenges and can empathise, offering very positive role models. In meeting 8, in response to the team's wish to know how well-prepared they felt for UK practice and for their foundation training, the students described the programme as comprehensive and relevant, building on the knowledge and experience obtained in their home countries, where pharmacy was very different. They had learned how to approach and communicate with patients, and how to apply their clinical knowledge, as well as understanding what to expect from patients and where to find information. Although they had less patient contact because of the pandemic, their IPE experience and clinical skills sessions had given them confidence and they felt comfortable in progressing to foundation training and UK practice. The students found the feedback they had received on their work to be really beneficial.

The presentation (meeting 4) described how teaching, learning and assessment had been adapted to address the constraints imposed by the COVID-19 pandemic; the adaptations were very similar to those used for the MPharm. For 2019/20 most of the teaching had already been completed face-to-face, with the remaining content, comprising mainly revision material, being delivered online. Written examinations, as well as the simulated pharmacy examination, were converted to online assessments administered via the VLE, while the OSCE took place online using MS Teams. For the academic year 2020/21 the delivery of the programme comprised a

hybrid approach using a blend of synchronous and asynchronous online delivery, guided online activities and small-group, face-to-face teaching. MS Teams was used for all 'live' lectures, with reVIEW lecture capture. Small-group face-to-face classes, covering seminars, clinical skills and simulated pharmacy, were delivered using social distancing and appropriate precautions, including the use of PPE. Half-way through term 1 another lockdown split the cohort; because they were on the campus for only one day per week for face-to-face activities, around half of the students were commuting rather than living permanently in Sunderland. Restrictions on travel changed in November 2020 and as OSPAP students were spread across the UK, some were able to attend and others not due to government travel restrictions. Thus, for term 2 of 2020/21, the decision was made to revert fully to online delivery. No placements could take place, although voluntary community pharmacy placements were offered after Easter. Written assessments, including examinations and the numeracy assessment, comprised online examinations using a combination of Honorlock proctoring software with open book application exercises; assessed presentations and the OSCE took place via MS Teams, while the simulated pharmacy examination took place online via Canvas. Student opinion was all very positive over the handling of teaching, learning and assessment during the pandemic; this was confirmed in meeting 8, where the students told the team that the course delivery comprised a blended approach of two days online and one day on the campus and that the transition to online working had been very smooth, with little perceived difference between online and face-to-face, for example, in relation to dispensing and clinical skills. All material, including recorded lectures, was on the Canvas VLE so that lectures could be revisited. The tutors know everybody individually and IT services were always very helpful. The students felt more relaxed working from home; the disadvantage was that they met their classmates only online so that they could not get to know other students.

The team was told (presentation, meeting 4) that the pandemic had demonstrated the significant benefits of having a high quality VLE to support traditional learning; instructional design will continue to be used to enhance the VLE, and the School will continue to use lecture capture along with supportive directed material. While online teaching is effective, there remains the fundamental need for high quality face-to-face teaching to develop skills and the application of knowledge, as well to develop a sense of community, where regular face-to-face contact provides students with academic and pastoral support, although some COVID-19 measures, such as social distancing, the requirement for PPE and the need for smaller group size, may remain, depending on government guidance. Some aspects of assessment, such as numeracy tests, will remain online.

Wanting further information about the induction programme for OSPAP students, as well as how these students are orientated for UK study, the team was told (meeting 6) that the induction week, which now incorporates the 'Flying Start' programme (see standard 6) took place face-to-face on campus, even during the pandemic. The induction comprises an introduction to the course covering aspects such as fitness to practise, University policies and procedures, assessment and regulations, and information about the support available, as well as including a tour of the campus and an introduction to the PCPI group; meeting patients at the start of the programme helps to orientate students to UK healthcare and the NHS. Students also undergo testing for numeracy and take a pharmaceutical sciences test, as well as being asked to write a short essay either on public health or on their reasons for embarking on the programme. The essay helps to orientate them to UK study, because they receive feedback, for example, that

the academic style is incorrect with respect to referencing, thus helping to bring all students to the same standard. In addition to providing information about the difficult, intensive nature of the course, the induction week allows students to get to know each other and to gel as a group. It is emphasised to the students that the course is full-time, although only part-time at the University and they are also reminded that they must not describe themselves as pharmacists, despite being qualified as such in their home countries. In meeting 8, the students confirmed that the induction day had provided them with a great deal of information, including the organisation of the clinical and law modules, and details of their assessments, as well as where to obtain information and whom to contact; they had also been introduced to members of staff. All the information had been placed on Canvas, which allowed access for those students who could not participate because of work commitments. There had also been a virtual University 'Welcome Week'.

Concerned to know how students have been provided with suitable learning opportunities during the pandemic that enable them to demonstrate the learning outcomes normally linked to placement activities, as well as the impact of cancelled placements for OSPAP students given the short length of the course, the team was told (meeting 11) that GPhC guidance had been used as a basis. Students received staff support to find voluntary placements in hospital and community, as well as some GP practices in liaison with stakeholders; small pharmacies were unable to take students. Many OSPAP students have healthcare jobs already as dispensers or technicians, and the OSPAP students who participated in voluntary placements were those who had no experience of pharmacy in the UK; during the course, OSPAP students learn about the structure and function of the NHS and this knowledge is updated frequently. Patient contact continued via Microsoft Teams with virtual placements, as well as clinical skills sessions, IPE, counselling, history taking, patient stories and a mock ward simulation, which simulates the hospital working environment; the content of the sessions was aligned to the placements, and teacher practitioners were involved, with students given the best possible opportunities. Members of the PCPI group could not be brought onto the campus because of the risks but Microsoft Teams still offered good face-to-face online patient contact. The staff (meeting 11) stated that the transition of clinical skills teaching from face-to-face to online delivery had been managed successfully. At the end of the year, a large, two-day career conference was held jointly with Newcastle University; this included talks from hospital practitioners and OSPAP students participated in this conference. Planning is underway for the next academic year, where it is fully expected that all placements will take place. Noting that the sustainability of placements is currently rated 'amber' on the risk register, and wishing to learn how this was being addressed in terms of availability and cost, the team was told (meeting 11) that the School has a large network of providers, and that there are service level agreements with large NHS trusts, as well as with community pharmacy; Primary Care Networks also want students. Placements are rated 'amber' as a risk, because they cannot be run if providers withdraw; however, the School remains confident that sufficient placements of the appropriate variety will remain available, although the funding model to address the GPhC's new standards is still uncertain, and funding will ultimately determine what can be provided. Finding GP placements remains a struggle and the School is working to increase these for both MPharm and OSPAP students, with talks in progress to increase the number of providers. The School is also considering the development of placements in other healthcare environments. The School representatives told the team that the plan for virtual placements has not been implemented;

this planning was undertaken in case the pandemic interfered with face-to-face activities. In meeting 8, the students described their pre-pandemic experiences of placements in hospitals, GP surgeries, and community as valuable, but told the team that the pandemic had provided the University with problems in liaising with the different providers, with some placements taking place a week before the examinations, which had been troublesome. IPE activities had simulated real-life situations and had been very helpful, along with clinical skills sessions, where students had measured blood pressure and heart rate and practised clinical history taking, learning what questions to ask using open questions; these activities, along with the feedback they had received, had given them confidence, despite the limited patient contact. IPE sessions, for example, with nursing students, had addressed clinical examination and communication skills, these contributing to the good preparation offered by the course.

In response to the team's wish to hear of examples where the Honorlock proctoring software identified inappropriate activity during online assessments the School's representatives (meeting 11) explained that this software was used for all online, closed-book assessments. The students were happy with its use and regarded it as a good deterrent, with everything being recorded (as confirmed in meeting 8, see below). No major problems had been detected, although the system flagged potential issues that turned out to be unimportant when reviewed later on Canvas; for example, a student was tagged as a risk because of mumbling to themselves, but it was established that they were not receiving assistance. Another problem arose from students not having their ID cards, but these were substituted by passports or driving licences. No formal misconduct proceedings were undertaken as a result of issues identified by Honorlock, which worked well and which will continue to be used, for example, for online MCQ and numeracy tests. Performance was similar to that in previous years with no major deviations. Wishing to know if students were aware if Honorlock triggered an alert and how this was resolved, the team was told (meeting 11) that students had been warned about the possibilities of false accusation of cheating arising from Honorlock activation; they had been reassured that where issues were flagged the staff would scrutinise the video-recordings. Sometimes, students had taken the initiative and contacted staff where such incidents had occurred. The students (meeting 8) told the team that despite some initial worries they felt that there was a good level of integrity in the assessments, which were rigorous. The software had worked well, preventing collusion, for example, by not allowing them to return to earlier questions. A session had taken place beforehand to explain the proctoring system for the identification of misconduct and to reassure them, for example, in relation to privacy, and a mock assessment using Honorlock had been provided. They had been well-supported for IT aspects and all issues had been resolved.

In meeting 11, School's representatives told the team that OSPAP students are assessed in April/May and are allowed one repeat at the end of August. If they still fail, they are required to retake the whole module.

The 'pedagogical developments' described in meeting 12 provided the team with some further evidence that standard 5 continues to be met.

Standard 6: Support and development for students

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

The presentation (meeting 4) described how, at the start of the pandemic during the 2019/20 academic session the School and the University quickly identified the need for significant student support with regular communication and dialogue with students, through course representative meetings and whole group, conference style 'question and answer' sessions. Some amendments were also made to the proposed assessment schedule to account for students with significant travel restrictions. In the 2020/21 session, while the vast majority of students returned in the early part of the first term, there were significant barriers that prevented some students from returning to the UK and there was concern about Covid-19 case numbers in the UK compared with those in their home countries, as well as ongoing challenges, for example, with students requiring to self-isolate, problems with students being in different time zones for online delivery, difficulties in tracking student engagement when working online, and the lack of development of a community. Extensive dialogue and communication took place with students and the International Office, as well as with Student Wellbeing. All students continued to be assigned a personal tutor with whom they had regular meetings that were attached to summative assessments. Additional student representatives were recruited and regular formal and informal meetings with staff took place, along with regular whole group question and answer sessions via MS Teams and weekly briefings. An additional, deferred assessment period was established in July to support progression and maintain the workforce pipeline. For OSPAP students, the induction week material and the 'Flying Start' module (see below) were made available on the VLE, prior to students arriving on the campus. Throughout the pandemic, extensive support was provided by the University and the OSPAP teaching team, with regular emails including updates on government guidance, and regular contact from the staff through email, announcements and live 'question and answer' sessions. Library support sessions were available, as well as sessions on English for academic purposes. Students had access to the University wellbeing team as well as to online resources such as 'SilverCloud' mental health support. Support was also offered through the Sunderland Pharmaceutical Students' Association. In meeting 8, the students told the team that, while missing face-to-face support because of the pandemic, they had received a great deal of support both from the School and the University, including assistance in finding jobs and pre-registration placements. The students had been in the University for practical work and members of staff were available before and after the classes. Staff members were available online to discuss issues and all queries had been answered, with online sessions taking place every week. Mental health support was available and the careers service had been very helpful.

In response to the team's wish to learn about the additional academic and pastoral support offered to OSPAP students during the pandemic, the School's representatives (meeting 6) described how the Canvas VLE is used to deliver messages, which are both programme wide and module specific. Synchronous MS Teams sessions are used to ask about student welfare and weekly and briefing sessions are conducted each week by the module leads covering upcoming module activities and these also serve as question and answer sessions . There is a 'Wellbeing' website through which students can make appointments, and out-of-hours support is available. The wellbeing service is highlighted during induction and students can access the service either directly or via their personal tutors or the programme lead. Members of staff receive guidance on when to refer and to whom. The team was told of the 'fitness to study' policy which is intended as a supportive process to encourage students to seek help; it complements fitness to practise. Here, where students are found not to be engaging, a case conference is initiated through which students are pressured to attend meetings; ultimately this can result in

suspension of a student for non-engagement. Noting that the OSPAP student cohort was split between those students living in Sunderland and those remaining at home across the country, the team was told that both groups received regular communication, including live online sessions and seminars, with weekly question and answer sessions which were sometimes based on an agenda. These sessions allowed the students to voice their concerns, which may be different for OSPAP students, many of whom have jobs and families needing support; such students could be supported through rescheduling learning activities.

The presentation (meeting 4) and the documentation described a new 'Flying Start' programme as part of induction, where students are welcomed by the Programme Leader and orientated to key staff. 'Flying Start' includes some programme-specific content, as well as an introduction to wider University support services. The programme is delivered mostly virtually, although there are some face-to-face sessions dealing with professionalism seminars as well as health and safety. All sessions are captured and recorded using reVIEW and placed on the Canvas VLE; these include video-recordings relating to health and safety in laboratory classes. Students are now also introduced to the PCPI group by the staff coordinator of that group, together with PCPI group members. Wishing to learn more about the 'Flying Start' programme, the team was told (meeting 6) that this follows the University induction and is a University-wide initiative, delivered through the VLE, aimed at preparing students for study at Sunderland in order to enhance success, and to facilitate their integration into the University; the programme will evolve with time. It was developed to complement the existing induction, and each programme produces bespoke material, allowing students to learn about the programme and to become familiar with the University and the academic team who will deliver the course, including the module leaders. There is no academic content but the programme covers wellbeing and disability support, so that these matters can be addressed right at the start. The programme also includes a pre-arrival assessment, whereby students are given a simple task requiring them to write 500 words on either on public health issues or on their reasons for embarking on the OSPAP. This allows development of tutor-student relationships and also allows identification of learning needs such as English language requirements. Students can access the programme from mid-August, although some access it later; everything is revisited, so that students are not disadvantaged by late access.

In response to the team's wish to learn of the support available to those students who find online learning and assessment challenging due to lack of reliable internet connection, or lack of suitable computer equipment, the School's representatives (meeting 11) acknowledged that some students struggled, not just because of technical problems or equipment but because of their lack of suitable study space, for example, due to sharing accommodation. All learning material was recorded so that it could be accessed by students in their own time and at their own pace. The library had remained open throughout, with students being provided with webcams and able to borrow laptops. 95% of students were able to complete online assessments, with those who could not do so being deferred until the July opportunity. There had been a small number of technical issues with OSCEs which had been resolved.

Standard 7: Support and development for academic staff

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

Wishing to learn about the induction system for new staff members who are not pharmacists, the team was told (meeting 6) that there are not many non-pharmacists on the staff. One such staff member had joined during the pandemic, because of which they had been unable to meet other staff members. Accordingly, they had been provided with a buddy and supported by their line manager; they were now fully integrated into the academic team. Non-pharmacist staff members, including those holding Academic Tutor posts, are involved in TBL and also in team-based teaching, so that they become integrated from the very start. Enquiring further about how non-pharmacist tutors are supported in dealing with specialist pharmacy topics such as Oriel applications and careers, the team was informed that all tutors are pharmacists and that Oriel is handled by staff members dedicated to that role, and who undertake a range of Oriel-related tasks with the students, all relevant information being posted on the VLE. Any questions about practice that are directed to science staff members are referred to practice staff. Previously, students' professional portfolios, which are aligned to the GPhC's standards for pharmacy professionals, were assessed by the tutors but are now assessed by practising pharmacists. Students receive a preliminary talk about the marking of the portfolios, and feedback to students on their portfolios is now streamlined using a template to improve consistency, something appreciate by staff members.

The team was told (meeting 6) that a central workload model is used, against which the staff workload is mapped, with practice-based work being incorporated into the workload of individual staff members. The pandemic had increased the workload as a result of the need to prepare material for online delivery, with regular module and team meetings. Because of the pandemic, this year has been challenging, and an emergency model was employed, with the workload model being now spread across a two-year period. Workload planning, which is part of the annual appraisal system, is undertaken pre-emptively for different categories of staff, and is now done electronically, being linked to central systems such as the HR database. The accreditation team noted the collegiality of the School staff.

In response to the team's wish to learn about the training and support that is available to personal tutors to carry out their role, including training in assessment, the School's representatives (meeting 6) explained that there is a buddying system, whereby more experienced tutors and line managers work with new staff members; a University document deals with pastoral aspects of tutoring. During their induction, all new staff members undergo standard basic training which includes a 'where to refer' document. Staff members are reminded electronically when their mandatory training needs to be renewed. Tutors are supported throughout, and there is a handbook in which all information concerned with the personal tutor system is formalised. The personal tutor role has not increased hugely as a result of the pandemic, because regular meetings with students linked to assessments has always been a feature of the system, which has simply continued during pandemic, although there has been an increased workload on central University services, with a significant growth in the number of wellbeing staff to provide support. Training in assessment is addressed through documentation and support from the module leads who, in order to ensure consistency, centrally manage all assessments, which differ among the modules; the assessment criteria are distributed to all members of staff by the module leads. All members of staff know to whom to speak on any matter, and new staff members are encouraged to speak to the module lead if they require more information. The team was told (meeting 11) about the support provided to all staff members during the pandemic, especially with reference to the move to online teaching

and assessment. The University recognised that there were extensive learning needs and CELT had put together material including two video-recordings, demonstrating the recording and uploading of lectures, as well as how to transition material to an online format on the VLE, which has been redesigned. The staff development unit ran various courses, for example, on the use of Canvas, as well as on the use of various software, including that used for the editing of video-recordings. All staff members now have a University laptop and staff learning continues through the module teams, with online catch-up sessions and team chats. The staff had found the teaching of organic chemistry particularly challenging without the use of a whiteboard, and various e-platforms had been trialled for the virtual teaching of chemistry using an iPad and stylus.

Standard 8: Management of an OSPAP

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

The presentation (meeting 4) described the School management structure which comprises the Head of School, supported by two Team Leaders, one for Pharmaceutical Sciences and one for Pharmacy Practice & Clinical Therapeutics. Each of the MPharm and the OSPAP has its own Programme Lead, with a lead for each stage of the MPharm; each of the MPharm and OSPAP modules has its own lead.

Wishing to know how student engagement has been monitored during the pandemic and how non-engagement issues have been addressed, the team was told (meeting 6) of the difficulty of monitoring student engagement during online learning sessions, where, for example, a student may be logged on but not necessarily engaging with the activity; sessions were repeated so that students in different time zones could engage. During these sessions, the staff tried to encourage interactions without the mandatory use of cameras and, even online, members of staff get to know the students quite well. Monitoring student access to the VLE through viewing logs gives an indication of student engagement, as does obtaining early feedback from students, so that additional support can be provided where required. Early formative assessments also identified engagement and allowed appropriate interventions, such as referral to wellbeing or international services. Students prefer face-to-face learning and would say that engagement declined with the duration of the lockdown, and certainly attendance at live lectures declined towards the end of term; however, all lectures are recorded, so that attendance is not necessarily a good indication of engagement. There were no problems with engagement of OSPAP students, who are highly motivated.

Standard 9: Resources and capacity

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

The presentation (meeting 4) described how budgeting was devolved through allocation of funding to each Faculty and Central Service. An annual planning cycle agrees a rolling Faculty budget for three financial years. At the Faculty level, financial planning involves the Academic Dean, Heads of School, and the Director of Finance in collaboration with the University's Executive Board. The Faculty Executive Committee, in partnership with Finance and Human Resources, is responsible for financial performance; this includes the identification of resource requirements, addressing fluctuations in income levels resulting from market trends and conditions, planning investment in areas of growth, projections of student recruitment,

retention and progression, and anticipating pay awards and inflation. Both the Faculty and the School show an ongoing financial surplus. As well as the MPharm and the OSPAP, accounting for around 600 students, the School offers BSc programmes in Biochemistry, Biopharmaceutical Sciences, Medicinal Chemistry and Cosmetic Sciences, as well as postgraduate programmes including Independent Prescribing, Clinical Pharmacy, Cosmetic Science, Drug Discovery and Development and Pharmaceutical and Biopharmaceutical Formulation; the School currently has 28 PhD students and also offers entry to undergraduate programmes through Integrated Foundation Year Science routes. In response to the team's wish to know about the importance of the OSPAP to the School's financial health, as well as the key financial risks and how these are mitigated, the School's representatives (meeting 4) explained that the OSPAP makes a significant contribution, as there normally about 30 students enrolled on the course, although the budget is based on an intake of 15 per year, making the programme readily sustainable, as OSPAP numbers are usually well above the minimum. There was a transient dip in numbers in the 2019/20 academic year, possibly due to inadequate marketing, but also possibly related to Brexit and visa issues. Much interest in the OSPAP comes through word of mouth and relates to the very positive comments made about the programme. The fact that much of the teaching is undertaken alongside MPharm students using common materials also contributes to sustainability through limiting staff costs. Key risks relate to recruitment and retention of students, recruitment risks being mitigated by effective marketing and ensuring the rapid processing of applications. Moreover, budgets are considered across the whole Faculty rather than at programme level, and some areas of the Faculty are growing. There is a Faculty-wide risk associated with the several programmes that are subject to accreditation by regulatory bodies such as the GPhC, with the loss of accreditation being a major risk. Student visa risks were mitigated by the introduction of the MSc, which allowed students to apply for a Tier 2 visa; visa rules are of course changing again from July, and changes to Oriel may facilitate students' visa applications and help them to undertake foundation training. Currently, the closing date for Oriel is 23 June, with OSPAP students thus missing out on that opportunity to apply.

In response to the team's wish to learn about the financial implications of the pandemic, including the impact on student recruitment, the School's representatives (meeting 6) described how the Covid pandemic had been strategically and effectively managed by the University. Despite early concerns, student recruitment targets had been exceeded, appearing similar to pre-pandemic levels. Budgets were also helped by a voluntary severance scheme, which was taken up by a significant number of staff members across the institution; another scheme is currently in place, although with little impact on the Faculty. As part of the response to the pandemic, with its potential impact on student retention and progression, the University introduced flexibility around the regulations, for example, allowing extensions to coursework submission and providing additional assessment opportunities. Noting the effect of the pandemic on applications from overseas students, the team (meeting 6) queried the impact of this on income and the budget. The School's representatives explained that there had been no notable impact because the University does not apply a differential fee for overseas students. However, there had been some nervousness in the Far-Eastern market, with students deferring their studies until 2021/22 due to family pressures, and with parents expressing concern about the high degree of uncertainty; the students were waiting until the last moment to decide to travel to the UK, although the situation was not as bad as last year, with overseas students still

in the pipeline, and there had been an upturn in the numbers of students from countries such as South Korea.

The presentation (meeting 4) showed that there are currently 42 academic posts (equivalent to 39.5 FTE) in the School as well as eight staff members (2.4 FTE) employed through SLAs or as Teacher Practitioners. The OSPAP students are taught by a key team of staff in lectures, seminars, clinical skills and simulated pharmacy sessions, with pre-registration trainees and Academic Tutors helping in simulated pharmacy classes, and the Academic Tutors also assisting in the 'Clinical Therapeutics' seminars; OSPAP students join the Stage 4 MPharm students in large lectures on clinical topics but receive separate lectures for pharmaceutical sciences topics and law.

In response to the team's wish to know how the School monitors the effects of staff turnover, and how this is managed to ensure an appropriate and realistic workload for staff members, the School's representatives (meeting 6) explained that when any member of staff left, the approach was always to seek a replacement; all members of staff who have left have been replaced. The impact of a member of staff leaving is considered, with additional temporary staff being brought in where required, although, while this is relatively straightforward in the practice area, it may be more difficult for science staff. The staff has shown a good degree of stability and staff turnover has no impact on the students. One key post that is critical to replace is that of the Team Leader for Pharmaceutical Sciences, as the current post holder is moving within the Faculty to become a Senior Lecturer in Clinical Therapeutics; as this is an important line manager position, a transition plan is in place for the change of role. New staff members are never put straight into a leadership role, providing them with the opportunity to learn about the programme and to receive initial support from other members of staff including through buddying; some members of staff started as Academic Tutors and thus were already familiar with the programme.

In meeting 4, the presentation described the significant, three-phase campus redevelopment of the Sciences Complex, including the Medical School and a Cadaveric Facility. Wishing to learn of the impact on the OSPAP and MPharm of the delay to the campus redevelopment programme as a result of the pandemic, the team was told (meeting 6) that there was no impact, the only affected space being the Fleming building basement which accommodates laboratories for teaching microbiology, pharmacology and cell biology, as well as research spaces. Temporary accommodation is available in an empty, currently unused building in the Technology Park into which the laboratories can move. The work will be complete for the 2022/23 academic session.

In meeting 8, the students expressed satisfaction with the equipment and facilities, including technical support and the library, the latter having been very helpful, for example, in extending the deadline for the return of books during the pandemic.

Significant pedagogic developments

Of the examples below, 2 and 4 were discussed in meeting 12.

Example 1 - Patient experience of design and delivery of inter-professional education - A mental health case study

The aim of this work was to explore patients' experiences of their involvement in the design and delivery of inter-professional education (IPE) interventions focussing on mental ill health for students studying on undergraduate healthcare and healthcare related programmes. The University has made a commitment to fully integrate patients, carers and public involvement (PCPI) into all the core functions of the Faculty of Health Sciences and Wellbeing. Members are recruited directly from the local community through patient support groups and charities, and via a relationship developed between the University and the Community Mental Health Team of a local NHS Mental Health Trust. This study evaluated the involvement of PCPI in an initiative to enhance the multidisciplinary teaching and learning of the interface between mental and physical health, also allowing the wider integration of the PCPI group into the Faculty. An iterative series of focus groups was held with 14 members of the PCPI Group who have a history of mental ill health. Their experiences of being involved in teaching and learning activities, and collaboration with academic staff, as well as integration into the academic faculty were explored. Several salient themes emerged from the study including reduced stigma and normalisation of experience of illness, enhanced self-worth, and improved wellbeing. In conclusion, a supportive University community and a designated academic PCPI co-ordinator facilitate a supportive environment for patients and carers to develop as educators, to contribute to the training of future healthcare professionals, and to improve their own personal wellbeing. Appropriately resourced and well supported initiatives to integrate patients, carers and the public into the functions of an academic faculty can result in tangible benefits to individuals and facilitate meaningful and enduring connections between the University and the wider community within which it is situated.

Example 2 - Evaluation of Numeracy Skills of Pharmacy Students and Perceptions of Numeracy in Clinical Practice

The numeracy paper in the GPhC registration assessment changed in 2016 from multiple-choice questions (MCQs) to free-text answer questions, allowing the use of a calculator, to better represent clinical practice and increase the reliability of the assessment. An evaluation of University of Sunderland pharmacy student performance in the GPhC registration assessment showed that while overall pass rates were significantly higher than the assessment average, failure was more likely to be due to performance on the numeracy paper. To address this, new numeracy-based teaching and learning activities were subsequently developed, which are underpinned by this research, the aim of which was to assess pharmacy student performance in both multiple-choice question (MCQ) and free-text numeracy question formats without and with the use of a calculator, respectively. Two numeracy assessments were given to Stage 3 and Stage 4 students. One paper included ten multiple-choice questions (MCQs) and the second paper consisted of ten free-text answer questions. Participants were then given an evaluation questionnaire to explore their perceptions about the assessments and numeracy in clinical practice. 60.9% of students passed the MCQ and 27.9% passed the free-text answer assessments. Most students felt insufficiently supported by the academic team and comments highlighted student concerns that teaching materials are not effectively preparing students for assessments; they wanted more teaching seminars and more practice questions to be available. The outcomes of this work have informed both MPharm and OSPAP developments.

Accordingly, numeracy teaching and assessment are now included at each academic stage of the MPharm and throughout the OSPAP, with the content and length of the assessments becoming progressively more complex with all the numeracy assessments for the OSPAP require free-text answers; the quantity of practice questions has also been increased substantially, including formative assessment opportunities designed to develop numeracy skills, and enhanced support is provided.

Example 3 - Cadaveric facility and anatomy teaching

The Anatomical Society has published a Core Anatomy Curriculum for Pharmacy to demonstrate a basic level of competence in anatomy. The introduction of the Medical School has provided the opportunity to develop a cadaveric facility and associated resources, scheduled for completion in 2021, and accessible to all healthcare students. For MPharm/OSPAP students, the cadaveric anatomy facility will provide an enrichment to the overall learning experience of anatomy; in particular, it will provide the opportunity for anatomical contextualisation of conditions, procedures and/or clinical context relevant to the practice of pharmacy. The inclusion of cadaveric anatomy will complement non-cadaveric resources such as anatomical models and virtual dissection, and will offer significant enhancement to teaching and learning, also providing opportunities for inter-professional education. To support and enrich the use of the cadaveric facility and enhance individual self-directed learning, the anatomy team and CELT are also working to develop a VLE-hosted anatomy learning package, using the digital anatomy resources already created. This approach will allow bespoke material to be developed with contextualisation of core anatomical content to pharmacy scenarios.

Example 4 – IPE focussed on a falls simulation

The presentation in meeting 12 included a description of an IPE activity focussed on the management of falls and the care of patients. This was based on the high prevalence of falls in people over 65 with the resultant impact on patients and high cost to the healthcare system. The activity was undertaken by stage 4 MPharm and OSPAP students working with students of social work, paramedic science, adult nursing, mental health nursing, occupational therapy, physiotherapy and medicine. The aim was to consider a large number of factors in a simulated home environment in order to reduce unplanned hospital admissions due to falls; the factors included the patient themselves, simulated by a carefully chosen member of the PCPI group, along with assessment of the environment, and a consideration of the role of medication in causing falls. The participating students used authentic documentation and assessment tools, along with their history-taking and clinical assessment skills. In the exercise, they learned to challenge stereotypes and the use of poor language, such as “the patient had a fall”. The activity required them to use decision-making skills, along with shared decision-making in a multidisciplinary team and students received feedback from the patient. In 2021, the activity, which involved 461 students, was held online because of the pandemic. The team was told (meeting 12) of some of the challenges of IPE, including achieving the correct professional balance in multidisciplinary student groups, and ensuring that all student engage. The last was more difficult online, because of students’ distractions such as having children at home. 20 patients were used with many members of staff to cover the breakout rooms. Facilitation is much easier when the activity is conducted face-to-face, with students organised into groups.

Students undertake pre-reading and pre-assessment, after which they move into their groups for the simulation, with staff members moving round the groups to encourage discussion. Student participation is encouraged by allocation of specific roles according to their profession. The team was told that attendance is compulsory for students of pharmacy, nursing and medicine, although not of psychology.

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