

**University of Leicester independent
prescribing course monitoring event report,
November 2023**



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Event summary and conclusions

Provider	University of Leicester
Course	Independent prescribing course
Event type	Monitoring
Event date	7 November 2023
Approval period	August 2022 – August 2025
Relevant standards	<u>Standards for pharmacist independent prescribers, January 2019, updated October 2022</u>
Outcome	<p>Full accreditation confirmed.</p> <p>The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the University of Leicester should be fully accredited as a provider of a pharmacist independent prescribing course for the remainder of the accreditation period.</p>
Conditions	There were no conditions.
Standing conditions	The standing conditions of accreditation can be found <u>here</u> .
Recommendations	No recommendations were made.
Minor amendments	None
Registrar decision	Following the event, the Registrar of the GPhC accepted the accreditation team's recommendation and approved full accreditation of the course for the remainder of the accreditation period.
Maximum number of all students per cohort	128
Number of pharmacist students per cohort	128
Number of cohorts per academic year	Two
Approved to use non-medical DPPs	Yes
Key contact (provider)	Professor Debi Bhattacharya, Director of the Pharmacist Independent Prescribing course

Provider representatives	<p>Professor Debi Bhattacharya, Director of the Pharmacist Independent Prescribing course</p> <p>Rina Matala, Associate Professor in Pharmacy Prescribing</p> <p>Safina Bukhari, Independent Prescribing Programme Administrator</p>
Accreditation team	<p>Dr Andrew Sturrock (event Chair) Director of Pharmacy and Postgraduate Pharmacy Dean, NHS Education for Scotland</p> <p>Dr Brian Addison (team member – academic) Associate Dean for Academic Development and Student Experience, Robert Gordon University</p> <p>Fiona Barber (team member – lay) Independent Member, Standards Committee, Leicester City Council</p>
GPhC representative	<p>Chris McKendrick, Senior Quality Assurance Officer (Education) General Pharmaceutical Council</p>
Rapporteur	<p>Chris McKendrick, Senior Quality Assurance Officer (Education) General Pharmaceutical Council</p>

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 the [website](#).

Purpose of this event

The purpose of the monitoring event is to review the performance of the course against the education and training standards with the first cohort of pharmacists and to ensure that delivery is consistent with the GPhC accreditation criteria. The monitoring event utilises student feedback and evaluation together with a review of documentation and a meeting with course representatives. The accreditation period which was provisionally granted at the initial accreditation event is confirmed after a satisfactory monitoring event has taken place.

Background

The University of Leicester 'the provider' was provisionally accredited by the GPhC in August 2022 to provide a course to train pharmacist independent prescribers, for a period of three years. In line with the GPhC's process for accreditation of independent prescribing courses, an event was scheduled on 7 November 2023 to review the course's suitability for full accreditation. There were no conditions or recommendations imposed at the accreditation event held in August 2022.

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 monitoring event was held remotely by videoconference on 7 November 2023 and comprised of several meetings between the GPhC accreditation team and representatives of the University of Leicester prescribing course. Students who were currently undertaking the course, or who had completed it in the last since the accreditation attended a virtual meeting with the accreditation team. A qualitative survey was also sent to Designated Prescribing Practitioners (DPP) currently supervising students on the course, or who had supervised students in the past. Unfortunately, no DPPs had responded to the survey by the time of the event.

Declarations of interest

There were no declarations of interest

Schedule

Meeting

Private meeting of the accreditation team and GPhC representatives

Meeting with course provider representatives

Meeting with Pharmacists that have recently completed, or are in the process of completing, the independent prescribing course

Private meeting of the accreditation team

Deliver outcome to the provider

Key findings - Part 1 - Learning outcomes

No learning outcomes or their associated assessments had been modified since the initial accreditation event, therefore learning outcomes were not tested at this monitoring event.

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 16-26)

Learning outcomes met? Yes No

Domain: Collaboration (outcomes 27-32)

Learning outcomes met? Yes No

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

Standard 1: Selection and entry requirements

Standard met? Yes No

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

It was noted that in May 2023, the GPhC approved the provider to the revised entry requirements so that pharmacist applicants do not need 2 years of experience for entry onto the course inline with the Standards for the education and training of pharmacist independent prescribers, January 2019, updated October 2022.

The accreditation team questioned how the provider managed reviewing pharmacist applications to the entry requirements, and if there have been any learning points. The provider explained that all applicants that have applied have had patient facing and therapeutic experience. Generally, they have been less experienced in the clinical element, although this doesn't preclude them from the course.

It was noted for the first cohort application process, the course made 71 offers, of which 10 did not subsequently register, and one of which was rejected due to the Designated Prescribing Practitioner (DPP) not having the appropriate experience in the scope of practice chosen by the applicant.

The accreditation team questioned how the course provider managed the applicant that was subsequently rejected due to the DPP not having the appropriate experience. It was noted that this decision was peer reviewed internally. The provider explained that the applicant was contacted directly via email within 10 days of receiving the application by the programme lead to discuss the details and offer suitable solutions. The discussion involved the pharmacist considering changing their scope of practice to align with DPP experience or sourcing another DPP. Neither of these options were feasible and therefore the application was rejected. The admissions team emailed the applicant to alert them when the next round of applications for the following cohort opened.

The accreditation team questioned how the programme lead manages the volume of applicants. The provider explained that the admissions team assist with all applications and make sure there is nothing missing and undertake the basic checks such as registration status and fitness to practise (FtP) through the GPhC online register. Further, applications are not reviewed all in one go, and are on rolling recruitment, so a lot happens in the background along with day-to-day work. Additionally, the programme lead can swap lead review and second review between the core course team so that not one person is always reviewing.

All staff involved in the admissions process are appropriately trained and experienced to make decisions. The Annual Programme Review includes evaluation of admissions, teaching, learning and assessment plus student progression and attainment and student feedback data using equality and diversity data collected as part of the application. The Review also includes an action plan for improvement.

It was noted that those applicants who declare learning difficulties and/or health issues are referred to the university's AccessAbility team for formal assessment and are considered for reasonable adjustments to support their learning on the course.

Standard 2: Equality, diversity and inclusion

Standard met? Yes No

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

It was noted that of the 60 pharmacists who started the course, 41 were female, and three reported having a disability. Four of the pharmacists, of whom three were female, withdrew or suspended their studies within the first weeks of study due to changes in personal circumstances. For the remaining 56 pharmacists, 51 passed the course. Of the five pharmacists that failed the course, all were female.

The accreditation team questioned if there was any understanding as to why the five pharmacist who failed were female. The provider explained that this figure was not disproportionate in relation to the cohort demographics and there isn't a large enough data sample to start drawing fixed conclusions from. However, the course is kept under regular review and progression and attrition data will be examined against protected characteristics, if required, as more data is gathered.

It was noted that the University mandatory training includes 'challenging unconscious bias' and 'equality diversity and inclusion'.

The accreditation team questioned how the course has continued to ensure the principles of equality, diversity and inclusion are embedded in the design and delivery of the course. The provider explained that course content is checked to ensure the principles of EDI are embedded, such as work undertaken to decolonise the curriculum. One of the course main ethos elements is facilitation, to embed real life examples of practice and experience within the course content. This is also checked through the formal annual review of the course and seeking feedback from pharmacists on study days. Further, there is consideration to religious holidays, use of the EDI committee (which has a large student body representation), and use of consultation skills videos; with the view of the course getting these professionally recorded to reflect diversity of the community, pharmacists, and patients alike.

Changes to the course, based on feedback, have included:

1. More drop-in sessions at different times and days of the week.
2. A two-tier approach to tutoring: named personal tutor for pastoral support and to triage academic queries to a named course tutor.
3. Extended personal tutor team which (reflecting the demographic of the course), now includes two male tutors.

Standard 3: Management, resources and capacity

Standard met? Yes No

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

It was noted that the course has a suitable number of staff for delivery with three associate professors and a course director totalling 2.2 FTE. In addition, there is 1 FTE administrator dedicated to the course, and four associate tutors with the relevant skills to support study day delivery who are used as and when required.

It was noted that to support the course, all associate tutors meet with course team member to discuss the pre-study day activity and study day facilitator guide. Further, new associate tutors observe core course team members deliver a study day, then deliver the study day whilst observed by a core course team member. If delivery is satisfactory, the associate tutor is then approved as 'competent' to deliver that specific study day.

The accreditation team questioned how the course team assures quality and consistency between the different teaching/delivery locations offer by the provider. The provider explained that the same core staff are used for delivery across the locations. Further, two staff are always prepared to deliver at any of the locations, if one is off unexpectedly, it can be managed by the other. New members of staff are trained by shadowing then leading. Consistency is assured by regular weekly debriefs.

It was noted that the risk register is reviewed monthly to enable implementation of mitigations if needed, such as continuity in teaching staff.

The accreditation team questioned recruitment of students for future cohorts and the continued viability of the course. The provider explained that in order for the course to be viable, around 70 pharmacists are required. When numbers go beyond this then external resource can be brought in to support. Not every cohort needs 70 pharmacists, some might have more some might have less, as long as the average is around 70. Overall, the course team are happy with the current model and believe it allows flexibility.

The accreditation team questioned if the provider had reviewed the learning agreement for effectiveness and if they were confident that everyone involved in the delivery understood their role. The provider explained that the learning agreement has been working well and this was evident from the reviews with both pharmacist and workplace supervisors. In terms of everyone understanding their role, this has been achieved through guidance provided by the course, triangulation via meetings, induction processes, learning agreements, touchpoints, learning needs assessment, and ultimately feedback. Further, more drop-in sessions at different times and days of the week are now offered by the provider and the meetings/touchpoints with DPPs where any questions have been raised have worked well.

Standard 4: Monitoring, review and evaluation

Standard met? Yes No

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

It was noted that the course team met at the end of the first cohort to undertake a review of the course and produce an action plan. The plan was reviewed and approved by the school education committee.

The accreditation team questioned if the annual course review had taken place yet (due in October 2023). The provider explained that it had, and small tweaks to touch points within the course to better support pharmacists and DPPs had resulted. VLE management in terms of navigating for information and submitting portfolio elements was also raised and was addressed by refining the organisation of the system and materials. The provider further explained that feedback from DPPs indicated that they felt they had a high workload, but overall were happy with the structure of the course.

It was noted that feedback from pharmacists was sought after each study session, with additional mid and end of course feedback collected from pharmacists and DPPs. It was reported that feedback about the course had been overwhelmingly positive; increasing dramatically in size from a first cohort of 60 pharmacists to the target recruitment of 120 in the current cohort.

It was noted that the annual external examiner report is due in December 2023, it was further noted that the external examiner is new to the course and is a Principal Lecturer, Postgraduate Pharmacy Programmes and CPD Lead, University of Sunderland. Informal feedback from the external examiner obtained by the course team suggests that the course is running well. A suggestion for potential improvement was noted and responded to appropriately.

Standard 5: Course design and delivery

Standard met? Yes No

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

It was noted that there have been no planned or unplanned modifications to the course. The virtual learning environment, learning outcomes for the course, and each study day remain the same as they were at the point of accreditation. There have been no fitness to practice concerns raised.

The accreditation team questioned the process of the course mandated Personal Development Plans and how this has worked in terms of workload and feedback. The provider explained that no feedback had been obtained around this element of the course, but it appeared to be working well. Additionally, these plans are the responsibility of the pharmacist who use it to secure learning time and the associated resources required.

As part of the monitoring event process, the accreditation team met with a number of pharmacists who were completing or had completed the course. The overall response to questions was positive,

with support provided by the course team, feedback being timely and proactive, and flexibility of the course being notable. All pharmacists at the meeting felt the face-to-face contact days were beneficial and promoted peer to peer learning.

Standard 6: Learning in practice

Standard met? Yes No

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

It was noted that the approval process for DPPs is undertaken during the application processing stage; applicants without a DPP fulfilling the required criteria are encouraged to identify an alternative suitable DPP, and if they are unable to, they are rejected from enrolling onto the course. It was further noted that this process had been effective in identifying a DPP who was not suitable to supervise the pharmacist chosen scope of practice.

It was noted that each DPP is also assigned a named member of the course team should they have any queries or concerns regarding the course or their pharmacist. DPPs have been supported to familiarise themselves with the course and assessment materials as part of the induction process. The provider can monitor DPP engagement with the induction processes, which also include training in assessment components.

It was noted that the course team review the DPP's marking to ensure standardisation and consistency. All DPPs were provided feedback on each assessment component carried out with their pharmacist and supported with a 1:1 meeting where necessary. The benchmarking and validation process has shown to be effective, as determined by comparing the course team feedback on assessments with the DPP's feedback.

Standard 7: Assessment

Standard met? Yes No

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

As noted under standard 2 of this report, of the 60 pharmacists who started the course four of the pharmacists withdrew or suspended their study. For the remaining 56 pharmacists, 51 passed the course. Feedback to the course team from pharmacist suggests that the blended learning approach and subsequent diversity of feedback methods are effective in preparing pharmacists for assessments. In terms of assessment, this is by portfolio which is a compilation of e-learning and course team marked assessments; these all sit as pass or fail components. All portfolio elements are submitted for formative feedback and progress is monitored by regular submission of learning in practice hours. Assessment of clinical examination skills occurred during a face-to-face study day towards the end of the course so that pharmacists can practice these skills within the 90 hours of supervision in the workplace. All pharmacists from the September 2022 cohort passed their clinical examination skills assessed by the university and were signed off by their DPP in the workplace. In terms of feedback timelines, the university states that this must be provided within 20 working days. However, due to

the short duration of the course the provider aims to provide feedback for formative assessments within 14 working days.

The accreditation team questioned how effective the course tracker had been to monitor pharmacists' progression on the course. The provider explained that the tracker has worked and is RAG rated for all assessments. It is used by personal tutors and contains all relevant information including extensions to deadlines, required support, assessment status etc.

It was noted that due to the lack of funding in relation to DPPs supervising pharmacists, the course team have been considering the removal of the requirement for DPPs to formatively assess the clinical case studies. These are two of many opportunities for the course team to benchmark and quality assure the DPPs marking, and supervision respectively, and therefore the course team do not foresee it adversely affecting quality and overall assessment process of the course. This potential change has not, however, been implemented and the course team were reminded that should they wish to make this change, they would need to complete the change request process as set out by the GPhC.

Standard 8: Support and the learning experience

Standard met? Yes No

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

It was noted that pharmacists and their DPPs are sent a welcome email with induction videos and course guide before the beginning of the course. The provider noted that during the first cohort some pharmacists had not engaged with pre-induction activities, resulting in them not maximising the use and purpose of the induction day. For the second cohort the provider ensured that the pre-induction activities were clearly highlighted in the initial communication and introduced a longer window between confirmed registration and the induction day to allow pharmacists more time to identify access issues and complete the pre-induction day activities. The accreditation team questioned how effective the earlier initial communication was in assuring that pre-induction activities were completed. The provider explained that they had seen a clear and measurable difference as it allowed pharmacists to review the material a lot earlier and prepare fully for the induction process.

Standard 9: Designated prescribing practitioners

Standard met? Yes No

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

It was noted that the DPP registration and annotation status is checked during the application process through the appropriate regulatory body checks. The application form details the prospective DPP's clinical expertise, training skills and experience to enable the programme admissions team to assess their suitability for the role. An educational agreement is signed by both DPP and pharmacist at the beginning of the course to that the DPP is aware of their commitment.

The accreditation team questioned how the provider gives feedback to DPPs on their performance in the role. The provider explained that direct feedback is provided as part of each formative assessment. Further, so far, all DPPs have been experienced. If a DPP wasn't experienced, they would need to undertake HEE 'train the trainer' course.

