



Integrated 5-year  
Master of Pharmacy  
degree (MPharm)

University College London  
Report of a step 1 accreditation event  
June 2019

## Event summary and conclusions

<b>Provider</b>	University College London
<b>Course</b>	Master of Pharmacy degree (MPharm) (5-year Integrated programme)
<b>Event type</b>	Accreditation
<b>Step</b>	1
<b>Event date</b>	5-6 June 2019
<b>Accreditation period</b>	Working towards accreditation
<b>Outcome</b>	<p>Approval.</p> <p>The accreditation team agreed to recommend to the GPhC's Registrar that UCL's 5-year MPharm degree should be accredited provisionally without any conditions or recommendations. This means that UCL can progress from step 1 to step 2 of the process for accrediting new 5-year MPharm degrees and that students can be admitted in the 2019-2020 academic year.</p> <p>The step 2 visit will take place in the academic year prior to the first practice blocks being delivered and, among other matters, will look at recruitment to the 5-year course, student induction for placement blocks, a placement block training plan (the equivalent of the pre-registration training plan mentioned in 5.12 and 5.13 of the GPhC's initial education and training standards), the training of placement tutors, the accreditation of training sites and the status of clinical placement agreements.</p> <p>UCL must inform the GPhC when practice blocks will be delivered for the first time well in advance, so the step 2 visit can be arranged at an appropriate time.</p>
<b>Conditions</b>	There were no conditions
<b>Standing conditions</b>	Please refer to Appendix 1
<b>Recommendations</b>	There were no recommendations
<b>Registrar decision</b>	Following the event, the Registrar of the GPhC accepted the accreditation team's recommendation that the 5-year integrated pre-registration MPharm degree programme should be permitted to progress from step 1 to step 2 of the MPharm accreditation process.
<b>Key contact (provider)</b>	Dr Rebecca Lever (MPharm Programme Director); Professor Cate Whittlesea (Associate Director, Clinical Education)
<b>Accreditation team</b>	Professor Andy Husband (Team Leader) Professor of Clinical Pharmacy and Head of School Newcastle University

	<p>Professor Barrie Kellam, (Academic) Professor of Medicinal Chemistry, University of Nottingham</p> <p>Mrs Sandra Hall, (Academic) Retired, formerly Head of Pharmacy Practice, Leicester School of Pharmacy, De Montfort University</p> <p>Professor Paul Gard (Academic) Deputy Head of School, University of Brighton</p> <p>Mrs Gail Curphey, (Pharmacist) Pharmacy Consultant</p> <p>Ms Alia Ibrahim, (Pharmacist – recently registered) Community Locum Pharmacist</p> <p>Ms Susan Bradford, (Lay member) Non-Executive Director, South Western Ambulance Service NHS Foundation Trust, Solicitor (non-practising)</p>
<b>GPhC representative</b>	Mr Damian Day, Head of Education, General Pharmaceutical Council
<b>Rapporteur</b>	Professor Brian Furman, 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 as a pharmacist is a GPhC-accredited Master of Pharmacy degree course (MPharm). This accreditation event was carried out in accordance with the GPhC's 2011 MPharm Accreditation Methodology and the course was reviewed against the GPhC's 2011 education standards 'Future Pharmacists: Standards for the initial education and training of pharmacists'.

The GPhC's right to check the standards of pharmacy qualifications leading to annotation and registration as a pharmacist is the Pharmacy Order 2010. 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/uksi/2010/231/contents/made>

### Background

The University College London (UCL) MPharm programme is delivered by the School of Pharmacy, which is a specialist institution within the Faculty of Life Sciences in the School of Life and Medical Sciences. This 4-year MPharm programme was last reaccredited in 2013, for six years, with an interim visit after three years, without conditions or recommendations. It is on this foundation that the University is now proposing a new, 5-year integrated programme which will be targeted at non-EU students, especially those from Hong Kong, Singapore and Iran. The need for this arises from the changes in UK visa rules which effectively reduce opportunities for overseas MPharm graduates to remain in the UK to undertake pre-registration training. A 5-year programme that integrates pre-registration training with academic study will allow them to remain in the country on student visas. The process for accrediting an integrated, five-year degree built upon an established, accredited four-year programme, comprises four steps; the

completion of step 4 in year 5 of the programme also requires GPhC representatives to attend the examination board at the end of that year. A step 1 event was arranged for June 5-6 2019 and 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 was deemed to provide a satisfactory basis for discussion.

## Pre-visit

In advance of the main visit, a pre-visit meeting took place at University College London School of Pharmacy on 14 May 2019. 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 began with a private meeting of the accreditation team and GPhC representatives on 5 June 2019. The remainder of the event took place onsite at the School of Pharmacy, University College London on 6 June 2019, and comprised a series of meetings with members of staff of the University.

## Declarations of interest

Professor Barrie Kellam was a postdoctoral researcher at the School of Pharmacy between 1996 and 1997 and is currently external examiner for the UCL School of Pharmacy MSc in Drug Discovery. The team agreed that these did not constitute any conflict of interest, as neither activity was associated with the undergraduate MPharm programme.

## Key findings

### Standard 1: Patient and public safety

**The team was satisfied that all criteria relating to this standard will be met. (See Appendix 2 for criteria)**

The School has systems in place to ensure that students do not jeopardise patient safety; these start at the point of recruitment, where students will be expected to demonstrate that they will be able to meet UCL's institutional values, which include the provision of safe and effective patient care. An Enhanced Disclosure and Barring Service (DBS) clearance will be required as a condition of enrolment onto the Integrated 5-year MPharm programme, with those students who are normally resident outside the UK being required to provide a Certificate of Good Conduct from their home countries. Students will also be required to complete a Fitness to Practise self-declaration form, which will be renewed annually throughout their time on the course. They will not be allowed to attend clinical placements without occupational health clearance and, from 2019-20, compliance with DBS and occupational health processes will be a formal requirement for progression from year 1 to year 2 of the MPharm. Students will be introduced to professionalism and the GPhC 'Standards for Pharmacy Professionals', along with the concept of fitness to practise and the associated procedures, at the beginning of the programme; the understanding that patient safety is paramount will be impressed upon students and reinforced throughout. Students will be instructed in the safe completion of clinical tasks in simulated environments within the School and in the Green Light Pharmacy Education Centre; they will not be

permitted to have direct contact with the public or patients until they have demonstrated their competence in performing relevant tasks, and will be supervised by a registered pharmacist at all times during clinical placements. In assessments relating to patient safety, for example, during dispensing or patient counselling activities, the criteria will ensure that students will automatically fail if they make errors which, in real life, would cause harm to a patient. Students will be monitored during their placements, and the placement hosts will be requested to contact the School if there is any cause for concern in the performance or behaviour of a student. There will be clear pathways that enable the year 5 placement tutors to raise concerns about their students to the 5-year MPharm programme lead, as well as to the lead for the year 5 module.

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

**The team was satisfied that all criteria relating to this standard will be met.**

The Director of the UCL School of Pharmacy is responsible for all academic activities within the School, and reports to the Dean of the Faculty of Life Sciences, who in turn reports to the Vice Provost for Health; the Vice-Provost reports directly to the Provost. The quality of teaching, learning and assessment is monitored, reviewed and evaluated systematically, with appropriate actions being taken where issues are identified. In addition to external quality indicators, the quality of teaching, learning and assessment is monitored through a number of University-level mechanisms, these being the six-yearly Internal Quality Review, the Annual Student Experience Review (ASER) and the Annual Academic Review, the last dealing with approval of new programmes and modules, as well as with approval of any changes to existing programmes and modules. The ASER process comprises an annual 'health-check', drawing together monitoring activities, these being data reviews, external examiner reports, student surveys, and NSS action planning; data reviews cover the profile of the student body, admissions, progression, average attainment and final degree classification. All of these feed into an evaluative report, accompanied by a Development and Enhancement plan. The ASER is approved at Department (Divisional) and Faculty level before being considered by the Quality Review Sub-Committee of the UCL Education Committee. There are also internal School monitoring procedures dealt with by the School's Undergraduate Programmes Committee (UPC) which has oversight of the quality of teaching, learning and assessment within the MPharm programme. This committee reports to the School's Divisional Teaching Committee (DTC), which has overall responsibility for all academic programmes in the School. The Divisional Staff Student Consultative Committee (DSSCC) also reports directly to DTC and matters raised at its meetings, relevant to the MPharm, are additionally considered by UPC, along with feedback from the MPharm year leads. Feedback from students will be collected in a number of ways, including through the DSSCC, where students provide feedback to their representatives; actions agreed at the DSSCC will be monitored using a traffic-light style 'Action Tracker' that is available for students to view, along with minutes of the respective meetings. Students will also complete end-of-module and end-of-year surveys, individual staff teaching-delivery surveys, as well as providing feedback through anonymous portals and weekly MPharm drop-in surgeries.

During the first four years of the programme, students will undertake experiential learning placements in both community pharmacy and in hospital. The fifth year will comprise two, 26-week placements, one in community pharmacy and one in hospital, using existing partners with whom UCL has a longstanding relationship, and who have all been involved in developing the 5-year MPharm, including determining the activities to be undertaken during the fifth year, as well as the assessments. The hospital placement programme will be hosted by NHS hospital sites that are accredited as Postgraduate Diploma in General Pharmacy Practice (PGDipGPP) Training Centres, which undergo a robust accreditation process, typically with a 3 to 4-year re-accreditation cycle; this accreditation process will be extended to the community placement providers. The sole use of these centres for placements will provide continuity of quality assurance, in the knowledge that these sites have access to training skills and material, as well as sufficient resources. Agreements will be in place to ensure long-term commitment to the provision of placements and suitably qualified tutors and supervisors. Formal feedback from both students and

placement hosts will be collected each academic year to facilitate continuous monitoring and improvement of provision. All tutors for the 26-week placements will be part of the UCL team and will sign off on the students' competencies in collaboration with UCL; they will also review their attitudes and behaviour, with the School undertaking the final sign-off.

### Standard 3: Equality, diversity and fairness

**The team was satisfied that all criteria relating to this standard will be met.**

UCL has an Equality, Diversity and Inclusion Strategy that aims to address protected characteristics in all aspects of its activities; the objectives include improving the consistency of experience and support of staff and students around pregnancy, maternity, paternity, childcare and caring responsibilities, championing a culture where disabled people can thrive, collecting and analysing student monitoring data on sexual orientation, gender identity and caring responsibilities, and increasing student applications and enrolments from under-represented groups across UCL, especially from mature students, students from under-represented BME backgrounds, and students with disabilities. A range of support mechanisms is in place for staff and students with respect to the promotion of equality and diversity; these include the provision of relevant training for staff, mentoring initiatives, and a range of useful information and resources for students, staff and managers. The School, which currently holds Athena SWAN Bronze status and is working towards Silver, has a Departmental Equal Opportunities Liaison Officer and an active Equality, Diversity and Inclusion Committee. Equalities monitoring data for UCL staff and students are gathered and reviewed centrally, with information on how the School is performing in terms of meeting its widening participation targets and attainment rates, such as those of BME students, being provided annually as part of the Annual Student Experience Review (ASER) data set. Students with disabilities are assessed by UCL Disability Services, who make recommendations as to whether any adjustments are required, such as extra time in written assessments, or deadline extensions for written coursework. All written examinations and summative items of coursework are marked anonymously as far as this is practicable. Equality and diversity training, including Unconscious Bias Awareness training, is compulsory for all School staff members, who are expected to renew their training at least once every three years. Tutors for the 26-week placements in year 5 will undergo mandatory training, using UCL resources, in equality and diversity, unconscious bias and GDPR. Materials used in teaching are designed to be inclusive, for example by reflecting diversity in images used in lecture materials and in the simulated patients used as examples during clinical teaching and assessment. Students are introduced to concepts of equality and diversity from the beginning of Year 1, with continuous reinforcement throughout the programme.

### Standard 4: Selection of students and trainees

**The team was satisfied that all criteria relating to this standard will be met.**

The UCL prospectus and website, as well as the School website, will provide details of suitable qualifications for the 5-year programme, along with information about the School and the course, as well as the selection process. It will also be clear that prospective applicants must demonstrate that they espouse the necessary professional values. Applicants' academic qualifications, as described on the UCAS forms, will be checked by the UCL Admissions Office against the standard criteria. As for the 4-year MPharm, those candidates who are likely to meet these will be invited to a selection day, during which applicants will participate in various activities including a structured interview, and will also take a short assessment paper comprising a numeracy component, situational judgement tests that include ethical dilemmas, and short essay-based questions, with scores in the test determining whether or not an offer will be made. The interview, based on standardised questions, is administered as a timed, two-station process involving academic staff members, current students and clinically practising pharmacists. Currently, those international students who are overseas complete a timed, online assessment but do

not undergo the same interview process as students who are in the UK; however, where the selectors have doubts, Skype interviews are arranged, and such interviews are being considered for applicants to the 5-year programme, in which case the placement providers will be also involved. The aim of the interview and the assessment is to ensure the recruitment of students who possess values and attributes that align with those of the institution, these being safe and effective patient care, caring and compassionate conduct, honest and respectful behaviour, and responsible and accountable actions. Applicants will be sent detailed information on what to expect during the selection day, along with information on fitness to practise. All members of staff who are involved in interview panels must first undertake training in equality and diversity and in fair recruitment practices and are also directed to training resources relating to 'unconscious bias' awareness.

## Standard 5: Curriculum delivery and student experience

**The team was satisfied that all criteria relating to this standard will be met.**

The proposed 5-year integrated programme will comprise the first four years of the current MPharm, with an additional year-long module made up of two, 26-week placements, one taking place in community pharmacy, and the other in hospital pharmacy. The first four years, as at present, will deal with science and practice of pharmacy and their inter-relationships at an increasing level of complexity in each successive year. The scientific basis of pharmacy will be taught in a manner that integrates fully with practice; the foundation will be established in year 1, and built upon through a series of interconnected modules showing both horizontal integration across the modules in each year and vertical integration through themes, such as the integrated therapeutics theme and a pharmacy practice education theme. Integration in the programme will also be supported by a series of integrated therapeutics workshops in the first three years, and a wiki-based project in the fourth year. The purpose of the integrated therapeutics workshops, typically based around clinical case scenarios, is to enable students to apply their knowledge and develop their understanding in a multi-/inter-disciplinary manner. The fourth year, which also includes a large research project, will build on all previous elements of the programme and will address, at an advanced level, the themes of law and ethics, calculations, communication skills, public health, medicines safety, therapeutics based on complex cases, and decision making. Across the first four years, students will complete a 'Professional Portfolio'; this portfolio is based on the GPhC's 'Standards for Pharmacy Professionals', with professionalism being emphasised throughout the programme; the portfolio covers a wide range of material, including pharmaceutical calculations, continuing professional development records, personal development planning, reflective accounts covering, for example, inter-professional educational activities, clinical skills. Throughout the first four years, there will be experiential learning through placements, as well as inter-professional education with medical and nursing students, and students will be exposed to patients from the start. Experiential learning will take place in community pharmacy and in hospitals in each year of the programme, and will also include a GP practice placement, a session in a sexual health clinic and a one-day emergency-care placement. As well as meeting patients during their placements, patient engagement sessions will be held in classes, these allowing students to interact with real patients and expert patients, for example, patients with Parkinson's disease or epilepsy, as well as with simulated patients played by actors. Assessments show progressively increasing complexity and integration across the first four years, and will include written examinations, as well as objective, structured clinical examinations (OSCEs), with significant contributions from coursework. Students will receive appropriately timely feedback on formative and summative assessments. All modules, as well as all specified assessments within modules, must be passed separately, and, where students make a mistake that in real life would lead to patient harm, they will fail that assessment. Following successful completion of the fourth year, students will be introduced to the coursework requirements for the fifth year, and presented with an overview of the e-portfolio and of the various work-based assessments. Throughout the two placements, there will be several 'anchor days', taking place back in the School, where the students will participate in activities that will include advice on preparation for various pieces of coursework and assessments; a number of webinars conducted by the School will also support these

aspects. The students will complete a significant project in each placement, the first being related to quality improvement and the second to audit. The summative assessments in year 5 will be based on the e-portfolio, a 5000-word critical reflection, two case studies each of 1000 words, the quality improvement and audit projects, and a 12-station OSCE; the students will take the GPhC's registration assessment in week 49. The e-portfolio will comprise the students' learning contract, reflections on their progress towards meeting the GPhC standard 10, CPD records, a 5000-word critical reflection based on the GPhC's 'Standards for Pharmacy Professionals', competency assessments and a final summary statement, along with records of meetings with the students' academic tutors in the School. Throughout year 5, there will be regular reviews covering work-based assessments and academic attainment linked to the standard 10 outcomes; these reviews will involve both the tutor and the School. In the final week, the tutor for the second placement will produce a signed declaration indicating that the student has achieved all the GPhC standard 10 outcomes; this declaration, together with any additional evidence, will be reviewed by the UCL Module Lead and submitted to the MPharm Examination Board, with the final sign-off being the responsibility of the MPharm module and MPharm programme leads.

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

**The team was satisfied that the single criterion relating to this standard will be met.**

Students will each be assigned a personal academic tutor at the beginning of the course and will normally retain the same tutor throughout their time in the School; they will be expected to meet their tutors regularly during each year of the programme, for example, to discuss their professional development portfolios, although the nature and frequency of the meetings changes as the student progresses, but with a more consistent experience presented for first year students. Resources are available to support tutor group activities; these include record sheets for tutor meetings, and suggestions for exercises to support students' development with respect to general numeracy and pharmaceutical calculations, as well as resources to support students' reflections on their performance in tests. Academic tutors are supported in their role by the Senior Academic Tutor, the MPharm Programme Director and the School's Student and Academic Services Office (SASO), to whom queries can be directed and, where necessary, students referred. The academic tutors will also review their tutees' personal development plans throughout the programme and assist students in the development of goals for each academic year. Advice on curriculum vitae preparation and applications for summer placements is also available within the academic tutor scheme, in addition to the extensive support for these aspects provided from UCL Careers and the School's Pre-Registration Co-ordinator. In addition to support provided via the academic tutor scheme and the Student and Academic Support Office, the MPharm Programme Director will host a weekly drop-in surgery where students can discuss any problems, as well as receive feedback. The School holds 'Wellbeing Wednesdays', which provide a whole range of activities most of which are not academic-related, and also offers student access to Wellbeing Champions who receive specific training for this role, including training in mental health first-aid. Specific support will also be available for examination revision. During the year 5 26-week placements, students will have regular contact with academic staff of the School; this will be achieved through visits to the placements by the year 5 Module Lead and team, and meetings with their academic tutors, as well as 'anchor days' held within the School. While on their 26-week placements, students will continue to have full access to all of the usual support mechanisms at UCL.

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

**The team was satisfied that all criteria relating to this standard will be met.**

The University has a formal Appraisal, Review and Development Scheme, and all staff members are expected to undergo annual appraisal. The appraisal process is designed to provide guidance and support for the appraisee, including in relation to career aspirations, to identify any specific training needs, to improve communication within departments, and to enable UCL to best meet its objectives of a

high quality teaching and research environment with staff working to their full potential. New members of academic staff members are provided with a structured induction process and a period of probation appropriate to their prior experience. Additionally, the School has a Teaching Induction Policy for Academic Staff; this aims to ensure that new members of staff meet early with existing staff members who will support their anticipated teaching roles. New staff members also have an early opportunity to visit Green Light Pharmacy and one of the School's partner NHS Hospital Trusts, so that their teaching can be framed within the clinical context of the programme; hospital pharmacy and Green Light orientation sessions are also offered periodically to all members of staff who are not routinely involved in the delivery of these aspects of the course. Signposting to relevant training, including towards a teaching qualification where required, is also provided as part of this process, along with an introduction to peer review of teaching and the appointment of a suitably experienced teaching mentor where the new appointees have limited previous teaching experience. All staff members are required to participate in peer review of teaching at least once every two years, and records of participation are kept within the School. Ongoing support and development opportunities for the teaching practices of existing academic, technical and professional services staff are available through UCL Arena, UCL's professional development pathway for teaching; this includes support in obtaining fellowship of the Higher Education Academy. Training sessions are organised for members of staff, for example, relating to the introduction of new teaching technology, and to ensure that all staff members have opportunities to learn how to make the best use of standard educational tools such as online quizzes or audience response systems. The School carries out an annual workload assessment exercise that takes account of teaching delivered across all taught programmes, including undergraduate and postgraduate project supervision and examination marking, PhD supervision and course management responsibilities; all staff members are expected to contribute towards recruitment and selection activities, such as interviewing prospective MPharm students. There is a document providing guidance on workload expectations for staff members on contracts that require both teaching and research activities, and workload is discussed at appraisal and reviewed by the Divisional Executive Team, with adjustments made as necessary in consultation with the Head of the relevant Research Department. Members of academic staff who have been in post for at least three years, or who are returning from a period of parental or extended carer's leave, may take a period of paid leave of up to one term to undertake research or other appropriate study related to an individual's academic or professional field. The tutors for the 26-week fifth year placements, who will be appointed as honorary lecturers at UCL, either will have attained the 'Statement of Teaching Proficiency for Pharmacy Professionals' or will be required to undertake training to achieve this, with the support of the School. The certificate is obtained through a day-long session that provides an understanding of key subjects, covering educational theories, workplace-based learning, assessment and feedback, peer observation, role-modelling and mentoring. This training also covers the development of the students' e-portfolios and there will be ongoing support for the placement tutors in developing the portfolio; placement tutors will be offered networking opportunities and peer support. They will have full access to UCL resources to support registration as a Fellow of the HEA. There will be ongoing training and support; this will include addressing the role of the tutor in fitness to practise matters and in Tier 4 visa monitoring.

## Standard 8: Management of initial education and training

**The team was satisfied that both criteria relating to this standard will be met.**

The Director of the School of Pharmacy is responsible for all its academic activities. The Director reports to the Dean of the Faculty of Life Sciences; the Dean reports to the Vice-Provost for Health, who, in turn, reports directly to the Provost. Within the School, responsibility and day-to-day accountability is devolved to a number of senior committees, these being a Divisional Executive Team, a Divisional Teaching Committee, and a Research Committee; a number of other committees, such as the Undergraduate Programmes Committee and the Postgraduate and Professional Programmes Committee, report to these main committees. Line management of academic staff falls within the four Research Departments (Practice and Policy, Pharmaceutical and Biological Chemistry, Pharmaceutics, Pharmacology), the heads of these departments reporting to the Director. Responsibility for the 4-year

and 5-year MPharm programmes is devolved to the Undergraduate Programme Committee (UPC), chaired by the MPharm Programme Director and reporting to School's Divisional Teaching Committee; the UPC covers all aspects of educational provision and development, including the MPharm course structure and the assessment and placements strategies. Within the MPharm, each module is managed by a Module Lead and a Deputy Module Lead, and each level of the programme is co-ordinated by a Year Lead, who has oversight of the content of each year and ensures full horizontal integration. The Clinical Teaching Lead acts additionally as a 'vertical year lead' and works with the other year leads to further ensure both vertical and horizontal integration within the programme. Individual Heads of Research Department also act to ensure vertical integration within their disciplines and completeness of delivery of the curriculum, whilst maintaining a fair distribution of workload. The MPharm Programme Director takes ultimate responsibility for the programme. The year 5 Module Lead will be responsible for the effective running of the fifth year placements, in close liaison with the placement tutors, the MPharm Programme Director and the Associate Director (Clinical Education); this responsibility will include the monitoring of student performance, behaviour and attendance. The Module Lead will be supported by the Student and Academic Support Office (SASO) in this process, which will include Tier 4 visa engagement monitoring. UCL has a general minimum student attendance rule of 70%; should students attend less than 70% of timetabled teaching events, they may be barred from attending summative assessments and, by implication, will not progress to the next stage of study. Within the School, attendance at timetabled sessions, including placements, is compulsory and is monitored in all practical, dispensary, workshop and seminar sessions. Electronic registers are maintained and are regularly monitored by the Student and Academic Support Office, with appropriate action being taken if attendance is inadequate.

### Standard 9: Resources and capacity

**The team was satisfied that all criteria relating to this standard will be met.**

Ahead of each financial year, every UCL Faculty must update its strategic operating plan and budget for consideration by the Senior Management Team. A consolidated plan and budget is then taken forward to UCL's Finance Committee, which makes a recommendation to Council. As a Division, the School of Pharmacy's plan and budget feeds in to the Faculty of Life Science's plan at early stage in the planning process, with considerable involvement from the Finance team of the School of Life and Medical Sciences (SLMS) and from the Dean and Director of Operations of the Faculty. In addition to the SLMS Finance Director, the Faculty accountant provides regular support to the School of Pharmacy's management and finance team. There is close involvement of senior staff at the School of Pharmacy in all the assumptions underlying the planning and budget setting, including student number planning and strategic investments. From its annual income, the School makes a contribution towards Faculty and UCL central costs. Student recruitment has remained healthy, with a target number of 200 students per year. The number of students admitted to the 5-year programme initially will be 20, this contributing to the target maximum of 200 admitted across the four-year and five-year programmes; the intention is to maintain overseas student numbers rather than expanding them, although, depending on demand, the School may consider a small increase, to around 210, in the total number of students admitted. The providers of the 26-week final year placements will receive a significant proportion of the year 5 tuition fees, with some of the balance going to UCL central. The costs of the introduction of the 5-year MPharm will initially be underwritten by income the School's large Egyptian programme. However, the School is confident in the demand for the new MPharm course, as its Hong Kong alumni are very keen. The School currently has 59 members of academic staff, arranged into the four research departments; of the 59 members of academic staff, 20 are GPhC-registered pharmacists and a further nine staff members possess a pharmacy qualification but are not currently registered with the GPhC. In addition, delivery of the programme is supported by a Boots Teacher Practitioner, a Day-Lewis Teacher Practitioner, with the appointment of a Green Light Teacher Practitioner due, and nine practitioners seconded from NHS hospitals; all teacher practitioners are GPhC-registered pharmacists. Additional teacher practitioners also contribute on an ad hoc basis to workshops and OSCEs throughout the year. The School will employ a technician to support the new Clinical Skills facility (see below). The School also intends to employ a

new lecturer in pharmacoepidemiology and drug safety, who will not only be very important for research but who will also undertake some undergraduate teaching. New posts will be created to support the 5-year MPharm; these will include the lead for the programme, a learning technologist, a Senior Teaching Fellow (0.6FTE) to lead the year-5 module, a Teaching Fellow (0.5 FTE), and two teacher practitioner positions, one from Green Light and one from Day Lewis. There will also be support from the Senior Teaching Fellows recently appointed for the pharmacist independent prescribing course, and from administrative staff. Because the School is financially healthy, any additional administrative or other staff required will be appointed to support the programme as the demand arises, and the new degree will not place an additional work burden on the current staff.

All timetabled MPharm teaching, with the exception of placements and some of the inter-professional education sessions, is currently held in the School of Pharmacy building. The School has one main lecture space, which can accommodate a full cohort of 200 students. All seats have audience response system buttons installed, with a mobile kit available for use in other teaching spaces. There is also space for MPharm workshops and seminars, and for small-group computer-assisted learning, as well as for OSCEs and poster presentations. All teaching spaces are equipped with full audio visual and lecture recording facilities. There is UCL-wide access to the wifi network, with extensive provision of wired network access points. A Professional Skills suite comprises an adaptable workshop space adjoining a fully equipped state of the art dispensing laboratory; a new flexible clinical skills facility is to be developed. State of the art teaching laboratories provide specialised facilities and equipment for teaching organic chemistry, pharmacology, biochemistry, microbiology and pharmaceutical instrumentation. Students have access to all 18 of the UCL libraries, including the School of Pharmacy Library, the Cruciform Medical Hub/Library and the Science Library; the School of Pharmacy Library contains quiet study spaces, a group study room, a suite of computers, as well as access to printers and scanners and borrowable anatomy models. A new Student Centre provides access to a further 1000 individual study spaces, as well as areas for group work, social areas and a student enquiry service.

### Standard 10: Outcomes

**These outcomes were not addressed during this step 1 visit but will be considered during subsequent steps of the accreditation process.**

### Indicative syllabus

The team agreed that the MPharm degree met the requirements of Directive 2005/36/EC of the European Parliament and of the Council on the recognition of professional qualifications for the initial education and training of pharmacists.

## 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 timetable for future accreditations.
7. Whenever required to do so by the GPhC, providers must give such information and assistance as the GPhC may reasonably require in connection with the exercise of its functions. Any information in relation to fulfilment of these standing conditions must be provided in a proactive and timely manner.

## Appendix 2 – Standards

### GPhC standards for the initial education and training of pharmacists

NB. Information that is shaded grey or shown in grey italics is only applicable to those wishing to offer a 5-year MPharm degree with intercalated periods of pre-registration training.

#### 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 and trainees:
    - 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 degree or pass pre-registration training 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 initial education and training**

### **2. The quality of pharmacy education and training 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 and trainees;
    - 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.
  - 2.1.c pre-registration tutors evaluating trainees. To do this, tutors must have access to reliable evidence about a trainee's performance. Tutors must be competent to assess the performance of trainees;
  - 2.1.d the quality and development of pre-registration tutors

## **Standard 3: Equality, diversity and fairness**

### **3. Initial pharmacy education and training 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 and trainees**

### **4. Selection processes must be open, fair and comply with relevant legislation. Processes must ensure students and trainees 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 academic and professional entry requirements;
  - 4.2.b meeting English language requirements appropriate to MPharm degree study.

Guidelines issued by English language testing bodies should be followed to ensure that admissions language requirements are appropriate;

- 4.2.c meeting numeracy requirements;
  - 4.2.d taking account of good character checks, such as Criminal Records Bureau (CRB)/Disclosure Scotland checks;
  - 4.2.e passing health checks (subject to reasonable adjustments being made). Health checks could include self-evaluations and/or evaluations by healthcare professionals;
  - 4.2.f recognising 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 MPharm degrees and the pre-registration scheme must deliver the outcomes in Standard 10. Most importantly, curricula must ensure students and trainees practise safely and effectively. To ensure this, pass criteria must describe safe and effective practice.**

- 5.1 Curricula must be integrated.
- 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 MPharm must be delivered in an environment which places study in a professional and academic context and requires students to conduct themselves professionally. Pre-registration training must be delivered in a professional environment which requires trainees to conduct themselves professionally.
- 5.4 An MPharm 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 MPharm degree 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 MPharm degree curriculum must include practical experience of working with patients, carers and other healthcare professionals. Practical experience should increase year on year.
- 5.7 There must be a clear assessment strategy for the MPharm degree. Assessment methods must measure the outcomes in Standard 10.
- 5.8 The MPharm degree 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 degree 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. MPharm degree 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 A pre-registration training plan must describe how the learning outcomes for pre-registration will be delivered.
- 5.13 A pre-registration training plan must describe all assessments, including tutor evaluations and tutor sign-offs.

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

- 6. **Students and trainees must be supported to develop as learners and professionals during their initial education and training.**
- 6.1 A range of mechanisms must be in place to support students and trainees to develop as learners and professionals.

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

- 7. **Anyone delivering initial education and training should be supported to develop in their professional roles.**
- 7.1. There must be a range of mechanisms in place to support anyone delivering initial education and training 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 MPharm degrees.
- 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.
- 7.4. Tutors should have an identified source of peer support.

### **Standard 8: Management of initial education and training**

- 8. **Initial pharmacist education and training must be planned and maintained through transparent processes which must show who is responsible for what at each stage.**
- 8.1. All education and training will 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 education and training

### **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 MPharm degree;
  - 9.1.b sufficient staff from relevant disciplines to deliver the curriculum to students and trainees. 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 MPharm

- degree 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 and in pre-registration. 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 MPharm degree staff who are able to act as mentors to non-pharmacist colleagues
- 9.1.c** pre-registration tutors who meet the GPhC's standards for pre-registration tutors;
  - 9.1.d** career pathways in universities for all staff teaching on MPharm degrees, including pathways for practice staff
  - 9.1.e** clear lines of authority and responsibility for the strategic organisation and day-to-day management of placements
  - 9.1.f** training and ongoing support for all non-pharmacists involved in the delivery of MPharm degrees 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.g** appropriate learning resources
  - 9.1.h** accommodation and learning resources that are fit for purpose
  - 9.1.i** pre-registration premises which meet the GPhC's standards for pre-registration premises

## Standard 10: Outcomes

### 10.1 Expectations of a pharmacy professional

Learning outcome	MPharm	Pre-reg
<b>10.1.a</b> Recognise ethical dilemmas & respond in accordance with relevant codes of conduct and behaviour	<b>Shows how</b>	<b>Does</b>
<b>10.1.b</b> Recognise the duty to take action if a colleague's health, performance or conduct is putting patients or public at risk	<b>Knows how</b>	<b>Knows how</b>
<b>10.1.c</b> 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	<b>Does</b>	<b>Does</b>
<b>10.1.d</b> Apply the principles of clinical governance in practice	<b>Knows how</b>	<b>Does</b>
<b>10.1.e</b> Demonstrate how the science of pharmacy is applied in the design and development of medicines and devices	<b>Shows how</b>	<b>Knows how</b>
<b>10.1.f</b> Contribute to the education and training of other members of the team, including peer review and assessment	<b>Shows how</b>	<b>Does</b>
<b>10.1.g</b> Contribute to the development of other members of the team through coaching and feedback	<b>Knows how</b>	<b>Shows how</b>
<b>10.1.h</b> Engage in multidisciplinary team working	<b>Knows how</b>	<b>Does</b>

<b>10.1.i</b>	Respond appropriately to medical emergencies, including provision of first aid	<b>Knows how</b>	<b>Shows how</b>
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## 10.2 The skills required in practice

### 10.2.1 Implementing health policy

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

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

<b>Learning outcome</b>	<b>MPharm</b>	<b>Pre-reg</b>
<b>10.2.2.a</b> Identify and employ the appropriate diagnostic or physiological testing techniques in order to promote health	<b>Knows how</b>	<b>Shows how</b>
<b>10.2.2.b</b> Identify inappropriate health behaviours and recommend suitable approaches to interventions	<b>Shows how</b>	<b>Does</b>
<b>10.2.2.c</b> Instruct patients in the safe and effective use of their medicines and devices	<b>Shows how</b>	<b>Does</b>
<b>10.2.2.d</b> Analyse prescriptions for validity and clarity	<b>Shows how</b>	<b>Does</b>
<b>10.2.2.e</b> Clinically evaluate the appropriateness of prescribed medicines	<b>Shows how</b>	<b>Does</b>
<b>10.2.2.f</b> Provide, monitor and modify prescribed treatment to maximise health outcomes	<b>Shows how</b>	<b>Does</b>
<b>10.2.2.g</b> Communicate with patients about their prescribed treatment	<b>Shows how</b>	<b>Does</b>
<b>10.2.2.h</b> Optimise treatment for individual patient needs in collaboration with the prescriber	<b>Shows how</b>	<b>Does</b>
<b>10.2.2.i</b> Record, maintain and store patient data	<b>Shows how</b>	<b>Does</b>
<b>10.2.2.j</b> 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.	<b>Shows how</b>	<b>Does</b>

### 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

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

#### 10.2.4 Working with patients and the public

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

#### 10.2.5 Maintaining and improving professional performance

Learning outcome	MPharm	Pre-reg
<b>10.2.5.a</b> Demonstrate the characteristics of a prospective professional pharmacist as set out in relevant codes of conduct and behaviour	<b>Does</b>	<b>Does</b>
<b>10.2.5.b</b> Reflect on personal and professional approaches to practice	<b>Does</b>	<b>Does</b>
<b>10.2.5.c</b> Create and implement a personal development plan	<b>Does</b>	<b>Does</b>
<b>10.2.5.d</b> Review and reflect on evidence to monitor performance and revise professional development plan	<b>Does</b>	<b>Does</b>
<b>10.2.5.e</b> Participate in audit and in implementing recommendations	<b>Knows how</b>	<b>Shows how</b>
<b>10.2.5.f</b> Contribute to identifying learning and development needs of team members	<b>Knows how</b>	<b>Does</b>
<b>10.2.5.g</b> Contribute to the development and support of individuals and teams	<b>Knows how</b>	<b>Does</b>
<b>10.2.5.h</b> Anticipate and lead change	<b>Knows how</b>	<b>Shows how</b>