

**Liverpool John Moores University  
independent prescribing course  
reaccreditation event report, March 2020**



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## Event summary and conclusions

<b>Provider</b>	Liverpool John Moores University
<b>Course</b>	Independent prescribing course
<b>Event type</b>	Reaccreditation
<b>Event date</b>	2 March 2020
<b>Reaccreditation period</b>	June 2020 – June 2023
<b>Relevant standards</b>	GPhC education and training standards for pharmacist independent prescribers, January 2019
<b>Outcome</b>	<p>Approval with conditions</p> <p>The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that pharmacist independent prescribing course provided by Liverpool John Moores University should be reaccredited for a further period of three years, subject to three conditions.</p>
<b>Conditions</b>	<ol style="list-style-type: none"> <li>1. To provide evidence that the principles of equality and diversity are embedded in course design and delivery and to use Equality and Diversity data (including protected characteristics) to inform the design and delivery of the course. This is to meet criterion 2.1, and 2.2.</li> <li>2. The provider must review the course clinical skills teaching and assessment to ensure that all students can demonstrate fundamental clinical and diagnostic skills. This is because the team believes that vital signs are appropriate to the scope of practice for all pharmacist independent prescribers. This is to meet 5.1 and 7.1</li> <li>3. The provider must implement a valid and reliable quality assurance process for the assessments carried out in the practice setting. This is because the team considers that the assessments undertaken by the DMPs and other assessors in the workplace are not fully under the control of the University quality assurance procedures. This is to meet 7.7</li> </ol> <p>Evidence of how the conditions have been addressed must be sent to the GPhC for approval by the accreditation team. This must be done before 31 May 2020.</p>
<b>Standing conditions</b>	Please refer to Appendix 1

<b>Recommendations</b>	<p>There was one recommendation:</p> <ol style="list-style-type: none"> <li>1. Review the structure of the OSCEs so that the assessment time starts once the student has confirmed that they have read the instruction sheet and are ready to begin. This would allow accommodation for students with specific needs who require additional time for reading, which cannot be accommodated in the current structure which includes reading of the instructions with the demonstration of competency element. This relates to criterion 2.3.</li> </ol>
<b>Minor amendments</b>	<ul style="list-style-type: none"> <li>• To amend the wording of the professional reference document to correctly reflect the entry requirement ‘...relevant clinical or therapeutic experience...’. (criterion 1.4)</li> <li>• To amend the wording of the Student Feedback Form to refer to the DPP using the correct term ‘Designated Prescribing Practitioner’ (criterion 4.5)</li> </ul>
<b>Maximum number of all students per cohort:</b>	40
<b>Number of pharmacist students per cohort:</b>	40
<b>Number of cohorts per academic year:</b>	2
<b>Registrar decision</b>	<p>Following the event, a satisfactory response was received to meet the three 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 June 2023.</p>
<b>Key contact (provider)</b>	Professor Charles Morecroft
<b>Accreditation team</b>	<p>Dr Ruth Edwards (event Chair), Head of Professional Experience, Aston University</p> <p>Sandra Hall, Retired Head of Pharmacy Practice, Leicester School of Pharmacy, De Montfort University</p> <p>Fiona Barber, Independent Member, Leicester City Council</p>
<b>GPhC representative</b>	Amy Beales, Quality Assurance Officer, GPhC
<b>Rapporteur</b>	Philippa McSimpson, Quality Assurance Manager, GPhC

## 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

Liverpool John Moores University approached the GPhC with an application for accreditation of a course to train pharmacist independent prescribers and an accreditation event was held in December to review the course's suitability for accreditation. In line with the GPhC's process for new providers of pharmacist independent prescribers, the event was held on site at Liverpool John Moores University to allow for the GPhC's accreditation team to view the facilities available. Accreditation was achieved in March 2017 for a period of three years, subject to one condition and a successful monitoring event after completion of the first cohort of the course. The condition was:

1. The School must articulate a teaching and learning strategy for the acquisition of clinical examination and diagnostic skills, including details of who will be involved in such teaching, together with their roles and responsibilities. The team agreed that clinical examination and diagnostic skills are key areas for pharmacists and that the University did not have a clear strategy on how these would be developed and delivered within the programme. This is to meet criteria 1.3 and 3.3.

Following the event, the provider submitted a response to the condition and the accreditation team agreed that the condition has been met satisfactorily.

A monitoring event took place in June 2018, and approval was given for the remaining period of accreditation to March 2020.

During 2019, the provider requested an extension to the accreditation period for a period of three months to allow them sufficient time to complete the internal university validation process. The extension was agreed, and the accreditation period extended until the end of June 2020. An event was scheduled for March 2020 to review the programme against the GPhC education and training standards for pharmacist independent prescribers published in January 2019. This record is an account of that event.

The programme offered by this provider is solely delivered to pharmacists and approval has been given for two cohorts per year, each with a maximum of 40 students. The programme is 6 months duration and includes seven face to face contact days. It is delivered by the Liverpool John Moores school of pharmacy and is led by a pharmacist.

## 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 the team requested additionally that copies of the external examiner's reports be submitted. These were provided promptly, and the team agreed that the documentation was sufficient to proceed to an event.

## The event

The event was held at the GPhC offices in London on 2 March 2020 and comprised a number of meetings between the GPhC accreditation team, representatives of the Liverpool John Moores independent prescribing course, and students (via teleconference).

## Declarations of interest

There were none.

## Schedule

### The event

Meeting number	Meeting	Time
1.	Private meeting of accreditation team and GPhC representatives	09:30 – 11:30
2.	Meeting with provider	11:30 – 13:00
	Lunch	13:00 – 13:45
3.	Student meeting (by teleconference)	13:45 – 14:30
4.	Private meeting of the accreditation team	14:30 – 14:45
5.	Learning outcomes testing session	14:45 – 15:30
6.	Panel private meeting	15:30 – 16:30
7.	Feedback to provider	16:30 – 16:45

# Key findings

## Part 1 - Learning outcomes

As part of the reaccreditation process the team reviewed the course's teaching and assessment in relation to all 32 learning outcomes.

To gain additional assurance the team tested a sample of **six** learning outcomes during a separate meeting with the provider, and as a result of this was satisfied that **all 32 learning outcomes would be met** during the course to the level required by the GPhC standards, once condition 2 has been addressed satisfactorily.

The following learning outcomes were tested at the event: **6, 15, 19, 22, 26, and 28**

Please see **appendix 2** of this report for a hyperlink to the detailed list of learning outcomes.

### 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

Learning outcome 19 'Demonstrate clinical and diagnostic skills in clinical setting appropriate to their scope of practice' was deemed not to be met as the team was not satisfied that the teaching and assessment on the programme ensured that all students would demonstrate competence in core clinical and diagnostic skills, which are relevant to the scope of practice for all pharmacist prescribers. **Condition 2** was set to address this.

### 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

**The team was satisfied that all six criteria relating to the selection and entry requirements will be met. Minor amendment is required in relation to one criterion (See Appendix 3 for criteria).**

Information regarding the entry requirements for the course are clearly set out. Applications are made via an online form which requires the applicant to demonstrate how they meet all of the entry requirements. A professional reference, employer reference and DPP information must be provided as part of the application, and the course provider has an interview option to help assess applications where further information and clarification is needed. The applications process uses a triangulation of information to help ensure suitability of the applicant. The provider has a conditional offer process should documentation or other verification be outstanding, with a checking process to ensure only those who meet the criteria are accepted onto the programme.

### Standard 2 - Equality, diversity and inclusion

**The team was satisfied that three of the five criteria relating to the equality, diversity and inclusion will be met with two criterion subject to a condition. One recommendation was made**

The university has a range of equality and diversity policies, however the application of these to the prescribing programme was not clear in places. All staff inputting to the programme are required to undertake equality and diversity training and there is a professional expectation to update this on a routine basis. The provider described a number of processes in place to support students' specific needs on the programme such as variable height desks, accessible clinical skills suites, and large print documents. The provider confirmed however that when designing the revised course, they had not undertaken a review of the changes in relation to equality diversity and inclusion. They aimed to instead to be proactive in anticipating the needs of students and also allowing students to raise needs with their tutor as and when they arose.

The team noted that the provider had not undertaken an analysis of performance against protected characteristics and the provider confirmed that currently student data on protected characteristics was held centrally by the university and not accessible by the course team. A formal request had been made and the team hoped to be able to access and review this data in due course.

Following reviewing of the documentation and further information provided by the provider the team agreed that they had not seen sufficient evidence of the steps that had been taken to ensure that principles of equality and diversity are embedded in and promoted through course design and delivery and that equality and diversity data had not be used when designing the

course. The team agreed that criterion 2.1 and 2.2 were not met and set **condition 1** in order for the provider to address them.

The provider has a process for allowing students to request reasonable adjustments and aims to pre-empt requirements where possible so that the facilities are suitable without additional adjustments. The provider stated that reasonable adjustments are not permitted to be made to the OSCE due to it being a competence assessment. The team made a **recommendation** that the format of the OSCE be reviewed as separating out the reading of the instructions sheet at the start of the assessment would mean that adjustments could be made to the reading time for those with specific needs without impacting on the assessment of competence.

### Standard 3 - Management, resources and capacity

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

The team was satisfied that the course is sufficiently staffed and that staff have appropriate background and experience to deliver the programme, and are aware of their responsibilities and reporting lines. The past student who met with the team praised the responsiveness of the staff team and the support available to them. Staff absence is mitigated against through assigning two members of staff to every element of the programme.

There are learning agreements in place on the programme and all relevant parties are involved in agreeing these. A formal review of the student's progress against the learning plan is undertaken at specific points in the course, with opportunities for informal discussions as and when required.

### Standard 4 - Monitoring, review and evaluation

**The team was satisfied that all six criteria relating to the monitoring, review and evaluation will be met. Minor amendment is required in relation to one criterion.**

The team was satisfied with the processes described for evaluating the programme and the teaching quality, updating the course contents and seeking external review.

### Standard 5 - Course design and delivery

**The team was satisfied that nine of the ten criteria relating to the course design and delivery will be met with one criterion subject to a condition.**

The course is delivered through a combination of face-to-face teaching and online learning. The face-to-face teaching element comprises of four study days. A flipped classroom approach is taken for some of the teaching whereby students access the learning materials and carry out self-study activities before the face-to-face teaching session.

The team understood that it was intended that clinical and diagnostic skills would be delivered through online learning materials and students would have the option of joining a lunchtime session for any skills that they wish to practice and could decide for themselves whether the content was relevant to their area of prescribing practice. The team wished to understand, given

this arrangement, how the provider ensured that core clinical diagnostic skills were held by all students. The provider explained that clinical skills are assessed within the portfolio, many of which are tailored to diagnostic assessments as the students must demonstrate competence in practice with their DPP of specialist diagnostic assessments relevant to their area of practice. The team was satisfied with the process described for teaching and assessing specialist diagnostic skills relevant to an individual students' own area of prescribing practice, but was not confident that all students would be provided with sufficient teaching and assessing of core skills to assess a patient's vital signs which the team felt was necessary to provide the core set of skills required to assess a patient. As such the team agreed that criterion 5.1 was not met and set **condition 2**.

## Standard 6 - Learning in practice

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

Expectations of the learning in practice element of the course are set out for students at the start of the course. As students sometimes find it a challenge to arrange learning in practice time around their work commitments and the availability of the DMP, the provider advised students early on to arrange their first learning in practice session as far in advance as possible.

Other professionals may supervise the students whilst they are learning in practice if agreed by the DPP, and so the DPPs are provided with information during their introductory webinar on what they may delegate, and to whom. The course provider reviews each students' learning in practice portfolio to ensure only appropriate individuals sign off the log of learning in practice.

## Standard 7 - Assessment

**The team was satisfied that ten of the eleven criteria relating to the assessment will be met with one criterion subject to a condition.**

The team was satisfied with the range of assessments; however it was concerned that there was insufficient University quality assurance of the assessments undertaken in practice, particularly in relation to students' demonstration of clinical skills. As this element is only planned to be assessed in the practice setting the team had concerns over the consistency and validity of this assessment. The team was not satisfied that criterion 7.7 had been met and set **condition 3** to address it.

## Standard 8 - Support and the learning experience

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

A detailed induction is provided to students to set the expectations and requirements for the course. Students have access to support from the course team and are assigned a personal tutor who they meet with at specific points during the programme and as needed between these points. The past student who met with the team found the course team to be very responsive and supportive. There are clear processes in place for raising concerns.

## Standard 9 - Designated prescribing practitioners

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

The team was satisfied with the process used to ensure the suitability of the DPP and of the practice setting before the students are enrolled on the course.

DPPs are provided with detailed information on their responsibilities via a webinar at the start of the course and have access to the course team throughout should they need additional guidance or support. In order to prepare for the introduction of non-medical DPPs the provider has adapted the webinar, and prepared new supplementary information which is written in such a way as it is suitable for all professions, but with signposting appropriate to each profession. The provider has considered the issues that might be presented and are prepared for the additional challenges that may be faced.

## 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 course;
  - 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 course.
4. The provider must make students and potential students aware that successful completion of an accredited course is not a guarantee of annotation or of future employment as a pharmacist independent prescriber.
5. The provider must make students and potential students aware of the existence and website address where they can view the GPhC's accreditation reports and the timescales for future accreditations.
6. 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.



