



Overseas
Pharmacists'
Assessment
Programme (OSPAP)

University of Sunderland
Report of a reaccreditation event
July 2018

Event summary and conclusions

Provider	University of Sunderland
Course	Overseas Pharmacists' Assessment Programme (OSPAP)
Event type	Reaccreditation
Event date	10-11 July 2018
Accreditation period	2017/18 – 2020/21
Outcome	Approval The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the OSPAP provided by the University of Sunderland should be reaccredited for a further period of three years.
Conditions	There were no conditions
Standing conditions	Please refer to Appendix 1
Recommendations	No recommendations were made
Registrar decision	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 3 years.
Key contact (provider)	John Sherwood, Senior Lecturer, OSPAP Programme Leader
Accreditation team	Mr Peter Curphey (Team leader), Pharmacy Consultant Dr Geoff Hall (Academic), former Associate Head of Leicester School of Pharmacy, De Montfort University Dr Ruth Edwards (Academic), Lecturer, Robert Gordon University Professor Anne Watson (Pharmacist), Postgraduate Pharmacy Dean, NHS Education for Scotland Mr Ian Smith (Academic), Lecturer in Pharmacy Practice, Keele University Mrs Samantha Amos (Recently registered pharmacist), Senior Clinical Pharmacist, Maidstone and Tunbridge Wells NHS Trust Mrs Fiona Barber (Lay member), Independent Member, Leicester City Council
GPhC representative	Ms Joanne Martin, Quality Assurance Manager, GPhC
Rapporteur	Dr Ian Marshall, Emeritus Professor of Pharmacology, University of Strathclyde; Proprietor, Caldaran Research (Educational and Writing Services)
Observers	Ms Farwah Bukhani, (recently registered pharmacist), in training

Mr Alastair Paterson, (pre-registration trainee), in training Mr Daniel Greenwood, (recently registered pharmacist), in training Mr 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 approving body for pharmacy education in Great Britain. These approved qualifications form one of the criteria for eligibility for registration as a pharmacist in GB. This accreditation relates to the Overseas Pharmacists' Assessment Programme (OSPAP) This reaccreditation event was carried out in accordance with the GPhC's 2011 Accreditation Methodology and the course was reviewed against the GPhC's 2011 Standards for the education and training of non-EEA pharmacists wanting to register in GB.

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.

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 OSPAP programme is delivered by the School of Pharmacy and Pharmaceutical Sciences within the Faculty of Health Sciences and Wellbeing. The University has offered a conversion programme for overseas pharmacists who wished to register in the UK since 2006. Prior to 2012, the University had offered the Postgraduate Diploma (PgDip) OSPAP as a stand-alone programme. In 2011, it became possible to embed the accredited PgDip OSPAP within an MSc programme. When the previous OSPAP programme was re-accredited in 2012, student consultation and market research suggested that an MSc qualification of this type would be attractive to potential students due to its internationally recognised profile and, notably, due to visa regulations making an MSc valuable to those requiring work permits to undertake pre-registration training. In 2012, the OSPAP was, therefore, developed and approved as a Master of Science (MSc), with the interim PgDip award but the OSPAP remained a standalone qualification for the purposes of registration. This award was granted a full period of accreditation of three years. The last reaccreditation event took place in July 2015 when the accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council that the University of Sunderland should be reaccredited to provide an OSPAP for a full period of three years. No conditions were set or any recommendations made.

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 to provide a basis for discussion.

Pre-visit

In advance of the main visit, a pre-visit meeting took place at the University on 18 June 2018. The purpose of the pre-visit 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 visit.

The event

The event took place onsite at the University of Sunderland on 10-11 July 2018. The event began with a private meeting of the accreditation team and GPhC representatives on 10 July 2018, and continued with a series of meetings with staff and students of the University.

Declarations of interest

There were no declarations of interest

Key findings

Standard 1: Patient and public safety

All criteria relating to this standard are met.

(See Appendix 2 for criteria)

Although it is accepted that some of the OSPAP students have been practising pharmacists and may have experience in patient examination, irrespective of the background of the student or their admission qualifications, they will all follow the same teaching and learning programme. A significant part of the UoS OSPAP assessment strategy is designed to assess competency and allow students to “show how” they will perform a particular task in practice or simulated environment. All assessments within each module must be passed and all modules must be passed to achieve PgDip/MSc OSPAP qualification as per OSPAP Programme Specific Regulations. All of the teaching within the placements, clinical skills and simulated pharmacy sections of the programme involves intensive supervision of students and is designed to allow students to develop at an appropriate rate by using simulated/standardised patients. University processes, policies and Fitness to Practise (FtP) procedures are in place to ensure that students do not jeopardise patient safety. Students are made aware of these systems during Induction and informed of the University’s stance and right to terminate a student’s education in light of inappropriate conduct or health which may risk the safety of patients irrespective of successful academic assessment achievements. Prior to any placements, again within Induction Week, the importance of appropriate dress is described to the students to prevent any health or safety risk in the context of infection control as well as to impress upon students how they should be professionally presented when meeting patients or other healthcare professionals. Any student who demonstrates behaviour or develops health problems that have the potential to adversely affect patient safety will become subject to the Fitness to Practise procedures, although since the introduction of FtP processes in the OSPAP there have been no formal FtP investigations undertaken. In the placements students are under constant supervision; in some cases, the supervisor may not be a pharmacist but a senior technician or pre-registration pharmacist. Students are not left alone at any time and, therefore, cannot get into a situation where they may attempt to carry out tasks without being fully supervised. In clinical skills sessions, to deal with situations where students may be new to the process of consultation and physical

examination, simulated patients are used for initial interactions followed by students being allowed to use as subjects either each other or standardised patients that are aware of the skill level of the students in question. The University manages risk by requiring that all student activities are risk assessed and appropriately supervised, including all patient-facing activity, both on and off-site. Pharmaceutical calculations are a potential cause for concern with regard to patient safety, and students have the opportunity throughout the programme to ensure that their skills in this area are appropriate and consistent with safe practice. In each of the two OSPAP modules there are assessments which include critical elements relating to patient safety; if students fail in such an element they will be referred in the assessment and, therefore, the module. The application of the GPhC "*Standards for Pharmacy Professionals*" is emphasised in the Placement Handbook with respect to student behaviour and conduct whilst on placement.

Standard 2: Monitoring, review and evaluation of an OSPAP

All criteria relating to this standard are met.

In realising a new Strategic Plan in 2016, the University was restructured from six to five academic faculties with the OSPAP programme sitting within the Faculty of Health Sciences and Wellbeing (FHSW) which comprises the Schools of Medicine, of Nursing and Health Sciences, of Pharmacy and Pharmaceutical Sciences, and of Psychology. The Head of the School of Pharmacy and Pharmaceutical Sciences is responsible for liaison with the GPhC. Team Leaders associated with the academic staff that support and deliver the UoS OSPAP are all members of the Faculty Academic Committee (FAC) and, as such, are aware of all relevant information passed down from the Faculty Executive, including detailed financial information. Team Leaders perform the role of functional and operational line management of a team of academics in line with the University Strategic Plan, carrying out staff appraisal and development, ensuring fair and transparent work loading, and holding regular communication meetings. The quality assurance of the OSPAP programme follows standard University procedures. The Academic Quality Office oversees the operation of academic quality systems and procedures and provides help and guidance to Faculties on all academic quality issues. The core quality assurance processes to ensure that an appropriate threshold level is reached in both the academic standards of the programmes offered and the quality of students' academic experience are programme approval, annual review, periodic review and the use of external examiners. The external examiner is required to assure the quality and standards of assessment at the level of the award, approving examination questions, being consulted on coursework, and sampling the assessment of work; the team noted that comments from the OSPAP external examiner were positive and that the examiner attends the Programme Assessment Board. OSPAP candidate performance in the June GPhC registration assessment has been strong and consistently above average for the sector. All student feedback informs improvements and developments to the programme, with the views of students collected through module questionnaires, Staff Student Liaison Committee meetings, Module/Programme Studies Board meetings and informally. Placement provision falls under the UoS Work-Based Learning policies, under which all placement sites are audited by academic staff on a rolling schedule basis. Placements are structured to ensure that they are progressive and integrated within the OSPAP programme, with service level agreements (SLAs) which are annually reviewed and renewed in place with all the regional providers to ensure sufficient placements to service the programme. Placements operate using a two-way feedback mechanism in which students and mentors complete online feedback for every session on various aspects of their experience. OSPAP students are supervised whilst on placements by external practitioners, paid for by the University; associated costs are included in the Faculty financial modelling process. There are annual Stakeholder meetings to review and update placement provision to ensure that the working model best implements effective delivery, student learning experience/opportunity and assessment.

Standard 3: Equality, diversity and fairness

All criteria relating to this standard are met.

The University aims to have an inclusive environment for the student and staff community to help all achieve their potential. The Faculty of Health Sciences and Wellbeing is comprised of a diverse staff and student community and there is considerable experience of working within a single equality scheme. There is also a Faculty level Equality, Diversity and Social Responsibility (EDSR) Group that meets quarterly, feeding in to the University EDSR; this group focuses on Faculty and School specific issues and has both staff and student representation from each School in the Faculty, including a School representative who is the point of contact for students and staff to raise concerns. The University has a commitment to monitor the equality and diversity profile of staff and students, to capture and analyse recruitment and selection applications and outcomes and monitor student attainment to identify areas of concern with respect to equality and diversity policies, and publishes a comprehensive Equality and Diversity Annual Report which includes information on the School's equality and diversity activities, progress against the Equality and Diversity Action Plan and equality profile data analysis on the staff and student population; this includes data on students with disabilities. The OSPAP has a diverse range of students who interact with culturally diverse patient groups and professionals. There is now use of a broader spectrum of patients than that used originally. The teaching team is looking carefully at the language used in teaching materials and the previously ubiquitous English patient names have now been replaced by the use of initials. OSPAP students are introduced to the Equality Act 2010 and University equality and diversity policies and procedures in teaching on ethical dilemmas. NHS values are discussed in the law teaching and there is an attempt to introduce OSPAP students to patient groups that experience prejudice. All staff members attend induction sessions when they first join the University, where they are given training with regards to equality, diversity and fairness, and all staff involved in selection of new staff members are required to attend University of Sunderland Fair and Effective Recruitment and Selection training. Aspects of equality and diversity training are developed in the professional practice modules with a particular emphasis on unconscious bias, and are fully integrated into case studies and ethical dilemmas and appear in various elements of the OSPAP teaching programme with a particular emphasis on unconscious bias. Placement providers are required to demonstrate that they support the principles of equality and diversity, in accordance with the Equality Act 2010 and this obligation forms part of the Service Level Agreement.

Standard 4: Selection of students

All criteria relating to this standard are met.

To apply for the OSPAP, prospective students must first successfully complete the GPhC eligibility process after which the University will be informed. Amongst the documents required is a letter confirming Registration and Good Standing, which confirms eligibility to register and that the applicant is in good standing with the registration authorities and no adverse information is known about them. A completed application form is reviewed by the admissions department and programme admissions team; offer letters and any visa guidance information are then issued, as appropriate. Students eligible to apply for the UoS OSPAP must do so within a period of 2 years from the date of the GPhC eligibility decision. There are no costs associated with the University application process in that the University covers the cost of Disclosure and Barring Service (DBS) processing costs for all applicants to the OSPAP. There are a number of specific University and Faculty Open Days dedicated to applicants for postgraduate study; beyond this, the programme team is also available by appointment on an individual basis to discuss the programme and application process. Professional requirements are screened with the prerequisite of providing letters of registration and good standing and provision of two references from academic and/or professional sources enabling the School to make safer recruitment decisions by identifying OSPAP applicants who may be unsuitable for certain activities, including off-site placements. OSPAP students are given a diagnostic numeracy test during induction week and may be given support, as appropriate, to improve their numeracy. The OSPAP is specifically designed to ensure that students are continually revisiting, revising and practising their numeracy skills within all modules. Applicants must satisfy English

language requirements by a recent pass of the academic version of International English Language testing System (IELTS) with an overall score of at least 7 and with no score less than 7 in each of the four areas of reading, writing, listening and speaking at one sitting of the test. OSPAP students told the team that in general the admissions process had been smooth although there had been some miscommunication with and inaccurate information from the GPhC.

Standard 5: Curriculum delivery and student experience

All criteria relating to this standard are met.

The OSPAP programme remains the same as at the previous reaccreditation in 2015, comprising two 60-credit modules, Clinical Therapeutics, and Pharmacy Law, Ethics and Practice after which candidates graduate with the GPhC-registered OSPAP qualification and are eligible to undertake pre-registration training. Students can also undertake a 60-credit Research Project module leading to an MSc in Pharmaceutical Sciences for OSPAP. OSPAP students considered that the first week of induction had been extremely useful in explaining how the programme was organised. The central aim of the OSPAP curriculum design is to ensure integration between all elements of teaching and assessment. This includes pharmaceutical chemistry, pharmaceuticals and pharmacological aspects of science underpinning the clinical, legal, ethical and professional aspects of practice. This is achieved by introducing scientific concepts, typically *via* lectures and seminars/workshops, which are contextualised through workshops, seminars, PBL, case studies, clinical skills and simulated pharmacy classes. The timetable is structured such that academic material is delivered and learned in a coherent sequence, so that students critically review and apply material from their previous experiences. As OSPAP students have completed a pharmacy qualification that has equipped them with the fundamental knowledge and expertise to practise in their country of qualification, the OSPAP is designed to revise, enhance, develop and update these concepts within the holistic view of the pharmacy profession. The two taught modules are taught concurrently throughout the academic year with many shared and related topics that inform and support each other. Both taught modules commence with overview and introduction outlining the overall aims for each individual module and how each interrelates. Initially, modules begin with revision of underpinning foundation material followed by subsequent introduction of more recent, research-informed and/or evidence-based practice and therapeutics. OSPAP students interviewed appreciated the value of the clinical-based teaching but questioned the value to them of some of the research-based scientific elements of the programme. Throughout the clinical skills sessions, emphasis is placed upon the development of decision-making, clinical reasoning, communication and practical consultation skills. Students learn consultation skills to assess minor ailments, focusing on the evaluation of symptoms, identification of serious or 'red-flag' symptoms, instances when referral is warranted and appropriate treatment strategies. There is emphasis on OSPAP students' ability to communicate appropriately and sensitively with patients, and maintain patient confidentiality. There is an established placement programme delivered through collaboration with a range of partner organisations including NHS trusts, primary care providers, community pharmacy and specialist sector organisations. The placements help to contextualise OSPAP student learning in practice and to gain experience of communicating with patients and other healthcare professionals in a work-based environment. OSPAP students complete a reflective portfolio for both modules addressing competencies achieved whilst on placement. Standardised patients support the teaching of communication and professionalism and supplement the teaching of specific therapeutic areas with patient-led sessions delivered by standardised patients or carers with the disease states taught and assessed in the modules. Standardised patients are used in OSCE assessments and a new development for the programme is the incorporation of feedback from patients, as part of the multisource feedback strategy, in the student's reflective portfolio. Current interprofessional education (IPE) activity involves OSPAP students working with students from medical and adult nursing programmes. The OSPAP assessment approach centres on the principle of integration to ensure that

students are required to apply integrated knowledge to complete assessments. Assessment is made using a variety of methods requiring excellent written and verbal communication skills. Students are required to orally present information from very early on in the programme in order to promote effective and confident communication skills. Assessment will move away from presentation skills to assessment scenarios where students are required to give direction to patients or colleagues, make decisions or to debate and defend an argument. The ability to communicate with patients is carried out through OSCEs and interactions with standardised patients and/or simulators. The OSPAP has a number of programme-specific regulations which are different to, and more stringent than, the University generic assessment regulations for postgraduate programmes, including that all assessments from each module must be passed, and each module must be passed to complete the OSPAP course, and with no compensation allowed between elements of assessment within a module. OSPAP students interviewed told the team that the programme had been more extensive than they had expected, essentially condensing four years of outcomes into a single year and being extremely stressful. However, students told the team that they felt well prepared for the pre-registration year and felt that they could not have embarked on the year and its assessment without undertaking the OSPAP.

Standard 6: Support and development for students

All criteria relating to this standard are met.

OSPAP students are offered a range of academic and personal support ranging from induction on arrival at University to on-going pastoral and personal tuition, undertaking personal development planning and advice on careers and employability. The University provides a range of professional support services including health and wellbeing, counselling, disability support, and a chaplaincy. Language and numeracy support is available centrally throughout the academic year should it be necessary, helping to support students with any difficulties. There is also an International Office which supports OSPAP students with, for example, visa issues. Each OSPAP student is allocated an academic as personal tutor to provide pastoral support and signposting in the development of individual learning needs. This pastoral support mechanism is used widely by students, especially with issues based on culture, communication and integration. OSPAP students told the team that tutors were a useful point of call. Additionally, the Gateway provides assistance to students and links closely to the Programme Support team and academic staff to ensure that students are directed to the correct support service, as quickly as possible, minimising any impact on their studies. The OSPAP has minimum attendance requirements to foster professional values, attitudes and behaviours. Student attendance is monitored by Academic Registry with weekly reports provided to academic tutors and the Programme Leader. Pastoral support through Student Journey and/or academic staff is provided to understand issues with student engagement and promote attendance requirements. Persistent poor attendance can be escalated to Fitness to Practice and ultimately student withdrawal, although the team was told that there have been no problems with OSPAP student engagement with the programme. The team was told that it is difficult for OSPAP students to apply for pre-registration places through Oriel due to timing issues relating to the closing date for applications, but that the School can provide support at the offering stage, and that all the current OSPAP students have obtained pre-registration places in community pharmacy. Students unable to continue on the OSPAP for whatever reason, or considering progressing onto a different career path after graduation, are supported by academic staff and Sunderland Futures to make informed decisions about their future aspirations and the value of their exit award.

Standard 7: Support and development for academic staff

All criteria relating to this standard are met.

The University's Academic Review and Development Framework annual appraisal process provides an overarching mechanism through which the training, support and performance of academic staff is continually supported, reviewed and delivered. Appraisals are conducted as a collaborative approach between the member of academic staff and their line manager. A range of staff development opportunities exist through a core programme of activities within the University targeted to help the development of all staff activities including learning and teaching, assessment, research, administration, management and health and safety. Specific training is also supported outside the University; for example, attendance at relevant training courses and conferences (scientific, education and professional practice) to develop discipline specific skills; a central Faculty budget is maintained for such professional development opportunities. Peer observation of teaching operates as a purely developmental process, not part of appraisal or performance management, designed to assist both the observer and the colleague observed in considering, supporting and promoting good practice and informally identifying requirements for professional development. All new staff members undergo a generic induction programme regardless of job description and full-time equivalence of appointment. Within the Faculty, line managers are responsible for ensuring that there is a specific, tailored induction programme relevant to School and Faculty. Induction is normally structured around orientation, activities and operations and more specifically the employee's role and expectations and any relevant initial training and development needs. The induction process forms one component of the formal probation process where the line manager agrees roles, objectives and staff development requirements for a new member of staff. Orientation to the profession and practice of pharmacy is carried out by one of our registered pharmacy practice staff. Non-pharmacist members of staff are supported to understand, deliver and develop teaching resources to emphasise the integrated pharmaceutical aspects and use relevant teaching examples and contextualisation. Academic staff members take responsibility for mentoring newly appointed staff, supporting integration into the School, Faculty and University as well as offering support and direction in teaching and research. The School is organised into two academic staff teams; Pharmacy Practice & Clinical Therapeutics, and Pharmaceutical Sciences, each with a team leader responsible for line management of all staff within their respective teams, including associated academic tutors and teacher-practitioners. An Academic Workload Planning Framework provides a structure and a series of principles designed to enable an equitable, transparent and consistent approach to the allocation and management of academic staff workloads within Faculties across the University. Academic workload is agreed between members of staff and their team leader and is reflected upon throughout the academic year as changes to working patterns occur.

Standard 8: Management of an OSPAP

All criteria relating to this standard are met.

The Head of School has ultimate responsibility for all programmes in the School of Pharmacy and Pharmaceutical Sciences. The OSPAP Programme Leader is directly responsible for the day-to-day running of the programme; coordination and delivery of the OSPAP is further supported by three Module Leaders, the Admissions Tutor and Placement Co-ordinator. Line management responsibility for all teaching staff within the School lies with the two team leaders. A member of staff is responsible for the development and management of interprofessional education and patient-centred activities on the programme. University Fitness to Practise is led by the Professor of Nursing and Continuing Professional Development, with a School nominated MPharm/OSPAP Fitness to Practise lead. The OSPAP is supported by a Programme Administrator who coordinates all administrative matters. Placement activity is supported by the placement administrators. Academic technical support is managed for the Faculty by a Technical Operations Manager through discipline-specific team leaders and associated staff. The OSPAP operates under the University Academic Regulations for Postgraduate Programmes and OSPAP Programme Specific Regulations. The programme is managed and quality assured through the University's standard processes. A new VLE (Canvas), managed by Centre for Enhancement of Learning and Teaching (CELT) has been introduced for the 2017-18 academic year; the new programme utilises the capabilities of Canvas, with dedicated module and programme spaces and enhanced functionality

compared to the previous VLE. There are systems in place to monitor attendance at all classes using an attendance monitoring system (TDS) that provides real time student attendance monitoring data, requiring students to swipe into timetabled sessions using University Student Cards.

Standard 9: Resources and capacity

All criteria relating to this standard are met.

The University is the only OSPAP provider in the North and, therefore, offers a regional market provision. Although the OSPAP student numbers declined a few years ago, the School has continued to successfully recruit students in viable numbers from the region, nationally and internationally with 35 OSPAP students in 2017-18, and the University remains committed to delivering an OSPAP with a target of 24 students for the next three academic years. There has been significant investment over recent years in completing Phase I and Phase II of the Sciences Complex and purchase and redevelopment of Shackleton House, plus there is the upcoming Phase III development of the Sciences Complex for which financial support has recently been confirmed with work beginning in January 2019 for completion in September 2019. This will be complemented by additional associated capital equipment expenditure. The aim is to create an infrastructure to support and enhance the capability to deliver growth in patient-centred teaching aligned with the future structure of regional, national and international healthcare systems. The continued approach to integrating elements of all the health-based programmes has resulted in an efficient use of specialist facilities and offers opportunity for shared interdisciplinary learning and training opportunities, with OSPAP teaching being fully integrated into the refurbished teaching environment. Completion of Phase 3 development will conclude current redevelopment of the Sciences Complex buildings. The University undertakes an annual planning cycle resulting in an agreed rolling budget for the following three financial years. The Faculty budget is negotiated between the Academic Dean, Director of Finance and the University's Executive Board. Three year rolling student intake targets are agreed with the University Executive Board in January and are used to inform the budgeting cycle. The financial budget is held at a Faculty Level and is allocated to various lines of expenditure including staff spend, including academic pharmacist practitioners, service level agreements and academic tutor staff, non-staff spend, placement provision, capital expenditure, etcetera. Expenditure is managed through Financial Services with all expenditure against the Faculty budget currently authorised by the Dean of Faculty. The Faculty of Health Sciences and Wellbeing currently comprises the Dean of Faculty, four Heads of School, eight Team Leaders, and 139 academic staff comprising five Professors, eight Readers, eight Principal Lecturers, 98 Senior Lecturers (2 additional new starts 1/08/2018) and seven Lecturers. Within this resource, there are 20 GPhC-registered pharmacists and three staff who hold a non-UK pharmacy degree as part of the permanent academic staff; the contracted external practitioners constitute 11 registered pharmacists, one pharmacy technician and two pre-registration trainees. There are also a number of other external practitioners utilised on an *ad hoc* basis to deliver speciality classes. The OSPAP programme is primarily taught by staff from within the School of Pharmacy and Pharmaceutical Sciences encompassing the Pharmacy Practice and Clinical Therapeutics Team and the Pharmaceutical Sciences Team with additional support from other staff within the Faculty. Research-active staff members contribute to the learning and teaching experiences of students, ensuring that most topics are delivered by experts in the field and that students meet not only current standards and knowledge, but are also introduced to new and future developments. Staff from the School of Nursing and Health Sciences offer support regarding the clinical content of the OSPAP programme; this is managed through a dedicated Senior Lecturer in Clinical Skills, of paramedic background, in the Pharmacy Practice and Clinical Therapeutics Team with a further appointment to be made late in 2018. The clinical skills components are broad and cover a range of skills from the basics to more advanced patient examination and assessment. OSPAP students interviewed told the team that they had not experienced any problems with the resources available to them. Thus, they had experienced no difficulty in accessing the necessary journals, the VLE had proved useful and they appreciated the value and usefulness of the excellent clinical and simulation facilities.

Standard 10: Outcomes

The team was satisfied that all 58 outcomes relating to Standard 10 are delivered at the appropriate level.

The team had scrutinised the learning outcomes in discussions with the staff in meeting 4. Rather than examining each of the 58 outcomes, four outcomes (10.1.h, 10.2.1.d, 10.2.4.a, 10.2.3.l) had been selected for detailed discussion; the University of Sunderland staff members had been unaware of the outcomes to be discussed before the meeting. For each of the four outcomes scrutinised in detail, the evidence provided by the discussions with the staff, along with other evidence provided with the documentation, gave the team confidence that these outcomes will be met at the required level; the team was confident that all other outcomes will be similarly met. This view was supported by the documented material for each of the other outcomes, which had also been scrutinised by the team; other discussions in meeting 2, and during the MPharm reaccreditation, had also addressed many of these outcomes. Thus, the team was satisfied that standard 10 is met.

Indicative syllabus

The team was satisfied with the School's use of the Indicative Syllabus to inform its curriculum

The team agreed that the OSPAP met the requirements of Directive 2005/36/EC of the European Parliament and of the Council on the recognition of professional qualifications for an OSPAP.

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 programme;
 - b. ownership or management structure of the institution;
 - c. resources and/or funding;

- d. student numbers and/or admissions policy;
 - e. any existing partnership, licensing or franchise agreement;
 - f. staff associated with the programme.
4. The provider must produce and submit to the GPhC on an annual basis:
 - a. requested data on student numbers and progression and degree awards;
 - b. requested information about the extent of human and physical resources it enjoys for the delivery and support of the degree course.
 5. The provider must make students and potential students aware that successful completion of an accredited course is not a guarantee of a placement for a pre-registration year or of future employment as a pharmacist.
 6. The provider must make students and potential students aware of the existence and website address where they can view the GPhC's accreditation reports and the timescales for future accreditations.
 7. Whenever required to do so by the GPhC, providers must give such information and assistance as the GPhC may reasonably require in connection with the exercise of its functions. Any information in relation to fulfilment of these standing conditions must be provided in a proactive and timely manner.

Appendix 2 – Standards

GPhC standards for the education and training of non-EEA pharmacists wanting to register in Great Britain

Standard 1: Patient and public safety

1. There must be clear procedures to address concerns about patient safety arising from pharmacy education and training. Concerns must be addressed immediately.

1.1 There must be effective systems in place to ensure that students:

- 1.1.a** do not jeopardise patient safety;
- 1.1.b** only do tasks for which they are competent, sometimes under supervision;
- 1.1.c** are monitored and assessed to ensure they always practise safely. Causes for concern should be addressed immediately;
- 1.1.d** have access to support for health, conduct and academic issues;
- 1.1.e** must not be awarded an accredited OSPAP if they might pose a risk to patients or the public;
- 1.1.f** understand what is and what is not professional behaviour and are familiar with the GPhC's *standards for pharmacy professionals (2017)*;
- 1.1.g** understand what fitness to practise mechanisms apply to them. All schools of pharmacy must have fitness to practise procedures to deal with student causes for concern;
- 1.1.h** undergo required health and good character checks;
- 1.1.i** understand that it is an offence to impersonate a pharmacist. Pharmacists are registrants of the GPhC.

Standard 2: Monitoring, review and evaluation of an OSPAP

2. The quality of an OSPAP must be monitored, reviewed and evaluated in a systematic and developmental way.

2.1 There must be systems and policies in place covering:

- 2.1.a** information about roles and responsibilities and lines of accountability;
- 2.1.b** university information on:
 - 2.1.b.i** entry requirements;
 - 2.1.b.ii** the quality of teaching, learning and assessment;
 - 2.1.b.iii** the quality of placements and other practice learning opportunities;
 - 2.1.b.iv** appraisal and feedback systems for students;
 - 2.1.b.v** supervision requirements;
 - 2.1.b.vi** educational resources and capacity;

These must be monitored, reviewed and evaluated systematically. When an issue is identified it must be documented and dealt with promptly.

Standard 3: Equality, diversity and fairness

3. OSPAPs must be based on principles of equality, diversity and fairness. It must meet the requirements of all relevant legislation.

3.1 Systems and policies for capturing equality and diversity data. Concerns should be documented,

addressed and disseminated;

3.2 Strategies for staff training in equality and diversity

Standard 4: Selection of students

4. Selection processes must be open, fair and comply with relevant legislation. Processes must ensure students are fit to practise at the point of selection. Selection includes recruitment and admissions.

4.1 Selection process must give applicants the information they need to make an informed application.

4.2 Selection criteria must be explicit. They should include:

4.2.a meeting the GPhC's adjudication requirements;

4.2.b meeting academic and professional entry requirements;

4.2.c meeting numeracy requirements;

4.2.d recognizing prior learning, where that is appropriate.

4.3 Selectors should apply selection criteria fairly. They should be trained to do this. Training should include equality and diversity matters

Standard 5: Curriculum delivery and the student experience

5. The curriculum for OSPAPs must deliver the outcomes in Standard 10. Most importantly, curricula must ensure students practise safely and effectively. To ensure this, pass criteria must describe safe and effective practice.

5.1 Curricula must be integrated. By this the GPhC does not mean that an OSPAP and pre-registration training must be delivered as single two tier course, but that the component parts of an OSPAP must be linked in a coherent way.

5.2 Curricula must be progressive, dealing with issues in an increasing more complex way until the right level of understanding is reached.

5.3 An OSPAP must be delivered in an environment which places study in a professional and academic context and requires students to conduct themselves professionally.

5.4 An OSPAP must be delivered in an environment informed by research. This means that whether or not all staff are engaged in research, their teaching must be informed by research.

5.5 An OSPAP teaching and learning strategy must set out how students will achieve the outcomes in Standard 10. Learning opportunities must be structured to provide:

5.5.a an integrated experience of relevant science and pharmacy practice;

5.5.b a balance of theory and practice;

5.5.c independent learning skills.

5.6 The OSPAP curriculum must include practical experience of working with patients, carers and other healthcare professionals. We are not suggesting that off-site placement visits are the only way to achieve this. Schools should articulate their strategy for meeting this criterion, which may include off-site placement visits, using patients, carers and other healthcare professions in-class and simulations.

5.7 There must be a clear assessment strategy for the OSPAP. Assessment methods must measure the outcomes in Standard 10.

5.8 The OSPAP assessment strategy should include:

5.8.a diagnostic assessments;

5.8.b formative assessments;

5.8.c summative assessments;

5.8.d timely feedback.

5.9 Academic regulations must be appropriate for a postgraduate qualification that is both academic and professional and may lead to further professional training. As a general principle, all assessments must be passed. This means that condonation, compensation, trailing, extended re-sit opportunities and other remedial measures should be extremely limited, if they are permitted at all. Course academic regulations may be more stringent than university norms. This may include higher than

usual pass marks for assessments demonstrating knowledge and skills essential to safe and effective pharmacy practice.

- 5.10** Marking criteria must be used for all assessments and all pass criteria must reflect safe and effective practice.
- 5.11** Patient safety must be paramount in assessments: any evidence of an assessment demonstrating unsafe practise must result in failure.
- 5.12** OSPAPs must include an induction programme orientating students to study in the UK. The programme should include diagnostic testing.

Standard 6: Support and development for students

6. Students must be supported to develop as learners and professionals during their OSPAP.

- 6.1** A range of mechanisms must be in place to support students to develop as learners and professionals.

Standard 7: Support and development for academic staff

7. Anyone delivering an OSPAP should be supported to develop in their professional roles.

- 7.1.** There must be a range of mechanisms in place to support anyone delivering an OSPAP to develop in their role.
- 7.2.** Induction programmes are provided for and university staff as appropriate. This should include induction programmes for non-pharmacists working on OSPAP.
- 7.3.** Everyone involved in delivering the curriculum should have:
 - 7.3.a** effective supervision;
 - 7.3.b** an appropriate and realistic workload;
 - 7.3.c** effective personal support;
 - 7.3.d** mentoring;
 - 7.3.e** time to learn;
 - 7.3.f** continuing professional development opportunities.

Standard 8: Management of an OSPAP

8. An OSPAP must be planned and maintained through transparent processes which must show who is responsible for what.

- 8.1.** All OSPAPs must be supported by a defined management plan with:
 - 8.1.a** a schedule of responsibilities
 - 8.1.b** defined structures and processes to manage the delivery of an OSPAP

Standard 9: Resources and capacity

9. Resources and capacity are sufficient to deliver outcomes.

- 9.1** There must be:
 - 9.1.a** robust and transparent mechanisms for securing an appropriate level of resource for delivering an accreditable OSPAP;
 - 9.1.b** sufficient staff from relevant disciplines to deliver the curriculum to students. Staff must be appropriately qualified and experienced. The staffing profile must include:
 - 9.1.b.i** sufficient numbers of pharmacists – registrants of the GPhC – with experience of teaching in higher education to ensure that an OSPAP can produce students equipped to enter pharmacist pre-registration training in Great Britain.

- 9.1.b.ii sufficient numbers of pharmacists to act as tutors and professional mentors at university. Not all personal tutors must be pharmacists.
- 9.1.b.iii pharmacists who are leaders in the profession and in their university, who can influence university policy relevant to pharmacy
- 9.1.b.iv non-pharmacist academics who can influence school and university policy relevant to pharmacy
- 9.1.b.v staff who are sufficiently experienced to supervise research. It would be unusual for anyone to supervise research at a particular level unless they had researched to that level or beyond. New research supervisors must be mentored and signed off as being fit to supervise after a period of mentoring
- 9.1.b.vi science academics who understand the relevance of their discipline to pharmacy and deliver their area of expertise in a pharmaceutical context
- 9.1.b.vii academic pharmacists and other experienced pharmacy staff who are able to act as mentors to non-pharmacist colleagues
- 9.1.c career pathways in universities for all staff teaching on OSPAPs, including pathways for practice staff
- 9.1.d clear lines of authority and responsibility for the strategic organisation and day-to-day management of placements;
- 9.1.e training and ongoing support for all non-pharmacists involved in the delivery of OSPAPs, which must help them understand:
 - 9.1.f.i help and understand the relevance of their work to pharmacy
 - 9.1.f.ii how to deliver their area of expertise in a pharmaceutical context
- 9.1.f appropriate learning resources
- 9.1.g accommodation and learning resources that are fit for purpose

Standard 10: Outcomes for non-EEA pharmacists wanting to register in Great Britain

10.1 Expectations of a pharmacy professional

Learning outcome	OSPAP	Pre-reg (for reference only)
10.1.a Recognise ethical dilemmas & respond in accordance with relevant codes of conduct and behaviour	Shows how	Does
10.1.b Recognise the duty to take action if a colleague's health, performance or conduct is putting patients or public at risk	Knows how	Knows how
10.1.c Recognise personal health needs, consult and follow the advice of a suitably qualified professional, and protect patients or public from any risk posed by personal health	Does	Does
10.1.d Apply the principles of clinical governance in practice	Knows how	Does
10.1.e Demonstrate how the science of pharmacy is applied in the design and development of medicines and devices	Shows how	Knows how
10.1.f Contribute to the education and training of other members of the team, including peer review and assessment	Shows how	Does
10.1.g Contribute to the development of other members of the team through coaching and feedback	Knows how	Shows how
10.1.h Engage in multidisciplinary team working	Knows how	Does
10.1.i Respond appropriately to medical emergencies, including provision of first aid	Knows how	Shows how

10.2 The skills required in practice

10.2.1 Implementing health policy

Learning outcome	OSPAP	Pre-reg (for reference only)
10.2.1.a Promote healthy lifestyles by facilitating access to and understanding of health promotion information	Shows how	Does
10.2.1.b Access & critically evaluate evidence to support safe, rational & cost effective use of medicines	Shows how	Does
10.2.1.c Use the evidence base to review current practice	Shows how	Show how
10.2.1.d Apply knowledge of current pharmacy-related policy to improve health outcomes	Knows how	Shows how
10.2.1.e Collaborate with patients, the public and other healthcare professionals to improve patient outcomes	Knows how	Does
10.2.1.f Play an active role with public and professional groups to promote improved health outcomes	Knows how	Knows how
10.2.1.g Contribute to research & development activities to improve health outcomes	Knows how	Knows how
10.2.1.h Provide evidence- based medicines information	Shows how	Does

10.2.2 Validating therapeutic approaches and supplies prescribed and over-the-counter medicines

Learning outcome	OSPAP	Pre-reg (for reference only)
10.2.2.a Identify and employ the appropriate diagnostic or physiological testing techniques in order to promote health	Knows how	Shows how
10.2.2.b Identify inappropriate health behaviours and recommend suitable approaches to interventions	Shows how	Does
10.2.2.c Instruct patients in the safe and effective use of their medicines and devices	Shows how	Does
10.2.2.d Analyse prescriptions for validity and clarity	Shows how	Does
10.2.2.e Clinically evaluate the appropriateness of prescribed medicines	Shows how	Does
10.2.2.f Provide, monitor and modify prescribed treatment to maximise health outcomes	Shows how	Does
10.2.2.g Communicate with patients about their prescribed treatment	Shows how	Does
10.2.2.h Optimise treatment for individual patient needs in collaboration with the prescriber	Shows how	Does
10.2.2.i Record, maintain and store patient data	Shows how	Does
10.2.2.j Supply medicines safely and efficiently, consistently within legal requirements and best professional practice. NB This should be demonstrated in relation to both human and veterinary medicines.	Shows how	Does

10.2.3 Ensuring safe and effective systems are in place to manage risk inherent in the practice of pharmacy and the delivery of pharmaceutical services

Learning outcome	OSPAP	Pre-reg (for reference only)
10.2.3.a Ensure quality of ingredients to produce medicines and products	-	Shows how
10.2.3.b Apply pharmaceutical principles to the formulation, preparation and packaging of products	Shows how	Shows how
10.2.3.c Verify safety and accuracy utilising pharmaceutical calculations	Does	Does
10.2.3.d Develop quality management systems including maintaining	Shows how	Shows how

appropriate records		
10.2.3.e Manage and maintain quality management systems including maintaining appropriate records	Shows how	<i>Does</i>
10.2.3.f Procure and store medicines and other pharmaceutical products working within a quality assurance framework	Knows how	<i>Does</i>
10.2.3.g Distribute medicines safely, legally and effectively	Knows how	<i>Does</i>
10.2.3.h Dispose of medicines safely, legally and effectively	Knows how	<i>Does</i>
10.2.3.i Manage resources in order to ensure work flow and minimise risk in the workplace	Knows how	<i>Shows how</i>
10.2.3.j Take personal responsibility for health and safety	Does	<i>Does</i>
10.2.3.k Work effectively within teams to ensure safe and effective systems are being followed	Knows how	<i>Does</i>
10.2.3.l Ensure the application of appropriate infection control measures	Shows how	<i>Does</i>
10.2.3.m Supervise others involved in service delivery	Knows how	<i>Does</i>
10.2.3.n Identify, report and prevent errors and unsafe practice	Shows how	<i>Does</i>
10.2.3.o Procure, store and dispense and supply veterinary medicines safely and legally	Knows how	<i>Knows how</i>

10.2.4 Working with patients and the public

Learning outcome	OSPAP	<i>Pre-reg (for reference only)</i>
10.2.4.a Establish and maintain patient relationships while identifying patients' desired health outcomes and priorities	Shows how	<i>Does</i>
10.2.4.b Obtain and record relevant patient medical, social and family history	Shows how	<i>Does</i>
10.2.4.c Identify and employ the appropriate diagnostic or physiological testing techniques to inform clinical decision making	Knows how	<i>Shows how</i>
10.2.4.d Communicate information about available options in a way which promotes understanding	Shows how	<i>Does</i>
10.2.4.e Support the patient in choosing an option by listening and responding to their concerns and respecting their decisions	Shows how	<i>Does</i>
10.2.4.f Conclude consultation to ensure a satisfactory outcome	Shows how	<i>Does</i>
10.2.4.g Maintain accurate and comprehensive consultation records	Shows how	<i>Does</i>
10.2.4.h Provide accurate written or oral information appropriate to the needs of patients, the public or other healthcare professionals	Shows how	<i>Does</i>

10.2.5 Maintaining and improving professional performance

Learning outcome	OSPAP	<i>Pre-reg (for reference only)</i>
10.2.5.a Demonstrate the characteristics of a prospective professional pharmacist as set out in relevant codes of conduct and behaviour	Does	<i>Does</i>
10.2.5.b Reflect on personal and professional approaches to practice	Does	<i>Does</i>
10.2.5.c Create and implement a personal development plan	Does	<i>Does</i>
10.2.5.d Review and reflect on evidence to monitor performance and revise professional development plan	Does	<i>Does</i>
10.2.5.e Participate in audit and in implementing recommendations	Knows how	<i>Shows how</i>
10.2.5.f Contribute to identifying learning and development needs of team members	Knows how	<i>Does</i>

10.2.5.g Contribute to the development and support of individuals and teams	Knows how	<i>Does</i>
10.2.5.h Anticipate and lead change	Knows how	<i>Shows how</i>

Appendix 3 – Indicative syllabus

It is expected that education providers will use the indicative syllabus to develop a detailed programme of study which will enable pharmacists to meet the learning outcomes.

A1.1 How medicines work

Therapeutics

- Routes of administration
- New therapeutic advances
- Infection control
- Complementary therapies
- Clinical therapeutic uses of drugs

Applied Physical, Chemical and Biological sciences

- Sources and purification of medicinal substances
- Physicochemical characteristics of drugs and biological systems
- Thermodynamics and chemical kinetics
- (Bio)Analytical principles and methods
- Drug design and discovery
- Cell and molecular biology
- Biochemistry
- Genetics
- Microbiology
- Immunology
- Pharmaceutical chemistry
- Drug identification
- Drug synthesis

Pharmacology, pharmacokinetics & pharmacodynamics

- Contraindications, adverse reactions and drug interactions
- ADME
- Prediction of drug properties
- Pharmacogenetics and pharmacogenomics
- Drug and substance misuse
- Clinical toxicology and drug-over-exposure
- Molecular basis of drug action
- Metabolism

Pharmaceutical technology including manufacturing & engineering science

- Biotechnology
- Manufacturing methods
- Quality assurance processes
- Sterilisation and asepsis
- Environmental control in manufacturing

Formulation and material science

- Materials used in formulations and devices
- Biopharmaceutics, developmental pharmaceuticals, pre-formulation and formulation studies
- Design and standardization of medicines
- Microbiological contamination
- Contamination control
- Product stability
- Medical devices

A1.2 How people work

Normal & abnormal structure & function

- Nutrition
- Physiology
- Pathology
- Infective processes

Sociology

- Social and behavioural science

Health psychology

- Health promotion
- Disease prevention
- Behavioural medicine

Objective diagnosis

- Differential diagnosis
- Symptom recognition
- Diagnostic tests

Epidemiology

- Aetiology and epidemiology of (major) diseases

A1.3 How systems work

Healthcare management

- Public health
- Organisations: NHS, DH, govt priorities
- Other professionals
- Health care systems

Evidence-based practice

- Health information systems/ resources
- Health policy and (pharmaco)economics

Professional regulation

- Legislation
- Professional ethics and fitness to practise
- Sale and supply of medicines
- CPD
- Political and legal framework

Medicines regulation

- Evaluation and regulation of new drugs and medicines

- Pharmacopoeial specifications and biological standards
- Medicines licensing
- Product quality, safety and efficacy
- The supply chain
- Packaging, labelling and patient information

Clinical governance

- SOPs
- Research methodology / research ethics
- Risk & quality management
- Good manufacturing/dispensing practice
- Good clinical practice
- Health policy, clinical and science research methods

Clinical management

- Disease management
- Chronic medicines management
- Medicines use review
- Care planning

Workplace Regulation

- Health & Safety
- Sexual boundaries
- Independent Safeguarding Authority
- Data protection
- FOIA
- Consumer protection incl. complaints procedures

A1.4 Core and transferable skills

Professionalism

Research and research methods

Critical appraisal

- Audit and learning from errors

Problem solving

- Study skills
- Team-working skills

Clinical decision making

- Leadership skills

Accurate record keeping

Reflective practice (incl. continuing professional development)

Effective communication

- Interpersonal skills
- Medical terminology

Interpret & interrogate clinical data

Analyse & use numerical data

Pharmaceutical numeracy

Technological literacy

A1.5 Attitudes and values

See the *GPhC Code of Conduct for pharmacy students (2010)* and *Standards of conduct, ethics and performance (2010)*

Appendix 2 - Supporting evidence

The University provided the following documentation in support of their submission:

Appendix 2 - Supporting evidence

The University provided the following documentation in support of its submission:

SUP001	Role Profile Senior Lecturer Pharmacy Practice (Charlotte Earl-Sinha, 2015)
SUP001	Role Profile Senior Lecturer Pharmacy Practice (Lynzie Middleton, 2017)
SUP002	Role Profile Senior Lecturer Pharmacy Practice (Carlie Robertshaw, 2017)
SUP003	Role Profile Senior Lecturer Pharmacy Practice (Callum Tierney, 2016)
SUP004	Role Profile Senior Lecturer Clinical Skills (Rob Goring, 2017)
SUP005	Role Profile Senior Lecturer Clinical Skills (to be advertised)
SUP006	Role Profile Senior Lecturer Medicinal Chemistry (Amit Nathubhai, start August 2018)
SUP007	Role Profile Senior Lecturer Pharmaceutical Chemistry (Dr Stephen Childs, 2017)
SUP008	Role Profile Senior Lecturer Pharmaceutical Chemistry (Dr Stephanie Myers, 2017)
SUP009	Role Profile Senior Lecturer Pharmaceutics (Dr Ahmed Faheem, 2015)
SUP010	Role Profile Senior Lecturer Biochemistry (Dr Shafiq Ahmed, 2015)
SUP011	Role Profile Senior Lecturer Pharmaceutical Microbiology (Callum Cooper start August 2018)
SUP012	Sunderland OSPAP Reaccreditation Report (July 2015)
SUP013	MPharm and OSPAP Programme Approval Report
SUP014	PgDip OSPAP Programme Specification
SUP015	PgDip OSPAP Programme Specific Regulations
SUP016	PgDip OSPAP SITS Form
SUP017	MSc OSPAP Programme Specification
SUP018	MSc OSPAP Programme Specific Regulations
SUP019	MSc OSPAP SITS Form
SUP020	PgDip and MSc OSPAP Programme Specific Assessment Criteria
SUP021	PgDip and MSc OSPAP Programme Handbook 2017
SUP022	MPHM14 Module Descriptor - Clinical Therapeutics
SUP023	MPHM14 Module Descriptor Appendix 1 - GPhC Standard 10 Outcomes
SUP024	MPHM14 Module Guide – Clinical Therapeutics 2017
SUP025	MPHM15 Module Descriptor - Pharmacy Law, Ethics and Practice
SUP026	MPHM15 Module Descriptor Appendix 1 - GPhC Standard 10 Outcomes
SUP027	MPHM15 Module Guide – Pharmacy Law, Ethics and Practice 2017
SUP028	MPHM16 Module Descriptor - Research Project
SUP029	MPHM16 Module Guide – Research Project 2017
SUP030	OSPAP Standard 10 Outcome Mapping
SUP031	University of Sunderland Postgraduate Academic Regulations

SUP032	Student Guide to the University Regulations
SUP033	University of Sunderland Generic Assessment Criteria
SUP034	OSPAP Pre-registration Destinations 2017
SUP035	University of Sunderland - Report of June 2017 GPhC Registration Assessment
SUP036	PTES Factsheet 2017
SUP037	GPhC Standards for Pharmacy Professionals
SUP038	Fitness to Practice Policy
SUP039	Fitness to Practice Student Guide
SUP040	Policy and Procedure for the Protection of Children and Vulnerable Adults
SUP041	Protecting Children and Vulnerable Adults - Code of Practice
SUP042	When to Refer – Safeguarding and Student Guide
SUP043	Fitness to Study Policy
SUP044	Fitness to Practice Induction Presentation
SUP045	Student Placements Handbook
SUP046	Health, Safety and Environment Training Procedure and Guidance
SUP047	Fire Safety Management Procedure
SUP048	First Aid at Work Guidance Note
SUP049	Faculty Safety, Health and Environment Group Terms of Reference
SUP050	Risk Assessment Management
SUP051	Risk Assessment and Scheme of Work
SUP052	Safe Working With Chemicals and Hazardous Substances (COSHH)
SUP053	COSHH Assessment Form
SUP054	Code of Practice for Biological Safety
SUP055	BioCoSHH Assessment Form
SUP056	General Notice - Laboratory Health and Safety Requirements
SUP057	Regulations for Consideration of Extenuating Circumstances
SUP058	Leave of Absence Policy
SUP059	Regulations Relating to the Exclusion of Students on Health Grounds
SUP060	Placement Provider Mentor Feedback
SUP061	Protecting Yourself When Using Social Networking - A Guide for Students
SUP062	Academic Misconduct Regulations
SUP063	Academic Integrity and Academic Misconduct - A Guide
SUP064	University Statement on the use of TurnItIn
SUP065	Health Declaration
SUP066	Self Declaration
SUP067	University of Sunderland Admissions Policy
SUP068	University Strategic Plan 2016-2021.
SUP069	Student Success Strategy 2017-2021
SUP070	University and Faculty Committee Structures
SUP071	Terms of Reference Academic Board
SUP072	Terms of Reference Student Success Committee
SUP073	Terms of Reference Quality Management Sub-Committee
SUP074	Terms of Reference Research and Innovation Committee
SUP075	Terms of Reference Postgraduate Research Degrees Sub-Committee
SUP076	Terms of Reference Academic Committee
SUP077	Terms of Reference Module and Programme Studies Boards
SUP078	Terms of Reference Module and Programme Assessment Boards
SUP079	Academic Registry Structure
SUP080	Finance Structure
SUP081	Sciences Academic Technical Services Structure
SUP082	Student Journey Structure
SUP083	Faculty of Health Sciences and Wellbeing Structure
SUP084	Academic Dean Role Profile
SUP085	Head of School Role Profile

SUP086	Team Leader - Pharmacy Practice and Clinical Therapeutics Role Profile
SUP087	Team Leader - Pharmaceutical Sciences Role Profile
SUP088	Master of Pharmacy Programme Leader Role Profile
SUP089	Centre for Enhancement of Learning and Teaching (CELT) - Learning, Teaching and Assessment Framework
SUP090	Framework for Academic Workloading
SUP091	GPhC OSPAP application form and guidance (December 2017)
SUP092	University of Sunderland Postgraduate Application Form
SUP093	Programme Approval Process
SUP094	Annual Review Process
SUP095	Periodic Review of Taught Programmes
SUP096	Procedure for Accreditation by PSRB
SUP097	External Examiner Policy
SUP098	External Examiner Induction Presentation
SUP099	External Examiners – A Guide for Students
SUP100	Student Representation and Feedback Policy
SUP101	Membership and Terms of Reference for SSLC's
SUP102	OSPAP Annual Programme Report 2014-15
SUP103	OSPAP Annual Programme Report 2015-16
SUP104	OSPAP Annual Programme Review 2016-17
SUP105	OSPAP Development Grid 2014-17
SUP106	OSPAP External Examiner Report 2014-15 (and response)
SUP107	OSPAP External Examiner Report 2015-16 (and response)
SUP108	OSPAP External Examiner Report 2016-17 (and response)
SUP109	Example Module and Programme Studies Board Minutes
SUP110	Example Staff Postgraduate Student Liaison Committee Minutes (2016 12 07)
SUP111	Example Staff Postgraduate Student Liaison Committee Minutes (2017 04 05)
SUP112	PTES Factsheet 2017 Supplement
SUP113	Work Based Learning and Placements
SUP114	Placement Provider Audit Template
SUP115	Placement Provider List
SUP116	OSPAP Experiential Learning
SUP117	SLA Template Community Pharmacy
SUP118	SLA Template Trusts
SUP119	SLA Template General Practice
SUP120	Placements Mentors Guide
SUP121	Placement Provider Student Feedback
SUP122	Placement Provider Meeting 2015
SUP123	Placement Provider Meeting 2016
SUP124	Placement Provider Meeting 2017
SUP125	University of Sunderland Assessment Policy
SUP126	University Feedback to Students on Assessed Work Policy
SUP127	Marking Policy
SUP128	Student Journey Programme Approval
SUP129	Single Equality Scheme Policy
SUP130	Faculty of Health Sciences and Wellbeing Equality, Diversity and Social Responsibility Group Constitution
SUP131	Equality and Diversity Policy Statement
SUP132	Equal Opportunities Policy
SUP133	Policy on Sexual Orientation
SUP134	Equal Pay Policy
SUP135	Dignity at Work Policy and Procedure
SUP136	HIV Staff Policy
SUP137	Transgender Staff Policy

SUP138	Transgender Student Policy
SUP139	Reasonable Adjustment Protocol and Procedure
SUP140	Disability Confident Employer Certificate
SUP141	Equality, Diversity and Social Responsibility Annual Report
SUP142	GPhC Annual Monitoring Data Return 2014-15
SUP143	GPhC Annual Monitoring Data Return 2015-16
SUP144	GPhC Annual Monitoring Data Return 2016-17
SUP145	New Staff Induction Guidance (Non-Manager)
SUP146	Induction Checklist for Inducting New Management Staff
SUP147	Sunderland University Postgraduate Prospectus
SUP148	Indicative OSPAP Teaching Timetable 2017-18
SUP149	Academic Staff Curriculum Vitae
SUP150	Teacher Practitioner and Academic Tutor Curriculum Vitae
SUP151	Sample Secondment Agreement
SUP152	University of Sunderland Research and Innovation Strategy 2017-21
SUP153	Research Active Curriculum
SUP154	Faculty of Health Sciences and Wellbeing Research Institute
SUP155	Placements External Stakeholder Event
SUP156	Strategy for Patient, Carer and Public Involvement (PCPI)
SUP157	Staff Guidance for Patient Carer Public Involvement (PCPI)
SUP158	Patient Carer and Public Involvement (PCPI) Consultation
SUP159	OSPAP Numeracy Diagnostic Test
SUP160	OSPAP Laboratory Manual Diagnostic Test
SUP161	OSPAP Laboratory Report Diagnostic Test
SUP162	OSPAP Microbiology Manual Diagnostic Test
SUP163	OSPAP Welcome Week – Induction Timetable 2017
SUP164	OSPAP Welcome Letter 2017
SUP165	PTES Student Briefing Presentation
SUP166	SurveyUS Student Briefing Presentation
SUP167	People Strategy: Excellence Through Our People
SUP168	Academic Staff Handbook
SUP169	Staff Recruitment Strategy
SUP170	Staff Recruitment and Selection Procedure
SUP171	Postgraduate Certificate in Academic Practice
SUP172	Review and Development Framework Guidance Notes for Academic Staff
SUP173	Your Appraisal and Development Review FAQs
SUP174	Peer Observation of Teaching
SUP175	Preparing to Teach at the University of Sunderland
SUP176	Induction – University Guide to Good Practice
SUP177	Managing Probation – Guidance Notes for Managers
SUP178	Probation Staff Guidance
SUP179	Academic Staff Probation Scheme
SUP180	Professional, Managerial, Support and Research Staff Probation Scheme
SUP181	Individual Research Plan
SUP182	Mentoring Policy and Framework
SUP183	Policy and Code of Practice for Work for External Clients & External Bodies and Exploitation of Intellectual Property
SUP184	Academic Sabbatical Leave Policy and Procedure
SUP185	Vice Chancellor's Teaching Fellowships
SUP186	Business Plan
SUP187	FHSW Plan (December 2017)
SUP188	Professorial and Readership Appointments Procedure
SUP189	Library and Study Skills Action Plan
SUP190	Campus Map

SUP191 Current Teaching Infrastructure
SUP192 Science Complex Developments
SUP193 Shackleton House Developments
SUP194 Living Lab
SUP195 Shackleton 3rd Floor
SUP196 Darwin Building and Fleming Building Basement Plans
SUP197 OSPAP Standard 10 Outcome Mapping