

**University of Sunderland independent
prescribing course reaccreditation event
report, December 2022**



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Event summary and conclusions

Provider	University of Sunderland
Course	Independent prescribing course
Event type	Reaccreditation
Event date	5 December 2022
Approval period	January 2023 - January 2026
Relevant standards	<u>GPhC education and training standards for pharmacist independent prescribers, January 2019</u>
Outcome	<p>Approval with conditions</p> <p>The accreditation team has agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the Pharmacist Independent Prescribing course provided by the University of Sunderland should be reaccredited for a period of three years subject to three conditions. There is one recommendation.</p> <p>Evidence of how the University has addressed the conditions must be sent to the GPhC, for approval by the accreditation team. This must be done by the next intake of students on to the course.</p> <p>The team's recommendation includes approval for a maximum intake of 2 cohort(s) per year, with a maximum of 60 students (60 pharmacists) per cohort.</p>
Conditions	<p>The conditions are:</p> <ol style="list-style-type: none"> 1. EDI data must be collected for this course and used in a meaningful way when examining, considering, and analysing factors such as admissions, progression, attrition, and attainment. This is because although the team could see limited evidence of consideration of EDI factors being used to enhance individual student experience, no evidence was provided on how EDI data is collected and used in the design and delivery of the course and the overall learning experience. To meet this condition, the course team must submit a plan for the collection and use of EDI data and this must be sent to the GPhC before the next intake of students onto the course. This is to meet criterion 2.2. 2. The provider must adapt the learning contract that is currently in place, to ensure that it covers all learning, teaching and practice environments. This is because although a learning contract is in place between the pharmacist and the DPP, the provider is not party to the contract in that its roles and responsibilities and lines of accountability are not articulated in the contract. Details of this must be sent to the GPhC before the next

	<p>intake of students onto the course. This is to meet criterion 3.3.</p> <p>3. The provider must develop an appropriate feedback process for all DPPs regarding their overall performance as prescribing supervisors, including the arrangements for extra training, support and development as necessary. Details of this process must be sent to the GPhC before the next intake of students onto the course. This is to meet criterion 9.5.</p>
Standing conditions	The standing conditions of accreditation can be found here .
Recommendations	<p>1. There are a number of processes that are not clearly documented. Whilst the accreditation team is assured that these are happening, the accreditation team wished to see clearly articulated documented processes for the following areas:</p> <p>a) Selection processes – it is advised that admissions processes are documented clearly around how applicants meet the entry requirements. This relates to criterion 1.2.</p> <p>b) Risk management - all of the risks associated with the management, delivery and sustainability of the course and measures to mitigate those risks. This is because the team agreed that although some risks have been considered, the management of the course would benefit from more defined processes for identifying and managing risks across all elements of the course. This relates to criterion 3.1.</p> <p>c) Monitoring of the mechanisms for pharmacist independent prescribers in training to meet regularly with their DPPs to ensure that learners’ progress is documented, and intervention can take place if required. This relates to criterion 8.2.</p> <p>d) Raising concerns – there needs to be a process for documentation of responses and actions in meeting concerns raised. This relates to criterion 8.3.</p>
Minor amendments	<ul style="list-style-type: none"> • Appendix IX – The provider has previous GPhC 2 years post qualification requirement stipulated on page 23 as part of entry requirement. This should be corrected to reflect the new standards • Appendix 1 (flow chart) – Statement: <i>“Consider applying once registered with GPhC or PSNI for at least 2 years before course commences”</i>. This should be corrected to reflect the new standards • <i>“The DPP is also required to sign a self-declaration that they have reviewed the DPP competency framework and can demonstrate all the competencies outlined within the adapted RPSGB proposed Competency Framework for Designated Prescribing Practitioners (2019).”</i> – submission document page 70. This should be corrected to reflect the latest RPS guidance • <i>“Learners are advised that it is preferable to have a single, clearly identified, supervisor (DPP).”</i> This should be corrected to reflect that this is a requirement rather than a preference.

Registrar decision	<p>The Registrar of the GPhC has reviewed the accreditation report and considered the accreditation team's recommendation.</p> <p>The Registrar is satisfied that the University of Sunderland has met the requirement of approval in accordance with Part 5 article 42 paragraph 4(a)(b) of the Pharmacy Order 2010, in line with the Standards for the education and training of pharmacist independent prescribers, January 2019, updated October 2022.</p> <p>The Registrar confirms that University of Sunderland is approved to offer the independent prescribing course for 3 years. The Registrar notes that the conditions as outlined in the report have been met.</p>
Maximum number of all students per cohort	60
Number of pharmacist students per cohort	60
Number of cohorts per academic year	Two
Approved to use non-medical DPPs	Yes
Key contact (provider)	Dr Keith Holden, Senior Lecturer
Provider representatives	<p>Dr Keith Holden, Programme Lead, Principal Lecturer</p> <p>Kathryn Davison, Associate Head of School, Principal Lecturer (Clinical Pharmacy & Therapeutics)</p> <p>Alan Green, Programme Lead, Senior Lecturer (MSc Clinical Pharmacy),</p> <p>Rebecca Coon, Senior Lecturer (MSc Clinical Pharmacy)</p>
Accreditation team	<p>Professor Ruth Edwards (event Chair), Head of School of Pharmacy, University of Wolverhampton</p> <p>Charles Odiase, Consultant Pharmacist Primary Care and Diabetes (Lead Clinical Pharmacist) Dacorum GP Federation, Hertfordshire UK</p> <p>Hannah Poulton, (lay member) Non-Executive Director, Welsh Cycling Union and Lay member, Consultant Marketing Director</p>
GPhC representative	Rakesh Bhundia, Quality Assurance Officer (Education), General Pharmaceutical Council
Rapporteur	Ian Marshall, Proprietor, Caldarvan Research (Educational and Writing Services); Emeritus Professor of Pharmacology, University of Strathclyde

Observer

Carl Stychin (new accreditation panel member in training) Professor of Law and Director of the Institute of Advanced Legal Studies, School of Advanced Study, University of London

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

The Pharmacy Order 2010 details the GPhC's mandate to check the standards of pharmacy qualifications leading to annotation as a pharmacist independent prescriber. 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 Practice Certificate in Independent Prescribing has been delivered by the University of Sunderland for over a decade and a half. The University was first accredited by the GPhC to provide a programme to train pharmacist independent prescribers in 2007. The course was reaccredited in 2010 and again in 2013 for a period of four years. No conditions were set or recommendations made at the latter event. The programme was then reaccredited by the GPhC in 2016 for a period of 3 years. At this reaccreditation event the accreditation team set a condition that the assessment regulations must ensure that in any assessment a failure to identify a serious problem or an answer that would cause the patient harm must result in the overall failure of the programme. This had to be communicated to all students and DMPs in all materials.

The programme was last reaccredited for three years in 2019 subject to two conditions. The conditions were: 1) that the provider must submit evidence of course validation to the GPhC before commencement of the new iteration of the independent prescribing course. This was because the team noted that the course has not been formally validated by the University. This was to meet criterion 4.6. 2) that the provider must develop and implement robust fitness to practise procedures, specific to the independent prescribing course, before the next intake of pharmacists onto the course and submit these to the GPhC to review. This is because the team noted that there were no formalised fitness to practise procedures in relation to the course. This was to meet criterion 5.9. Following the event, a satisfactory response was received to meet the conditions of reaccreditation. The Registrar of the General Pharmaceutical Council agreed with the accreditation team's recommendations and approved the course for reaccreditation for a further period of three years, until the end of January 2023.

In line with the standards for the education and training of pharmacist independent prescribers January 2019, an event was scheduled on 5 December 2022 to review the course's suitability for

reaccreditation. The programme is led by a pharmacist and will cater for two cohorts of pharmacists each academic year, each cohort having a maximum intake of 60 pharmacists.

Documentation

- IP Submission 2022-23 UoS
- Appendix I University of Sunderland Application Pack and Nomination Form, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix II University of Sunderland Application Form for Postgraduate Study
- Appendix III University of Sunderland Entry Requirements Checklist, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix IV University of Sunderland Validation Documentation, Short Course Specification, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix V University of Sunderland Single Equality Scheme 2018
- Appendix VI University of Sunderland Equality and Diversity Policy Statement July 2018
- Appendix VII University of Sunderland Designated Prescribing Practitioner (DPP) Guide, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix VIII University of Sunderland Designated Prescribing Practitioner (DPP) Training Pack, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix IX University of Sunderland Module Guide 2020, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix X University of Sunderland Validation Documentation, Programme Specific Regulations, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix XI University of Sunderland Module Evaluation Form, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix XII University of Sunderland Postgraduate Module Board Minutes (including EE reports)
- Appendix XIII University of Sunderland Learning Outcomes Matrix, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix XIV University of Sunderland Engagement Activity Spreadsheet, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix XV University of Sunderland Postgraduate Academic Regulations 2019-20 v25
- Appendix XVI University of Sunderland Competency Log, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix XVII University of Sunderland Reflective Learning Log and Diary, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix XVIII University of Sunderland Sample Marking and Assessment Criteria, University Certificate of Postgraduate Study, Practice Certificate in Independent Prescribing for Pharmacists
- Appendix XIX University of Sunderland Assessment Policy v8

- Appendix XX Curricula Vitae of Key Academic and Stakeholder Advisers
- Appendix XXI Illustrations
- Appendix XXII Summary of feedback
- All the University of Sunderland Policies can be found in the Academic Quality Handbook

The event

The reaccreditation/monitoring event was held remotely by videoconference on 5 December 2022 and comprised several meetings between the GPhC accreditation team and representatives of the University of Sunderland prescribing course. Students who were currently undertaking the course, or who had completed it in the last three years, contributed to the event by completing a qualitative survey, responses to which were reviewed by the GPhC accreditation team.

Declarations of interest

There were no declarations of interest.

Schedule

Meeting	Time
Private meeting of accreditation team and GPhC representatives, including break	09:30 - 11:00
Meeting with course provider representatives	11:00 - 13:00
Lunch	13:00 - 14:00
Learning outcomes testing session	14:00 - 14:30
Private meeting of the accreditation team and GPhC representatives	14:30 - 15:30
Deliver outcome to the provider	15:30 - 15:45

Key findings - Part 1 - Learning outcomes

The team reviewed all 32 learning outcomes relating to the independent prescribing course. To gain additional assurance the team also tested a sample of 6 learning outcomes during the event was satisfied that **all 32 learning outcomes continue to be met** to a level as required by the GPhC standards.

The following learning outcomes were tested at the event: **2, 3, 5, 7, 19, 31**

Domain: Person centred care (outcomes 1-6)

Learning outcomes met/will be met? Yes No

Domain: Professionalism (outcomes 7-15)

Learning outcomes met/will be met? Yes No

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

Learning outcomes met/will be met? Yes No

Domain: Collaboration (outcomes 27-32)

Learning outcomes met/will be met? Yes No

Key findings - Part 2 - Standards for pharmacist independent prescribing course providers

Standard 1: Selection and entry requirements

Standard met/will be met? Yes No

The team was satisfied that all six criteria relating to the selection and entry requirements will continue to be met. One recommendation was made.

The GPhC's Standards for the Education and Training of Pharmacist Independent Prescribers (GPhC, 2022) form the basis of the entry requirements for the programme. These include registration date and details with regulators, along with relevant clinical experience. They include a signed declaration on suitability from their employer, Designated Prescribing Practitioner (DPP), non-medical prescribing lead and the student. Relevant employment history and CPD in the chosen area of prescribing are also required. All applications are considered by the programme leader to ensure consistency of treatment. There will also be a face-to-face or live on-line assessment to check eligibility and suitability for the course. The interview process will ask direct questions about concrete experiential examples of attributes and understanding of the roles and responsibilities of a prescriber.

The selection criteria are applied consistently using a standard Entry Requirements Checklist and include documentation and records of the selection process for each applicant. Any reasons for rejection are documented and made available to the applicant. The types of experience and skills a rejected applicant could consider acquiring before reapplying will be provided.

The intention is to comply with the most recent guidance from the GPhC regarding minimum patient-facing experience to allow access to the course. Applicants are recommended to have a clinical qualification at postgraduate diploma level or equivalent clinical experience. The team was told that most applicants emanate from the School's MSc in Clinical Pharmacy. The team noted some confusion in the submission in that it was stated that applicants would require at least five years of post-registration experience; this appeared to be in conflict with the new GPhC requirements. The GPhC confirmed that the standards could not impose a minimum years' requirement. However, the team was told that the programme is currently accredited until the end of January 2023 meaning that the January 2023 entrants will be subject to the previous set of GPhC standards. Nevertheless, the team learned that the entry qualifications have been updated to reflect the new standards; these updates must be submitted to the GPhC. The team agreed that there be a **recommendation** that for the selection process it is advised that admissions processes be documented clearly around how applicants meet the entry requirements. This was because there are a number of processes that are not clearly documented. Whilst the accreditation team is assured that these are happening, the accreditation team wished to see clearly articulated documented processes for this area.

Applicants must identify an area of clinical practice in which to develop their independent prescribing competencies prior to enrolment. Applicants must provide evidence of the registration status of their nominated Designated Prescribing Practitioner (DPP). This includes proof of registration and registration status together with any stipulations to practise made against their registration.

Standard 2: Equality, diversity and inclusion

Standard met/will be met? Yes No

The team was satisfied that five of the six criteria relating to equality, diversity and inclusion requirements will continue to be met with one criterion subject to a condition.

All programme staff members have been trained to consider equality in the design and delivery of the programme and materials. The University employs policies that promote the adoption of reasonable adjustments to course delivery, materials and assessments if required to meet students' specific needs. The programme has been designed according to University policies and procedures. The programme has undergone a quality assurance process. This ensures that equal opportunities for access to the course, non-discrimination policies and health and safety policies are all considered.

University-based EDI data is routinely collected at the application stage. This is subject to audit against the University's standard systems and fed back to School. The School tracks differences with respect to undergraduate data including ethnicity, gender and background of students, but the team was told that this does not translate to the IP programme. The IP course itself does not collect EDI data and the School audit information has not identified any issues with the IP course or the MSc Clinical Pharmacy. The team agreed that there be a **condition** that EDI data must be collected for this course and used in a meaningful way when examining, considering, and analysing factors such as admissions, progression, attrition, and attainment. This is because although the team could see limited evidence of consideration of EDI factors being used to enhance individual student experience, no evidence was provided on how EDI data is collected and used in the design and delivery of the course and the overall learning experience. To meet this condition, the course team must submit a plan for the collection and use of EDI data and this must be sent to the GPhC before the next intake of students onto the course.

Registered pharmacist learners are expected to be familiar with the EDI principles set out by the GPhC. The fundamentals of legislation are included in lecture materials with links to appropriate legislation. All learners are expected to include a reference to diversity, human rights and equality in the learning contract with their DPP. Both staff members and students have access to the University disability support team for advice. This ensures that students with specific needs are given appropriate support and any reasonable adjustments required to meet the learning outcomes. Examples were provided of adjustments that had been made. Meeting the learning outcomes is a requirement to pass the IP programme for all students and the learning outcomes cannot be modified. However, any specific needs that require reasonable adjustments in order to meet the learning outcomes, including in the period of learning in practice, are considered.

Standard 3: Management, resources and capacity

Standard met/will be met? Yes No

The team was satisfied that five of the six criteria relating to the management, resources and capacity will continue be met with one criterion subject to a condition. One recommendation was made.

The University is directly funded for NHS-employed pharmacists by Health Education England North East (HEENE). The University is currently a HEENE preferred provider. HEENE commissions a variety of

postgraduate and continuing education programmes in health-related disciplines including Independent Prescribing for Pharmacists. The University is also the recipient of HEE's Pharmacy Integration Fund to allow community pharmacists, those working in primary care organisations and those employed in the managed care sector, predominantly Health and Justice, to be funded at a national contract tariff. The proposed number of cohorts per academic year is two, with each cohort comprising two or three parallel groups. The proposed maximum number of all students per cohort is 60 with a maximum of 20 per group. The course is specifically designed for pharmacists and does not enrol any other healthcare professionals. The staff commitment to the programme was estimated to be two to three plus external academic tutors.

The Programme Lead, a pharmacist, was responsible for the 2013, 2016 and 2019 reaccreditation applications and is the key deliverer of the teaching. The Programme Lead with another four pharmacist academics provides the programme, supported by four programme advisors, including a registered nurse practitioner. Additionally, the University has links with local acute and teaching hospitals and employs a number of staff on embedded appointments from hospitals, GP practices, community pharmacies and Sunderland Clinical Commissioning Group. External staff members are employed with an academic tutor contract and are supported by the Programme Lead. A number of academic staff and clinical staff from local Trusts are also engaged as advisers for programme development, course content, delivery, and assessment methods where appropriate. The team was given an example of the back-up support that had been implemented on an occasion when the Programme Lead had been indisposed. The team agreed that there be a **recommendation** that the accreditation team wished to see clearly articulated documented processes for risk management including all of the risks associated with the management, delivery and sustainability of the course and measures to mitigate those risks. This is because the team agreed that although some risks have been considered, the management of the course would benefit from more defined processes for identifying and managing risks across all elements of the course.

The course has access to purpose-built clinical skills teaching facilities that simulate clinical environments. These include private examination rooms and a ward facsimile. Simulated patients replicate clinical responses to physical and pharmacological stimuli. The clinical skills laboratories allow the development of a number of practical clinical skills using a variety of diagnostic tools and near-patient testing. The team was told that on-campus days have been condensed to intense whole-day sessions rather than spread out to help with room booking issues. The team was also told that the Increase in demand for places has led to investment from the University, including investment in additional facilities by the new Medical School.

The roles and responsibilities of the DPP and course provider are set out in the management plan and supported with written guidance. The Programme Lead works with internal and external stakeholders and advisors to ensure that the course provides a contemporary experience for students. This provides the learning opportunities that map both to the RPS Single Competency Framework for All Prescribers (2021) and the GPhC Standards for the education and training of pharmacist independent prescribers (2022). Course content and delivery is reviewed and adapted by the Programme Lead working in conjunction with other academic staff, internal and external stakeholders, and external advisers. The students' learning in practice will usually occur on NHS- or GPhC-regulated sites with health and safety risk assessments embedded in the workplace. The learner signs a self-declaration which includes their commitment to the nine University study days and 90 hours of supervised learning in practice. The DPP and learner must complete and co-sign a Learning Contract, a negotiated

contract between the two participants. This details the expectations, roles and responsibilities of the learner and the DPP. However, the team learned that the provider's responsibility was said to be to provide the student with information prior to recruitment. This is through the module guide and includes what students can expect. The team observed that a module guide is not a substitute for a learning agreement. Thus, the team agreed that there be a **condition** that the provider must adapt the Learning Contract that is currently in place, to ensure that it covers all learning, teaching and practice environments. This is because although a learning contract is in place between the pharmacist and the DPP, the provider is not party to the contract in that its roles and responsibilities and lines of accountability are not articulated in the contract. Details of this must be sent to the GPhC before the next intake of students onto the course.

Standard 4: Monitoring, review and evaluation

Standard met/will be met? Yes No

The team was satisfied that all four criteria relating to the management, resources and capacity will continue to be met.

The current University Certificate of Postgraduate Study: Practice Certificate in Independent Prescribing for Pharmacists was validated by the University in September 2019 and will be subject to periodic revalidation in 2025. The module has been reviewed recently by the University as an element of the larger MSc Clinical Pharmacy and is validated to 2023; it remains a stand-alone programme with the previously-agreed validation documentation. The programme undergoes validation and quality assurance processes which include assessment of the course to ensure it is up to date and reflects current practice.

The programme of study is compliant with the FHEQ Level 7 programme descriptor. It is quality assured at Faculty level against the relevant descriptors for a professional programme of study. An external examiner ensures the equivalence of the programme against external HEI benchmarks and assesses equivalence with similar qualifications offered by other institutions. The submission indicated that the external examiner has not raised any issues about the programme although the team noted comments about the requirement for more formative support. The provider told the team that the examiner would not be aware of all such support provided and indicated that it did consider the examiner's views.

The team was told that there have not been any concerns about the programme raised by IP students. Any such concerns would be discussed at Academic Board. There is a staff/student liaison group which can bring forward any concerns. At a regional level both the programme leader and the Associate Head of School sit on regional boards with HEE leads and can discuss concerns.

Any changes to national standards or frameworks that affect the programme are discussed at module and programme boards and actions put in place where necessary. The current clinical currency of the programme is periodically reviewed by programme advisors in clinical practice and stakeholders. This allows for advisory changes to programme content should it be required to ensure the content reflects contemporary practice. Students provide feedback by completing a mandatory Module Evaluation Form for HEE which is evaluated at the end of each cohort. DPPs also have the opportunity to provide feedback to the Programme Lead where necessary.

Standard 5: Course design and delivery

Standard met/will be met? Yes No

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

The programme is designed to provide learning opportunities that complement and enhance pharmacists' fundamental knowledge and skills, and leads to the acquisition of prescribing skills. A variety of contemporary teaching techniques are used. These are centred on clinical case-based learning and supplemented by factual knowledge acquisition, critical thinking, reflective practice, and physical assessment skills development. Case studies are employed throughout the taught component of the programme.

The taught element aims to cover knowledge and skills which will be applicable to the majority of pharmacists and that learners can use as a foundation. The learning outcomes link directly to the GPhC outcomes. This avoids potential student confusion where differences between programme and GPhC learning outcomes may exist. The learning outcomes are supplemented by the RPS Single Competency Framework for All Prescribers (2021) with learning outcomes cross-referenced to individual competencies.

The programme has an indicative course content that equates to 400 hours of learning activity over a maximum of 12 months, equivalent to approximately 60 days of full-time study. There are nine full days of formalised teaching on-campus and on-line. The programme is monitored by HEENE England and continues to be the only HEE-commissioned course solely for pharmacist non-medical prescribers in the North East of England.

A high proportion of the taught element involves the acquisition of clinical examination skills and generic diagnostic skills. These generic skills can be further developed during the learner's time in practice with their DPP. All learners are also provided with an opportunity to practise these skills on volunteer patients who give advice and direction and provide immediate formative feed-back for learners. Patients are from the Faculty Patient, Carer and Public Involvement (PCPI) scheme.

The course is designed with the central philosophy of patient-safety at its core. The importance of working within frameworks of competency and the consequences of migrating outside demarcated areas of competent practice is highlighted. All clinical practice tasks are supervised by the Programme Lead or appointed member of academic staff. Supervision arrangements, including supervision during clinical tasks and OSCEs in the University are carried out in line with University policies and procedures. All pharmacists enrolled on to postgraduate clinical programmes are made aware of the implications of behaviours that may raise concerns. Any learner proven to have engaged in academic misconduct would be subject to referral to the Faculty Fitness to Practise (FtP) system and depending on the type and severity of misconduct this can be referred to either employer or the GPhC FtP procedures. It was confirmed to the team that an FtP link is on the front page of the Canvas VLE; students will see this every time they use the VLE. The programme assumes a baseline understanding of FtP as students are all registered pharmacists.

Standard 6: Learning in practice

Standard met/will be met? Yes No

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

It was confirmed to the team that students are required to spend a minimum of 90 hours, equivalent to 12 days, in clinical practice with their DPP and write a fully referenced portfolio of evidence to support their assessment. The published requirements will be amended to reflect this requirement. One chapter of the learner's portfolio of evidence must confirm the attainment and demonstration of competencies as described within the RPS Single Competency Framework for All Prescribers (2021).

The DPP must confirm that they have the required number of years' experience in the student's area of practice and identify what experience they possess with respect to their supervision and assessment of non-medical prescribers including previous supervision of pharmacist independent prescribers. Experience is preferred in non-medical prescribing, but undergraduate and postgraduate medical training is considered acceptable alternative experience. Learners are advised that it is preferable to have a single supervisor, the DPP. However, it is recognised that it may not be possible for a single supervisor to individually sign off all competencies. For non-medical DPPs, further evidence is required to assess their competence against the RPS Competency Framework. This includes work history, testimonial from employer, and CPD. The team was told that DPPs should not have more than two students at a time, although it is difficult to confirm this in practice. The programme leader knows most of the DPPs and has had only one conversation with a DPP about a problem in the last three years.

The DPP signs a self-declaration stating that they agree to meet the requirements of the course, and learners are required to obtain the agreement of employers and line-managers to allow training in practice. The team was told that although there has been an increase in remote consultations since the COVID-19 pandemic, the preference is for students to have face-to-face meetings with patients. The portfolio of evidence contains sections evaluated as part of the student's overall assessment within the course, including confirmation of attainment and demonstration of competencies as described within the RPS Single Competency Framework for All Prescribers (2021). The DPP can comment on the student's progression throughout the course and to sign a declaration that 'the pharmacist has satisfactorily completed at least 12x7.5h days supervised practice'. The DPP Guide outlines the legal limitations of prescribing in the context of training, that a learner is not qualified to sign a prescription for a prescription-only medicine until they are annotated as a prescriber with the GPhC.

Standard 7: Assessment

Standard met/will be met? Yes No

The team was satisfied that all eleven criteria relating to the assessment will continue to be met.

A variety of assessment techniques examines a learner's ability to demonstrate their factual, interpretive, applied and physical knowledge and skills. All assessments are subject to standard University internal moderation procedures and are reviewed by the external examiner. All staff

members engaged in assessments are pharmacists or medical staff working in an academic capacity, with the majority of pharmacists assessing being independent prescribers.

The Sequential Clinical Assessment (SCA) is a method for assessing a learner's knowledge and skills applied to a simulated clinical scenario. This type of OSCE allows assessment of 'shows how' and 'does' while the portfolio of evidence with DPP-assessed competency log demonstrates 'does'. The course is front-loaded with the taught element done first with a number of assessments, including the sequential testing element and MCQs. Thus, the submission of the portfolio of evidence is allowed only after OSCE, MCQ and oral presentation assessments have been completed and passed. The assessment methods test the learners' knowledge and competencies at the required level of Miller's triangle. MCQ and oral presentations enable assessment of the students' knowledge and can demonstrate 'knows' and 'knows how'. Although not strictly required by the GPhC, the programme-specific regulation that acts or omission that would result in patient harm automatically result in course failure has been retained. If monitoring flags up that a student is not making the required progress, intervention will depend on where in progression of the student the problem arises. Identified issues are talked through with the student and DPP.

Attendance is confirmed by registration on each of the taught days at the University. Additionally, learners have to complete a detailed diary of their contact hours with the DPP. DPPs are provided with the RPS Competency Framework which details the broad domains of prescribing competency together with the individual underpinning competencies within each of the domains. Learners have an opportunity to undertake a mock OSCE and MCQ assessment which enables them to practise their practical skills under examination conditions and receive feedback from examiners. DPPs provide feedback throughout the period of learning in practice to assist in the attainment of the required competencies. There is no compensation allowed between elements of assessment within the programme. This includes compensation between assessments in the taught component and in the time in practice. Learners have the opportunity to re-sit any individual element of assessment once; if the learner is referred after a second attempt they are deferred in the entire programme and are subject to re-sitting with attendance if they wish to re-attempt the course.

Standard 8: Support and the learning experience

Standard met/will be met? Yes No

The team was satisfied that all four criteria relating the support and the learning experience will continue to be met. One recommendation was made.

Prospective applicants are invited to an information exchange with the Programme Lead prior to enrolment on the course. This acts as pre-enrolment induction to the course. An introductory lecture provides course-specific information including a summary of the educational approach adopted in the programme and a summary of the types of assessment learners will encounter.

To facilitate workload, the course is designed over a nominal 12-month duration to provide adequate time for most in-work learners, although learners may submit their portfolios earlier if they wish. The course is structured so that learners have the nine taught days, oral presentation, SCA, and MCQ in the first three months of the programme. Learners are recommended not to begin their supervised practice until all assessments have been completed. However, they are encouraged to engage with their DPP at the course's outset to plan their time in practice.

The learner has access to the Programme Lead, who is the *de facto* personal tutor, and other academic staff at any point during the course for academic and pastoral support. Learners and their DPP are required to meet at the start of the training period to agree and sign a learning contract which details the expectations, roles and responsibilities of both. In the case of problems between the student and their DPP, the team was told that the Programme Lead meets all the students at each of the nine contact days to discuss any problems. It is made clear to students that issues that they are dealing with should be discussed, and students are encouraged to start a dialogue at the early stage of the course. However, it was confirmed that there are no formalised periodic/tripartite reviews between student, DPP and University. The team agreed that there be a **recommendation** that it wished to see clearly articulated documented processes for the monitoring of the mechanisms for pharmacist independent prescribers in training to meet regularly with their DPPs to ensure that learners' progress is documented, and intervention can take place if required. This was because there are a number of processes that are not clearly documented. Whilst the accreditation team is assured that these are happening, the accreditation team wished to see clearly articulated documented processes for this area.

A VLE page outlines the process for raising concerns about the quality of the course, the supervision of the DPP, the practice of healthcare professionals and safeguarding. Any concerns regarding the quality of the course or DPP supervision are initially directed to the course lead who will aim to resolve the issue where possible and in a proportionate time frame. The team was told that there is no formalised system but that any concerns raised will be documented as part of the programme review; then considered by Academic Board. The main issue was said to be not enough time with the DPP. In such cases, the Programme Lead will speak to the DPP to understand what the concern is. Reassurance is given to DPP on their roles and responsibilities. The vast majority of issues were said to emanate from the DPP, for example, practical issues such as the necessity for the student to actually sit in the room with the DPP. The team agreed that there be a **recommendation** that it wished to see clearly articulated documented processes for raising concerns; there needs to be a process for documentation of responses and actions in meeting concerns raised. This was because there are a number of processes that are not clearly documented. Whilst the accreditation team is assured that these are happening, the accreditation team wished to see clearly articulated documented processes for this area.

Standard 9: Designated prescribing practitioners

Standard met/will be met? Yes No

The team was satisfied that four of the five criteria relating to the designated prescribing practitioners will continue to be met with one criterion subject to a condition.

Students are advised that they should approach DPPs that have a proven record in education and training and have preferably supervised previous non-medical prescribers. Where that is not possible there are supportive materials and one-to-one advice within the course documentation and from the Programme Lead. All DPPs are required to meet the requirements and standards of their respective regulatory bodies and must self-declare their competence to carry out this supervisory activity. Pre-course checks are made against their registration and any appropriate annotations or stipulations. The DPP must be impartial to the outcome for the student and should not be the person sponsoring the student to undertake the programme, nor should they be related to the student.

It is a requirement that a medical DPP has 3 years' experience and a non-medical DPP has 5 years' experience of patient medical assessment, treatment and prescribing experience in the student's area of practice. DPPs without prior IP mentoring experience are directed to seek guidance from the Programme Lead prior to embarking on the period of supervised practice and assessment of competencies. If they work in a teaching environment, they would also be encouraged to seek the advice and guidance of other experienced mentors. A separate declaration from the learner's employer is also required to ensure that appropriate consideration has been made from both the student and supervisor perspective. The team was told that the majority of DPPs are hospital consultants, with one or two general medical practitioners. Non-medically qualified DPPs have to sign the same competency statement as medical DPPs, but the team was told that students are recommended to work with medical DPPs due to their breadth of experience. This has not been possible for all pharmacists who must discuss requirements and expectations with their non-medically qualified DPPs. The team was told that there has only been one non-medically qualified DPP to date. It was stressed that the same competence criteria are required for all DPPs.

DPPs are required to declare that they have suitable previous experience as a mentor and trainer within their scope of practice. They must meet the requirements of the DPP competency framework and be aware of their duties regarding equality and diversity. The DPP and learner must complete and co-sign a Learning Contract which is a negotiated contract detailing the expectations, roles and responsibilities of the learner and the supervisor.

The Programme Lead reviews the learners' progression through the course and provides DPPs with progression data that highlights the DPP's own student in comparison to the rest of the cohort. In situations where students have not progressed, DPPs are invited for a case discussion with the Programme Lead. At the end of the course there is a mandatory feedback system which includes feedback on DPP supervision. This is part of a mandatory feedback form for HEE which is required to be submitted as part of the portfolio in order to pass. The feedback includes the overall experience of the programme and supervision and is anonymous. Generic feedback is provided to DPPs but there is no ongoing formalised or individualised feedback. Any concerns raised by a DPP would be reviewed in a timely manner by the Programme Lead and appropriate support put in place where possible. The team agreed that there be a **condition** that the provider must develop an appropriate feedback process for all DPPs regarding their overall performance as prescribing supervisors, including the arrangements for extra training, support and development as necessary. Details of this process must be sent to the GPhC before the next intake of students onto the course.

