

# **University College London independent prescribing course reaccreditation event report, May 2021**



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## Event summary and conclusions

<b>Provider</b>	University College London
<b>Course</b>	Independent prescribing course
<b>Event type</b>	Reaccreditation
<b>Event date</b>	19 May 2021
<b>Reaccreditation period</b>	August 2021 – August 2024
<b>Relevant standards</b>	<a href="#">GPhC education and training standards for pharmacist independent prescribers, January 2019</a>
<b>Outcome</b>	Approval The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that pharmacist independent prescribing course provided by University College London should be reaccredited for a further period of three years, subject to one recommendation.
<b>Conditions</b>	There were no conditions.
<b>Standing conditions</b>	The standing conditions of accreditation can be found <a href="#">here</a> .
<b>Recommendations</b>	1. That UCL undertake a review of quality assurance of the assessments carried out in the period of learning in practice to ensure consistency of assessment is maintained across all learning environments. This is in relation to criteria 4.3 and 7.7.
<b>Registrar decision</b>	Following the event, the Registrar of the GPhC accepted the accreditation team's recommendation and approved the reaccreditation of the programme for a further period of 3 years.
<b>Maximum number of all students per cohort:</b>	30
<b>Number of pharmacist students per cohort:</b>	30
<b>Number of cohorts per academic year:</b>	Four

<b>Approved to use non-medical DPPs:</b>	Yes
<b>Key contact (provider)</b>	Dr Elizabeth (Lizzie) Mills, Associate Professor in Clinical Pharmacy and Pharmacy Education
<b>Provider representatives</b>	Dr Elizabeth (Lizzie) Mills, Associate Professor in Clinical Pharmacy and Pharmacy Education Will Swain, Senior Teaching Fellow (Prescribing) Amira Shaikh, Senior Teaching Fellow (Prescribing) Professor Cate Whittlesea, Associate Director for Clinical Education
<b>Accreditation team</b>	Professor Anne Watson (event Chair), Postgraduate Pharmacy Dean, NHS Education for Scotland Dr Ruth Edwards, Head of Professional Experience, Aston University Dr Cathy O'Sullivan, Workforce Development Consultant
<b>GPhC representative</b>	Chris McKendrick, Quality Assurance Officer, GPhC
<b>Rapporteur</b>	Dr Ian Marshall, Proprietor, Caldarvan Research (Educational and Writing Services); 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 reaccreditation process is based on the GPhC's standards for the education and training of pharmacist independent prescribers January 2019.

The GPhC's right to check the standards of pharmacy qualifications leading to annotation as a pharmacist independent prescriber is the Pharmacy Order 2010. It requires the GPhC to 'approve' courses by appointing 'visitors' (accreditors) to report to the GPhC's Council on the 'nature, content and quality' of education as well as 'any other matters' the Council may require.

The powers and obligations of the GPhC in relation to the accreditation of pharmacy education are legislated in the Pharmacy Order 2010. For more information, visit:

<http://www.legislation.gov.uk/ukxi/2010/231/contents/made>

## Background

The Clinically Enhanced Pharmacist Independent Prescribing (CEPIP) course is provided by University College London (UCL) School of Pharmacy, which is a Department of the Faculty of Life Sciences at UCL. The CEPIP course is provided under the umbrella of the Postgraduate Diploma in General Pharmacy Practice programme, which is a part-time programme introduced in 2007 as a workplace-based programme linked to a postgraduate award. The diploma programme also forms the postgraduate professional training programme for junior pharmacists primarily in the immediate post-registration phase of their career. The course is a 60-credit module offered at FHEQ level 7 accessed either as a standalone course leading to a PG Certificate in General Pharmacy Practice (Prescribing), or as an option embedded course within the General Pharmacy Practice diploma (PG Dip GPP). No conditions or recommendations were made at the last accreditation event on 21 June 2018. One hundred and forty five pharmacists have taken the course over the last five cohorts with 29 offers issued for the April 2020 cohort.

The cohort that commenced in October 2019 had already completed all nine face-to-face (f2f) days, including the OSCEs before the first COVID-19 lockdown in March 2020 and many had completed their learning in practice hours. No changes to the course were made to support this cohort, but pharmacists were supported by their UCL tutor and the course team to complete the course. For the October 2020 cohort, the f2f study days, including the clinical skills teaching, have been taught synchronously, online, using video conferencing software. When it is possible to do so, pharmacists will be invited to attend one f2f study day in a newly-built clinical skills suite, in order to practise physical examinations. The OSCE is being conducted online, following processes that have been trialled in the MPharm and the PG Diploma in General Pharmacy Practice. Students have been allowed to delay their OSCE if their learning in practice time has been affected.

The team was told that the provider had reviewed the course over the last year to assess its fit to the new GPhC standards. The biggest changes had been the move to use non-medically qualified Designated Prescribing Practitioners (DPPs), and the institution of tripartite meetings between the pharmacist, course tutor and DPP.

## Documentation

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

## The event

Due to the COVID-19 pandemic, the GPhC modified the structure of the event so that it could be held remotely. The event was held via videoconference between University College London and the GPhC on 19 May 2021 and comprised meetings between the GPhC reaccreditation team and representatives of the University College London prescribing course.

## Declarations of interest

There were no declarations of interest.

## Schedule

### The event

Meeting number	Meeting	Time
1.	Private meeting of accreditation team and GPhC representatives	09:30– 10:30
2.	Meeting with course provider representatives	11:00 – 12:30
3.	Learning outcomes testing session	13:30 – 14:00
4.	Private meeting of the accreditation team and GPhC representatives	14:00 – 15:00
5.	Feedback to course provider representatives	15:00 – 15:15

# Key findings

## Part 1 - Learning outcomes

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

The following learning outcomes were tested at the event: **4, 12, 15, 19, 23 and 30.**

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

Learning outcomes met? Yes  No

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

Learning outcomes met? Yes  No

### Domain - Professional knowledge and skills (outcomes 16-20)

Learning outcomes met? Yes  No

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

Learning outcomes met? Yes  No

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

### Standards 1 - Selection and entry requirements

Standard met? Yes  No  (accreditation team use only)

**The team was satisfied that all of the six criteria relating to the selection and entry requirements will be met.** (The criteria can be found [here](#))

The submitted documentation stated that information about the entry criteria is publicised on the UCL website. Applicants complete a UCL online application form with general information on the applicant within the central UCL Select Application System, and also upload a completed Application Pack into the UCL Select Application System which requests information and evidence specific to the course entry requirements. Applicants submit a reflection on two professional experiences related to their chosen scope of practice; patient-facing experience, clinical prescribing experience, participation in clinical interventions and medicines optimisation, or experience in the multidisciplinary team aspects of prescribing. The team was told that applications are discussed at weekly course team meetings. The entry requirements for the course are stipulated by the GPhC, including that the pharmacist applicant has relevant clinical or therapeutic experience in their chosen area, which is suitable to act as the foundation of their prescribing practice training, and has a designated prescribing practitioner (DPP) who has agreed to supervise their learning in practice and who meets the criteria for acting as a DPP, including meeting the competencies in the RPS Competency Framework for all Prescribers. Only applicants that meet all of the entry requirements are admitted to the course. From October 2021 interviews will be carried out virtually by two members of the course team focussing on clarification of areas of uncertainty within applications to allow the applicant to demonstrate that they meet the entry requirements. The UCL course team is responsible for applying the selection criteria consistently and in an unbiased way that meets relevant legislation. All members involved in the admissions process have undergone online diversity training and unconscious bias training which is updated annually. The final decisions on applications are recorded on UCLSelect with a reason if applications are rejected. Applicants that are rejected are provided with feedback on why they do not meet the entrance criteria and the types of experience and skills they could consider acquiring before reapplying.

### Standard 2 - Equality, diversity and inclusion

Standard met? Yes  No  (accreditation team use only)

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

The School has an EDI committee which is responsible for coordinating the gathering of data and other qualitative and quantitative information for the School and facilitating its analysis to identify key findings, gaps and areas that will require further research and feed into action planning. The documentation explained that the course has been developed to meet the diverse

requirements of learners, rather than having to make adaptations at a later date to meet an individual's needs. This includes using multiple modes of representation to provide core learning, sourcing relevant videos and images as well as text, and providing further learning resources if a learner needs to study the concept in more depth, or needs an alternative presentation. In the online learning a mix of discussion groups, MCQ tests, short answer responses, and interactive responses are used to enable learners to engage with others and express their views. In the face-to-face learning a range of techniques are used to enable trainee independent prescribers (TIPs) to engage, including small group work, paired work, whole class response and interactive presentation software allowing voting and anonymous audience response. In the period of learning in practice TIPs are encouraged to access a range of different learning experiences, and to learn from different people within the multi-disciplinary team. Learner personas, fictional profiles that reflect the learners on the course has increased the awareness of the course team of the learners, and the needs of particular groups of learners and how they might proceed through the course. The course team have undertaken an Inclusive UCL Curriculum Health Check to support staff to reflect on how to embed the principles of inclusivity in all aspects of the academic cycle, and has identified some actions necessary for the Oct 2021 intake. At a course level, equality, diversity and inclusion (EDI) data for 2018-2021 has been obtained but the small numbers involved make it difficult, at this stage, to identify any trends as completion data is only available for cohorts 1-3. It was noted that the number of white males applying to and enrolling on the course is low. The team was told that the University provides the School with data on ethnicity, but the School would appreciate more in-depth data; the team would encourage the School to push for such information. TIPs with disabilities are assessed by UCL Disability Services, who will make recommendations as to whether any adjustments are required. Although extra reading time will be provided if this is needed, extra time is not provided for TIPs in OSCEs as the stations are designed to be real world scenarios that ensure that TIPs are not expected to complete tasks in the OSCEs that would not take place in a clinical setting. Reasonable adjustments required in the learning in practice time will be discussed with the TIP and the DPP at the tripartite review meetings. It was stressed that learning outcomes are not modified and must be met. The online learning includes a specific activity focused around TIPs understanding and meeting their legal responsibilities under equality and human rights legislation and respecting diversity and cultural differences. The online learning considers patients' own beliefs, perceptions, expectations and attitudes to their health needs, together with developing an understanding of how patients' cultural and ethnic needs can influence prescribing, all reinforced through the use of a diverse range of patient cases during the clinical skills study days.

### Standard 3 - Management, resources and capacity

Standard met? Yes  No  (accreditation team use only)

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

The roles and responsibilities of all those involved in delivering the course are delineated in the Course Management Plan, and those of the DPP and the TIP, along with the course provider, are included in a Tripartite Agreement between the three parties which is reviewed, agreed and

signed at the first tripartite review meeting which takes place within the first 6 weeks of the course. A representative of the organisation supporting the learning in practice time, for example the non-medical prescribing lead where this role exists, or the practice manager in a GP setting, is required to complete a declaration confirming that there is sufficient and appropriate support and capacity; the team was told that site checking visits do not take place. The documentation stated that UCL can deliver four cohorts of 30 students each, with two intakes per year in October and April. The programme is not offered to professions outside pharmacy. The staff resource for the course totals 5.8FTE, 1.6 FTE of which is the course team, of whom 1.0FTE are annotated prescribers. This is made up of three members of academic staff supported in the delivery by a learning technologist, and an administrator. In addition a number of clinicians/practitioners are employed on a casual contract, as and when needed to support delivery, and to that the learning materials and the TIP experience is based in the realities of practice. Teaching of prescribing skills takes place in one of the teaching rooms at the School while clinical skills teaching takes place in the newly-built Clinical Skills Suite in the School. A bespoke on-line learning package designed to support and augment learning delivered during the study days and from the learning in practice time is provided via Moodle. Tripartite reviews will take place within six weeks of the TIP starting the course, and approximately halfway through the course: within month four for those completing in 6 months; within month five for those completing in 9 months; and within month six for those completing in 12 months. The team was told that the School has only had one external examiner to date, an independent prescriber themselves who met with the course team to discuss the requirements.

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

Standard met? Yes  No  (accreditation team use only)

**The team was satisfied that all of the six criteria relating to the monitoring, review and evaluation will be met. One recommendation was made.**

Internal Quality Review (IQR) is carried out on a six-yearly basis, involving a review of the academic content of the School's programmes, including the continuing currency and validity of programmes in light of developments in research, professional and industry practice and pedagogy, changes in the external environment such as the requirements of professional, statutory and regulatory bodies. It also involves a review of the effectiveness of management of programmes. The team learned that the next IQR was due to be carried out in 2020-21, however due to COVID-19 this has been delayed; it is anticipated that it will be carried out in December 2021 or January 2022. The team was told that a Week 12 student review covers the learning in practice experience but that any other issues can be identified in an ask-a-question forum. In addition, the Annual Student Experience Review (ASER) draws together monitoring activities including data review, external examiner reports, student surveys, NSS and PTES action-planning, into an annual health-check. The CEPIP course engages with the UCL Student Reviewers of Teaching Programme. Feedback is also considered from pharmacists, DPPs and UCL tutors. The Course Lead has overall responsibility for monitoring and evaluating the IP course, and ensuring that appropriate action is taken. The course is reviewed by the course team before each cohort to ensure it is up to date and any changes in practice, changes to national standards, guidance or developments within a wider healthcare context that potentially

impact on pharmacy and prescribing are included. A Steering Group meets twice per year to provide advice to the CEPIP course and to contribute knowledge and advice regarding the development and practice of non-medical prescribing at both local and national levels. It was confirmed to the team that the programme was validated by the University in May 2018 and was updated with the amended entry requirements in March 2021 to meet the 2019 GPhC reaccreditation standards. As discussed in greater detail in the commentary to Standard 7 below, the team enquired about the quality assurance of assessment of physical examination skills in placement and the triangulation of assessments with the provider in the absence of face-to-face OSCEs (which have now been moved online due to the Covid-19 pandemic). The accreditation team surmised that the process could potentially be insufficient to ensure consistency and triangulation of assessment of pharmacists' physical examination skills. Although the team acknowledged that UCL has made best endeavours to make sure that assessment of physical examination skills is robust, the team made the **recommendation** that UCL undertake a review of quality assurance of the assessments carried out in the period of learning in practice to ensure consistency of assessment is maintained across all learning environments; this relates to criterion 4.3.

## Standard 5 - Course design and delivery

Standard met? Yes  No  (accreditation team use only)

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

The Learning and Teaching strategy details of how the course content, design and delivery will allow pharmacists to demonstrate the knowledge and skills to meet the GPhC learning outcomes. The course includes 240 hours, approximately 32 days, of structured learning activities as a mix of online learning and study days, with a flexible completion time to recognise the differing experience of entrants. The Prescribing Portfolio allows pharmacists to reflect on their knowledge and experience, and identify their learning needs; they undertake a learning needs analysis with their DPP as part of the initial application process. The portfolio builds on the initial learning needs analysis and, before the first tripartite review, pharmacists are required to develop a learning contract with the DPP defining their learning needs in relation to their scope of practice, the relevant prescribing competencies and physical examination skills. The core course team consists of three pharmacists, the course lead and two part-time staff members who are pharmacist independent prescribers working in hospital and GP practice respectively, and supported by other UCL pharmacy staff. The course Steering Group includes pharmacist prescribers from different areas of practice including hospital trusts, GP practice, urgent care and community pharmacy, and more recently, a carer, with plans to involve patients when the pandemic has passed. The DPP handbook and induction video provide guidance to the DPP about what constitutes supervision, and that the pharmacist must not prescribe independently until they have successfully passed the course and been annotated. They also include the need to ensure that when DPP supervision is delegated, it is to appropriately qualified and experienced members of staff. Pharmacists must pass each element of assessment in order to pass the course; there is no compensation allowed between assessments. If a fitness to practise concern arises during a pharmacist's normal duties as a pharmacist, this should be dealt with by the employer, but they are expected to notify UCL of any changes in circumstances

relating to their fitness to practise. The process for the pharmacist to raise concerns about their learning in practice time, and the other aspects of the course that are administered by the School are included in Course Management Plan. The team **noted** that the in Teaching, Learning and Assessment Strategy stated that “as per GPhC criteria, in any assessment, a failure to identify a serious problem or an answer which would cause the patient harm should result in overall failure of the programme”; this is no longer a GPhC requirement.

## Standard 6 - Learning in practice

Standard met? Yes  No  (accreditation team use only)

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

The course includes at least 90 hours of learning in practice in a clinical setting appropriate to the pharmacist’s area of practice and with direct access to patients. A representative from the organisation supporting the learning in practice time is required to sign a declaration in the application pack stating that the organisation will support the minimum of 90 hours learning in practice time. At application, the pharmacist is required to detail how they plan to develop their competence in clinical assessment skills, which must include interaction with patients. The DPP is also required to provide a training plan for the period of training. Three tripartite reviews, together with the pharmacist’s reflections on their learning in practice in their portfolio are the main mechanisms for monitoring that learning in practice requirements are being met. The DPP and pharmacist’s understanding of the requirements is checked by the UCL tutor at the first tripartite review. The pharmacist is required to submit a log of their learning in practice, and the DPP signs a final statement that the learning in practice time was completed as per the requirements. The pharmacist’s progress in demonstrating the competencies within the Competency Framework for All Prescribers is checked at each tripartite review, and at the final review, the pharmacist should have evidence of achievement of all of the competencies within their portfolio.

## Standard 7 - Assessment

Standard met? Yes  No  (accreditation team use only)

**The team was satisfied all of the eleven criteria relating to the assessment will be met. One recommendation was made.**

A Teaching, Learning and Assessment Strategy shows how each GPhC learning outcome is assessed by at least two different assessment methods to enable triangulation and verification of the DPP’s assessment of the learning in practice time, and maps the online learning and face-to-face learning against the GPhC learning outcomes. A range of assessment methods is used on to test achievement of the learning outcomes and prescribing competencies, including written coursework, reflective activities, workplace-based assessments, and OSCEs. The team explored the design of the OSCEs and their conversion to online assessments during the COVID-19 pandemic and learned that there are normally six 15-minute stations that include history-taking, physical assessment, referrals, and prescription-writing, with actors playing patients and analytical checklists. The team was told that the stations had translated well to online delivery but that the physical examination stations had been taken out. A panel looks at the cut scores

using the Anghoff method before the external examiner approves the results. Overall, UCL tutors will make the final summative assessment regarding whether or not the pharmacist has met the learning outcomes and related prescribing competencies. Successful completion of the period of learning in practice is a required element of the prescribing portfolio and therefore the pharmacist must pass the learning in practice time in order to pass the course. Where a pharmacist is assessed by the DPP to lack competence in a particular area, a member of the course team will normally liaise with the DPP and TIP to agree a course of action. Pharmacists are provided with feedback on their performance as they progress through the course. Although the team was assured that it is the intention to revert to face-to-face OSCEs with two physical examination skills' stations in September 2021, the team was concerned about the quality assurance of physical examination skills in the absence of face-to-face OSCEs (which have now been moved online due to the Covid-19 pandemic). The team was told that the provider pays close attention to the DPP's assessment skills at the application stage and that pharmacists have to describe what physical assessment skills they deployed during the learning in practice, along with discussion of the skills at the tripartite meetings. The team concluded, through reassurance given verbally by the provider, that although the process met the standard, it was potentially insufficient to ensure consistency of assessment of pharmacists across all practice environments and made the **recommendation** that UCL undertake a review of quality assurance of the assessments carried out in the period of learning in practice to ensure consistency of assessment is maintained across all learning environments; this relates to criterion 7.7 Attendance at the face-to-face study days whether delivered in person or online is compulsory but the team was told that individual 1:1 sessions can be provide in the cases of unavoidable absence. The external examiner for the programme reviews a sample of coursework and marking to ensure that the assessments are robust and appropriate and that the marking is fair and consistent. Consideration of the spread of marks, average marks achieved and inter-assessment variability for individual students is undertaken as part of the Board of Examiner processes to ensure reliability. Pharmacists must pass each of the four assessments in order to pass the course; there is no compensation allowed between assessments.

## Standard 8 - Support and the learning experience

Standard met? Yes  No  (accreditation team use only)

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

A representative from the organisation supporting the learning in practice time is required to confirm that the trainee independent prescriber will be supported and that sufficient time has been organised in order for them to complete all elements of the course, including attendance at the required study days and a minimum of 90 hours of learning in practice time. Also that there is sufficient capacity and infrastructure to appropriately support the applicant in their studies in the organisation. A named tutor to each pharmacist provides both personal and academic support and attends the three tripartite reviews with the pharmacist and DPP. The tutor will confirm that an induction for the learning in practice time has taken place, and that effective supervision is in place. In line with the GPhC guidance on tutoring pharmacists and pharmacy technicians, apart from the tripartite meetings DPPs are expected to meet regularly with the pharmacist. The course has processes for the DPP to raise concerns about the

pharmacist, including their fitness to practise, and for DPPs and pharmacists to raise concerns about the quality of the course although the team was told that the provider had not yet had such an experience.

## Standard 9 - Designated prescribing practitioners

Standard met? Yes  No  (accreditation team use only)

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

Applicants and DPPs are provided with information on the DPP roles and responsibilities, and the information required during the application process. Along with their qualifications and relevant experience, prospective DPPs have to provide evidence that is assessed by UCL on a checking spreadsheet that they have active prescribing competence applicable to the area of practice in which they will be supervising, along with appropriate patient-facing clinical and diagnostic skills with the ability to assess the pharmacist's skills. The team was told that if any non-medical DPPs do not have the full set of competencies, they will be referred to a course leading to a Statement of Teaching Proficiency (STP) or to HEE training along with identification of additional support for the pharmacist. All DPPs will be required to view an induction video and read the DPP Handbook. Generic feedback on DPP performance is collected at the tripartite review meetings, and from surveys and queries/concerns from pharmacists. Individual feedback on performance, except in exceptional circumstances, will not be provided due to the one-to-one nature of the supervisory relationship between the pharmacist and DPP.

