

# **University of Brighton independent prescribing course reaccreditation, July 2023**



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## Event summary and conclusions

<b>Provider</b>	University of Brighton
<b>Course</b>	Independent prescribing course
<b>Event type</b>	Reaccreditation
<b>Event date</b>	3 July 2023
<b>Approval period</b>	September 2023 – September 2026
<b>Relevant standards</b>	<b><u>Standards for pharmacist independent prescribers, January 2019, updated October 2022</u></b>
<b>Outcome</b>	<p>Approval</p> <p>The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the pharmacist independent prescribing course provided by the University of Brighton should be reaccredited for a further a period of three years. There are no conditions or recommendations.</p>
<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>	No recommendations were made.
<b>Minor amendments</b>	<ul style="list-style-type: none"> <li>• <b>To update the course name so consistent throughout documentation</b></li> <li>• <b>To update all relevant documents to reflect that at least 45 of the 90 hours in practice must be supervised by the Designated Prescribing Practitioner (DPP). Anything else must be under the supervision of someone who is also a qualified prescriber.</b></li> </ul>
<b>Registrar decision</b>	<p>The Register is satisfied that the University of Brighton has met the requirement of continued 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 Brighton is approved to continue to offer the independent prescribing course for a further period of 3 years. The Registrar notes that there were no conditions associated with this event.</p>
<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>	2
<b>Approved to use non-medical DPPs</b>	Yes
<b>Key contact (provider)</b>	Connor Thompson, Senior Lecturer
<b>Provider representatives</b>	Connor Thompson, Senior Lecturer Danny Bartlett, Senior Lecturer Dr Matt Ingram, Associate Dean for Academic Operations Professor Graham Davies, Senior Academic Lead Dr Greg Scutt, Principal Clinical Lecturer
<b>Accreditation team</b>	Dr Andrew Sturrock (event Chair), Associate Professor of Public Health, Northumbria University Ahmed Aboo (team member - academic), Associate Professor in Pharmacy Practice, De Montfort University Katie Carter (team member - lay), Consultant in Healthcare Regulation and Education
<b>GPhC representative</b>	Rakesh Bhundia, Quality Assurance Officer (Education), General Pharmaceutical Council
<b>Rapporteur</b>	Juliette Gaunt (Rapporteur) Dean – Teaching and Learning
<b>Observer</b>	Kris Sheach, Governance Officer

## 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, updated October 2022.

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/ukxi/2010/231/contents/made>

### Background

The University of Brighton, referred to as "the provider," obtained GPhC accreditation in 2014 for a course training pharmacist independent prescribers, valid for a 3-year period. In compliance with the updated standards for pharmacist independent prescriber education and training, a review event was scheduled on 3rd July 2023 for reaccreditation consideration.

Since 2006, the University of Brighton has maintained a longstanding association with delivering independent prescribing (IP) programmes to practitioners from diverse professional backgrounds. The first pharmacist independent prescriber programme accredited by the Royal Pharmaceutical Society (RPSGB) in 2008 for three years and was co-delivered with nursing. Subsequent successful accreditations followed, reflecting adjustments made to the IP programme to programme evolving student needs.

In 2014, a significant change occurred when the pharmacy department developed a 30-credit programme with a specific pharmacy focus in response to local stakeholder requests. This change coincided with the last GPhC reaccreditation event in November 2014, resulting in another three-year approval period with a single condition. The condition required the submission of a self-evaluation report, incorporating student feedback, evidence from quality assurance committees, and a statement of resources, following the completion of the first cohort of pharmacists.

In 2018, the last cohort of pharmacist independent prescribing trainees completed the programme based on the previous set of prescribing standards. A pharmacist-specific IP programme was not offered from 2019 onwards due to leadership changes, ongoing restructuring within the Provider's Schools, and a focus on existing Pharmacy teaching, including undergraduate and postgraduate.

In 2022, the School of Applied Sciences made several new staff appointments, including three additional qualified IPs, leading to the decision to run the course again and revise the module in accordance with the updated GPhC standards for independent prescribing.

The proposed new structure of the IP module has been collaboratively developed with various prescribing stakeholders to support students' progression towards independent prescribing while meeting GPhC regulations and regional employers' demands for pharmacists.

The Provider is now reopening the opportunity to study Independent Prescribing, seeking reaccreditation in response to local demand and market needs. With a full team of IP staff now in substantive roles, they are well-equipped to support the IP programme.

## Documentation

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

## The event

The reaccreditation event was held remotely by videoconference on the 3 July 2023 and comprised of several meetings between the GPhC accreditation team and representatives of University of Brighton prescribing course. There was no student data to be reviewed as the programme has been paused in operation since accreditation lapsed, prior to the Covid-19 pandemic in 2019.

## Declarations of interest

Ahmed Aboo declared that Claire May is External Examiner for Clinical Pharmacy at De Montfort University. The team agreed all parties could continue and this was not a detrimental conflict.

## Schedule

Meeting	Time
Private meeting of accreditation team and GPhC representatives, including break	09:30 – 10:30
Meeting with course provider representatives	11:00 – 12:45
Lunch	12:45 – 13:45
Learning outcomes testing session	13:45 – 14:15
Private meeting of the accreditation team and GPhC representatives	14:15 – 15:15
Deliver outcome to the provider	15:15 – 15:30

## 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 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, 5, 8, 18, 19, and 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 be met.**

All applicants for the "Enhanced Prescribing for Pharmacists" course are required to provide professional registration details on the application form. The applications will undergo thorough screening, including verification of registration and fitness to practice information through the GPhC website. Applicants must demonstrate prior experience in a UK pharmacy setting and specify their intended prescribing area, supported by appropriate documentation. Adequate detail aligned with the competency framework for designated prescribing practitioners provided by the Royal Pharmaceutical Society (RPS) must also be provided.

The admissions process adheres to the Provider's admissions policy, ensuring openness, fairness, and compliance with relevant legislation. All staff involved in the process have completed mandatory Equality, Diversity and Inclusion (EDI) training, and reasonable adjustments will be provided to applicants who require them.

Applicants can seek advice from the Provider prior to applying, ensuring equal opportunities for learning and participation. The application process includes a check for disabilities/learning needs requiring adjustments, and relevant staff have completed EDI training in managing diversity, equality, and diversity essentials, and unconscious bias.

The GPhC's guidance on the standards for pharmacist independent prescribers (Oct 2022) will be provided to applicants, outlining the experience required before applying. Entry requirements align with GPhC standards.

Each application will be evaluated against a defined checklist related to the prerequisites, ensuring applicants possess sufficient and relevant experience. Applicants not meeting the admission criteria will be promptly notified, with the option to request feedback for improvement.

During the event, the team discussed various aspects of the course. The formal module title is "Enhanced Prescribing for Pharmacists." Recruitment is pending GPhC approval, but the Provider has potential applicants ready for notification upon reaccreditation. The Provider plans to utilise local community networks to assist with recruitment. The application process is managed by the Course Lead, with training provided to staff involved in selection. The plan is to recruit up to 30 students to each cohort.

Guidance is provided in the application process, emphasising relevant experience as a key factor for success. The team discussed discipline-specific practice examples aligning with IP requirements. Applicants are expected to have at least six months of patient-facing experience, closely scrutinised



during the application process. The provider is supported by relevant DPPs, ensuring clinical opportunities and supervision are available.

Applications are reviewed based on application strength, and rejections are not solely due to scope of practice, ensuring clinical care is not compromised. When considering the specialist area chosen by the applicant the course team considers the applicant's working/clinical environment, the breadth of drugs they will be working with and the nature of the support required. The DPP must also show there are appropriate patients' throughput to support the student's choice of specialism. A scope of practice session takes place early on in the course and there are prescribers from all sectors on the programme team.

## Standard 2: Equality, diversity and inclusion

Standard met/will be met? Yes  No

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

The Provider's Curriculum Design Framework serves as the foundation for all undergraduate and postgraduate programmes, aiming to realise potential and shape futures through high-quality, practice-based learning, teaching, research, and enterprise. The framework is guided by five main principles, namely transition pedagogies, inclusive practice, real-world practice-based and research-led teaching, employability and enterprise, and digital learning. Inclusivity is a core value within the Provider's strategy, and its Equality, Diversity, and Inclusion Strategic Plan further outlines commitments and objectives for enhancing approaches and practices in this area. The plan aligns with UK legislation, including the UK Equality Act 2010 and the Quality Assurance Agency's UK Quality Code for Higher Education.

Pharmacy courses follow an Inclusive Practice Partnership initiative, ensuring inclusivity is embedded in key education and student experience policies. Strategies to enhance equality, diversity, and inclusion are regularly reviewed based on internal and external data on student outcomes and experiences. All staff undergo equality and diversity training as part of their induction package, demonstrating understanding and awareness of their duties in relation to equality and human rights.

Reasonable adjustments and Learning Support Plans are provided for students with 'protected characteristics' impacting their ability to learn and perform under specific conditions. These adjustments are made in accordance with the institution's legal responsibility to provide reasonable accommodations.

During the event, the team raised questions related to equality and diversity principles in course design and delivery. The Provider highlighted their approach, which includes a flipped learning approach allowing students to integrate clinical experiences into the learning environment, promoting equality and diversity through case-based approaches. The provider emphasised their plan to monitor and review EDI data, including admissions, completion, and attainment, through various feedback methods at regular intervals. An EDI committee and the Module Team review all data periodically and produces recommendations and timelines for relevant changes in collaboration with pharmacy leadership groups.

The Provider is committed to fostering an inclusive learning environment, promoting equality and diversity principles throughout its educational offerings.

### Standard 3: Management, resources and capacity

Standard met/will be met? Yes  No

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

The day-to-day management of the course falls under the responsibility of the independent prescribing lead who is a member of the Pharmacy Subject group. Support is provided by other team members.

Following the merger of the School of Pharmacy and Biomolecular Sciences and the School of Environment and Technology, the Provider and the School of Applied Sciences have redeveloped their structures and budgets. Regular planning meetings, both at the Provider and School level, have been implemented to discuss staffing, resources, and business plans, enhancing management transparency and communication. The School Leadership Group, including the Pharmacy Area Subject Lead, meets monthly to address various subjects' strategic visions and resource-related matters. Staff within the Pharmacy subject area can raise any issues in regular staff meetings, which are then communicated to higher management levels for resolution.

In relation to resources, the provider confirmed staffing plans, with the appropriate resources allocated to support the IP course's needs. VLE responsibilities are outsourced to an external cooperative, with internal IT support. Staff receive training and support to effectively deliver the programme, including mentorship and development opportunities, ensuring the quality and rigor of teaching and learning. The provider monitors and manages issues efficiently, and a University workload allocation model is in place to ensure workload distribution.

The provider acknowledged some risks associated with student recruitment numbers and their potential impact on the programme's reputation. However, they stated that no further risks were apparent and highlighted the possibility of developing a robust risk management strategy for future support. Staff members receive adequate support to work effectively and meet the programme's standards and requirements, ensuring the ongoing currency of their knowledge through practice-based experiences.

### Standard 4: Monitoring, review and evaluation

Standard met/will be met? Yes  No

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

Quality matters pertaining to the "Enhanced Prescribing for Pharmacists" programme are reported to the School Quality and Standards Committee (SQSC), while resourcing matters are addressed by the School Executive Board (SEB). The SQSC and SEB meetings, held monthly and weekly respectively, cover all aspects of learning, teaching, and administration of pharmacy courses, leading to course improvements. Regular meetings, such as the Medicines Use Prescribing Group, Pharmacy Staff

Meetings, Pharmacy Leadership Group, and Pharmacy Academic Operations Advisory Group, ensure comprehensive discussions on prescribing and teaching-related matters.

The programme undergoes annual reviews, generating an Academic Health Report with student feedback, course performance, and action points from the Medicines Use Prescribing Group. Quality assurance processes involve feedback from students, Designated Prescribing Practitioners (DPP), external examiners, and stakeholders, overseen by the School Quality and Standards Committee. Regulatory issues are proactively addressed with transparency and openness, seeking permission for changes from the GPhC.

Academic standards are maintained through a shared and common framework, promoting equity, transparency, and choice. Modules comply with assessment and feedback policies, double marking and moderation policies, and grading descriptors, approved by the School's Quality and Standards Committee. Annual quality assessment, cyclic review processes, and module compliance ensure quality assurance.

Feedback from students and DPPs is regularly reviewed to identify areas of concern or trends, leading to course improvements for future cohorts. The prescribing programme is monitored through student module evaluation feedback forms, and student representatives facilitate DPP review sessions for anonymous feedback.

The provider plans to embed the Prescribing Advisory group as an annual stakeholder meeting to enhance the IP provision and meet bi-annually. The IP provision has evolved to reflect significant changes in health and social care delivery and pharmacy roles, with modernisation approaches such as flipped learning, contextualised practice, and focus on NHS priorities, ensuring currency in remote and online prescribing.

During the event, the team discussed various aspects, including recruitment plans for stakeholders, course modernisation strategies, and maintaining currency in prescribing practices. The provider reassured the team regarding their comprehensive approach to adapting the programme to the evolving needs of the sector and addressing NHS priorities, including deprescribing.

## 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 be met.**

The Teaching, Learning, and Assessment Strategy for the "Enhanced Prescribing for Pharmacists" programme outlines the delivery, support, and assessment aspects. The course adopts a "flipped learning" approach, requiring students to complete prerequisite learning online before attending face-to-face study days. During these study days, workshops and seminars facilitate in-depth exploration of the subject. Additionally, students must spend a minimum of 90 hours in practice, guided by their learning contract and supervised by their DPP or approved healthcare professional.

The eLearning provided by the Health and Education Co-operative forms part of the pre-requisite learning, allowing students to work at their own pace based on their experience. The time in practice enables them to apply learning and develop skills under supervision. Work-based assessments and peer reviews provide feedback, allowing reflective practice and development of action plans to meet learning outcomes.

Summative assessments confirm prescribing knowledge and applied competence. The DPP's supervision assesses the student's performance during practice, with work-based assessments contributing to final sign-off. Regular meetings, such as the Medicines Use Prescribing Group, allow discussions among the core academic team on programme development, keeping it relevant to the profession.

Stakeholder engagement ensures content remains relevant, and feedback from DPPs and students leads to ongoing evolution of the programme. The programme also engages with university-level review processes.

DPPs play a vital role in the programme, and their responsibilities are outlined in the DPP Handbook. The Provider has a Fitness to Practise Procedure, and registration status of students is checked at enrolment. Procedures are in place to address concerns about students' conduct or patient care, and struggling students receive comprehensive support through various mechanisms and structures.

During the event, the provider effectively addressed concerns about supporting struggling students by highlighting a range of available mechanisms, including prescribing cafes (peer networking in the presence of a teacher), support sessions, tutor meetings, and open feedback loops. The provider also emphasised their "open-door" policy for student support. The front loading of the teaching parts of the programme ensure that students are fully prepared for going out into practice and that struggling students can be identified early on.

## 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 be met.**

The student in the "Enhanced Prescribing for Pharmacists" programme is required to complete a minimum of 90 hours in a patient-facing clinical setting that aligns with their scope of practice. The requirements for the learning environment during this time in practice are clearly outlined in the online prospectus to ensure both students and DPPs are aware of the expectations.

DPPs play a crucial role in supervising students during their time in practice. They are required to sign the application form and attend an online meeting with a member of the core academic team to confirm their awareness of the supervisory expectations, including direct supervision requirements.

Students are responsible for providing an activity log detailing their 90 hours in practice, outlining patient-facing activities and the skills developed during that time. The DPP must then confirm the completion of the time in practice by signing a declaration. If a student is unable to meet all learning needs after completing the minimum hours, a follow-up plan and objectives are set, and the DPP must be satisfied with the student's demonstrated capabilities before signing the final declaration.

The portfolio submission includes the learning in practice log and the DPP's final sign-off, both of which are reviewed during the portfolio viva session. If learning activities or assessments require supervision by someone other than the DPP, the DPP needs to ensure that these staff members meet the necessary requirements.

DPPs have access to support from a designated member of the academic team and are encouraged to contact the programme lead if there are concerns regarding the student's learning in practice.

Before being admitted into the programme, the DPP's suitability is assessed through application, interview, and discussions regarding their experience in supporting students. They are asked standardised and related questions to gauge their experience and scope. DPPs undergo training opportunities, including a DPP training package offered by the Health and Education cooperative, and mandatory assessment of completion through e-learning for healthcare.

Overall, the team commended the programme's robust process and plans for effectively supporting and training DPPs, which go beyond those offered by many other providers and which, if they work in practice, should provide confidence that DPPs are able to supervise and sign off students appropriately.

## Standard 7: Assessment

Standard met/will be met? Yes  No

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

The program places responsibility on students to address their learning needs, supported by a learning agreement. Formative feedback reinforces individual learning, while work-based assessments in practice evaluate performance and encourage self-reflection and growth. Peer review of the therapeutic risk framework enhances assessment literacy. Practical skills are practiced in simulated learning activities, and case-based discussions are presented for review.

Summative assessments gauge students' ability to apply prescribing knowledge through a care-based discussion, work-based assessments, and OSCEs. The assessments measure competence against GPhC learning outcomes, aligning with Miller's pyramid. The content validity of the assessment system is ensured by mapping tools to GPhC learning outcomes and regularly reviewing the blueprint.

The programme team plans an OSCE with six stations. The entire programme team and Medicines Use Team within the School of Applied Sciences will be trained in marking OSCEs. Any red flags identified during the OSCE will result in immediate referral. The OSCE will be standard set using the Angoff method and the likelihood is that students will need to pass four out of the six stations. The plan is also to video the OSCEs so that they can be reviewed if necessary. Student performance in the OSCE will be reviewed by the Programme Team and findings fed back to the OSCE station writing team.

OSCE reliability is enhanced through independent assessors and multiple stations. Video/audio recordings enable off-line reviews. ePortfolio reliability is maximized by presenting evidence across various activities. Modules are reviewed annually to inform future teaching and assessment.

Safety concerns are addressed through the Fitness to Practise process. Students must engage with work-based assessments and formative feedback during their time in practice, preparing them for summative assessments.

The DPP's role is clearly described in the prospectus, and students must find a suitable DPP during the application process. Students receive formative feedback at various stages throughout the program, including during Study Days and work-based assessments.

Assessment regulations adhere to University standards, requiring a minimum pass mark of 50% for each weighted component. No compensation is allowed between elements. The AEB and CEB review students' performance, ensuring no passing if any elements are failed, regardless of the weighted module mark. Compensation between assessed elements is not permitted, and passing the module is blocked if any element is failed, even if the weighted mark exceeds 50%. Unsafe practice results in

automatic failure, and there is a Fitness to Practise process in place. An External Examiner ensures further quality assurance. The team explored themes, including VIVA quality assurance decisions and resit regulations.

## 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 be met.**

Before the first face-to-face study day, students gain access to the Provider's virtual learning environment, MyStudies, which contains essential course information. Specific guidance is provided for students to prepare for the study day, including watching an introductory video, reviewing the Student Handbook and ePortfolio documents, and completing the 'Course Introduction' section on the Health and Education Co-operative site.

During Study Day 1, the 'Induction and Influences on prescribing' session outlines the expectations of students, DPPs, and the Provider. The session covers the teaching timetable, guided study aligned with study days, self-directed study, and assessment expectations. Students are reminded of the required 300 hours of effort for a 30-credit level 7 module, including 90 hours of time in practice.

The Provider offers various resources to support new students. Each student, along with their DPP, is assigned a personal academic tutor for pastoral support. Students can contact the program lead and academic team via email for additional assistance. Resources cover study techniques, library services, referencing, disability support, wellbeing, mental health, and more.

During Study Day 1, students and DPPs are informed of the need for regular meetings to review and plan the student's progress. The learning contract encourages setting a schedule of meetings, including observation, work-based assessments, and discussions on learning needs.

A mid-point check-in with the academic personal tutor allows an external perspective on progress and reinforces expectations for both students and DPPs. Weekly 'support sessions' offer students a platform to discuss concerns and ask course-related questions.

If students require greater supervision or support, they are encouraged to discuss this with their DPP. If the issue persists, the program lead or personal academic tutor may engage in discussions with the DPP to resolve the matter.

In case of concerns about a registered prescribing professional's practice, students can discuss this with their personal academic tutor or the program lead. The academic team will support the student and, if necessary, may contact the workplace manager to address the issue. If appropriate, the relevant regulatory body will be notified.

Students with course-related concerns can discuss them with the program lead. If unsatisfied with the outcome, they may escalate through the 'Student Complaints Resolution Procedure.'

Prior to starting the course, DPPs undergo a verification process, including completing a declaration on the student's application form and attending an interview to discuss their role as a DPP for the pharmacist prescribing course. DPPs must align their support of students with the GPhC Guidance on tutoring in learning and training environments.

The team explored with the provider the process regarding a prescriber raising concerns and were assured that there were robust processes in place to ensure any unsafe or inappropriate practice is identified, with further notification to the GPhC where required. There is also a robust complaints process in place across the Institution.

## Standard 9: Designated prescribing practitioners

Standard met/will be met? Yes  No

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

In the selection process for candidates, each potential candidate is required to complete an application form. They must also find an appropriate DPP, who will play a significant role in the student's training, and the DPP will need to complete a section of the application.

As part of the screening process, the programme will conduct a virtual or face-to-face meeting with each DPP associated with any candidate. The purpose of this meeting is to ensure the DPP's awareness of the supervision requirements and assess their suitability for overseeing the clinical environment of the trainee independent prescriber and providing the expected structure of supervision. During this meeting, the DPP will have the opportunity to inquire about any specific supervision requirements and gain an understanding of the overall learning outcomes for the trainee independent prescriber. Additionally, the DPP will be asked to declare if they have completed any relevant training for the role of Practice Assessor, or equivalent training, if provided by their organisation or elsewhere.

The Provider will ensure that the role and responsibilities of a DPP are clearly described on the Provider website, along with a contact mechanism for any questions raised by prospective students. This information will also include a link to the RPS framework for DPPs as an additional resource.

To maintain high standards, the Provider will only accept students if they have an appropriate DPP in place, and a declaration has been signed confirming that there are no personal relationships between the DPP and the student. Moreover, the DPP must be in good standing with the GPhC or any other approved regulatory body.

By implementing these measures, the programme aims to ensure that each student has a competent and suitable DPP who can effectively supervise and support their training as an independent prescriber.

During DPP meetings, the programme will thoroughly assess the DPP's current role and responsibilities, clinical scope of practice, and day-to-day clinical setting. It will also seek insights into their interaction within the practice environment, including multi-professional working and interactions with the wider team. Additionally, the programme will inquire whether the DPP is currently supervising other trainees and assess their time commitments to ensure they have adequate capacity to supervise a pharmacist trainee independent prescriber effectively.

To inform the DPPs about their expected role and competencies as qualified independent pharmacist prescribers, the programme will share examples of pharmacist prescribers in practice and their respective roles and responsibilities. Reference to competency frameworks, such as the RPS scope of practice document, will be made to ensure alignment with the standards.

The programme will provide clear information to DPPs regarding the time commitment and supervisory milestones they need to complete while monitoring the progress and performance of the trainee independent prescribers. All DPPs will be required to complete the Health and Education Co-Operative DPP programme, and the programme will verify their certificate of completion.

Suggested mechanisms for providing feedback to trainee prescribers, such as 1:1 template, SMART objective templates, and examples of case-based discussion topics, will be included to facilitate effective communication and evaluation.

An open line of communication will be established for DPPs to raise concerns and address any questions they have about the course or trainees through designated email contacts of the course leads. Each pharmacist independent prescribing trainee will be assigned a personal tutor who can be their initial point of contact for any course-related questions or difficulties during their supervision.

To ensure effective coordination, the programme will maintain a list of approved DPPs, along with their current supervision of prescribing students, to avoid overwhelming DPPs with multiple supervision requirements that may negatively impact learning outcomes.

A mid-point check-in will provide an opportunity for the DPP and student to discuss the student's experience in the programme, supervision, and work-based assessments. Moreover, the student will be allocated a personal academic tutor who will also serve as the named person to support the DPP for that student. This arrangement will promote collaboration between the workplace and the Higher Education Institution (HEI).

Students are encouraged to communicate directly with their DPP if they encounter any issues. In case the DPP's support is insufficient, the student and DPP should raise the matter with the academic personal tutor and programme lead.

Feedback between the HEI, the DPP, and the student can be discussed informally during the mid-point check-in meeting. Additionally, students will be required to provide formal feedback on the DPP's performance through an evaluation form, which will be shared with the personal academic tutor and then relayed to the DPP at the end of each cohort.

To ensure continuous quality improvement of the course, a voluntary virtual meeting with all DPPs and the programme lead will be organized to discuss the course and offer feedback. A student representative will meet with the cohort to discuss feedback about the DPPs, providing both positive feedback and areas for improvement. An anonymous report will be generated from this meeting and shared with all DPPs to encourage good practices and provide guidance on areas for improvement. This will enhance the chance for realistic and constructive feedback on the DPPs' performance in preparing independent prescribers.

During discussions, the team addressed various themes with the provider. One of the themes was the Situational Judgment Test (SJT) assessment, which the provider explained is used to ensure new DPPs are suitable for the role. It was clarified that not every DPP undergoes this assessment, and the team suggested reviewing its effectiveness in a future event.

DPP feedback was also discussed. The provider confirmed that DPPs receive feedback from various sources, including inputs from personal tuition and academic tutoring. To facilitate growth and improvement in supporting students, trends observed across cohorts are summarized and shared with DPPs. Additionally, feedback is shared among student groups to ensure transparency in the process.





