

University of Huddersfield independent prescribing course reaccreditation event report, December 2023



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Event summary and conclusions

Provider	University of Huddersfield
Course	Independent prescribing course
Event type	Reaccreditation
Event date	8 December 2023
Approval period	February 2024 - February 2027
Relevant standards	<u>Standards for pharmacist independent prescribers, January 2019, updated October 2022</u>
Outcome	<p>Approval</p> <p>The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that pharmacist independent prescribing course provided by the University of Huddersfield should be reaccredited for a further period of three years.</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	<p>The Registrar is satisfied that the University of Huddersfield 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 the University of Huddersfield is approved to continue to offer the independent prescribing course for a further period of three years. The Registrar noted that there were no conditions associated with this event.</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)	Sallianne Kavanagh, Course Leader, Independent Prescribing for Pharmacist, and Senior Lecturer, Clinical Pharmacy and Pharmacy Practice
Provider representatives	Sallianne Kavanagh, Course Leader, Independent Prescribing for Pharmacist, and Senior Lecturer, Clinical Pharmacy and Pharmacy Practice Benedict Brown, Senior Lecturer in Clinical Pharmacy Alison Astles, Subject Leader in Pharmacy Barbara Conway, Head of Pharmacy
Accreditation team	Dr Brian Addison (event Chair), Associate Dean for Academic Development and Student Experience, Robert Gordon University Parbir Jagpal (team member – academic), Director of Prescribing, School of Pharmacy, University of Birmingham Liz Harlaar (team member – lay), Independent Business Consultant
GPhC representative	Alex Ralston, Quality Assurance Officer (Education) General Pharmaceutical Council
Rapporteur	Richard Calver, Freelance education consultant

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](#).

Background

The University of Huddersfield ('the provider') was provisionally accredited by the GPhC in December 2017 to provide a course to train pharmacist independent prescribers, for a period of three years, with a monitoring event taking place after completion of the first cohort of students. A monitoring event was held in July 2019, after which the Registrar of the GPhC accepted the accreditation team's recommendation that the provider should be fully accredited as a provider of a pharmacist independent prescribing programme for the remainder of the accreditation period. An event held in October 2020 recommended that the programme be reaccredited for a period of three years, subject to four conditions, and this recommendation was approved by the Registrar of the GPhC. The programme is led by a pharmacist and is approved for two cohorts per year.

In line with the standards for the education and training of pharmacist independent prescribers January 2019, updated October 2022, an event was scheduled on 8 December 2023 to review the course's suitability for reaccreditation.

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 8 December 2023 and comprised several meetings between the GPhC accreditation team and representatives of the University of Huddersfield's 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. 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, the responses to which were also reviewed by the GPhC accreditation team.

Declarations of interest

There were no declarations of interest.

Schedule

Meeting

09:30 – 10:30	Private meeting of the accreditation team
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11:00 – 13:00	Meeting with course provider representatives
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13:00 – 14:00	Lunch
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14:00 – 14:30	Learning outcomes testing session
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14:30 – 15:45	Private meeting of the accreditation team
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15:45 – 16:00	Deliver outcome to the provider
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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 5 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: **3, 9, 19, 21** and **27**

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 continue to be met.

The provider uses a bespoke online application form for this course. It includes questions relating to applicants' professional experience and evidence of relevant continuing professional development. The provider offers email guidance on the type of information needed where applicants have spent long periods since studying, and telephone conversations are also used if necessary. The accreditation team was satisfied that this process is applied consistently. For example, all applications are reviewed by the course lead who makes the final decision. The course lead therefore has significant responsibility, but everyone in the team is trained in the admissions process.

The team explored the process for confirming that designated prescribing practitioners (DPPs) are registered healthcare professionals in Great Britain or Northern Ireland, and that they are suitably qualified and experienced for their supervisory roles. The course team pointed out that there have been no students from Northern Ireland to date, but the administrative support team reviews all applications and this includes all applicants' registration details. The provider uses an MS Forms survey to gauge DPPs' experience: this includes information on how applicants meet criteria. They must make a declaration stating that they have sufficient experience to take the course. Course staff also hold informal conversations with DPPs to check that they have sufficient experience and access to support.

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 continue to be met.

The principles of equality, diversity and inclusion are clearly embedded in the curriculum. For example, students are taught to avoid making assumptions about patients' needs, and the patient participation group (PPG) and stakeholder group advise the course team on the course design: this includes respect for patients' cultural needs.

The course team is also aware of the demographics of the student cohort. Most students are in mid-career, with families and other commitments, so the course timetable respects family life by using asynchronous learning, for example. The course team uses data from EDI reviews to guide the curriculum. For example, the team considers the responsibilities of students who are carers, provide transcripts of lectures for students who lipread, and examine students' use of Brightspace (the provider's virtual learning environment) to identify problems with their engagement. Personal learning and support plans (PLSP) are used to support students where necessary, but the course team

emphasised that learning outcomes are not altered and all students are assessed using the same criteria. Some students may receive extra time, or a computer, for written exams but not for assessments of professional skills.

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 continue to be met.

The course is delivered from the School of Applied Sciences which offers undergraduate courses in four subject areas, including pharmacy. The course has an identified leader, and is overseen by various university- and school-level committees including the Course Committee and School Accreditation and Validation Panel (SAVP): these committees contribute to the management of the course and ensure its adherence to university standards.

The team was keen to discuss the management of risk associated with the course and concerns over safety when students are learning in practice. The course team acknowledged that its small number of staff represents a risk, but staff are part of the wider pharmacy team, and a various staff contribute to each unit. This mitigates the impact of illness, for example, on the course team. Examinations are set early in the academic year and can therefore proceed even if staff are taken ill.

All students and DPPs are given a handbook which describes how they may raise concerns. Tripartite discussions are held with students, DPPs and the course leader. At least one of these meetings is compulsory, though staff may decide that a further compulsory tripartite meeting is necessary later. The course team noted that drop-in meetings are also available for DPPs to discuss concerns and these have been used by less experienced DPPs. Staff also maintain open diaries and DPPs have sometimes booked time to discuss concerns about students. The course team noted that this process has been effective so far, although engagement remains low. The accreditation team was confident that the course team was making concerted attempts to encourage engagement and that at least some engagement was evident.

The course also benefits from a robust system for ensuring its resourcing. For example, a five-year plan outlines student numbers and considers the required staffing levels: this is examined at school and university levels. The school is also well resourced for administration and support. The course team has a robust approach for teaching clinical skills, focusing on a defined range of subjects which are most beneficial to students and the local population. For example, teaching covers chest infections and hypertension at an early stage, followed by ear, nose and throat assessments. Teaching is delivered by the Advanced Clinical Practitioner (ACP) team supported by the course team, and utilises the equipment, including sphygmomanometers and otoscopes, most useful to the local population. The accreditation team was therefore confident that processes were sufficiently robust to ensure adequate resourcing of the programme.

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 continue to be met.

Discussions at the reaccreditation event, alongside the provider's written submission, confirmed that the course is systematically monitored, reviewed, and evaluated by various processes. These include course review meetings, the Postgraduate Taught Experience Survey, and an external examiner who monitors all stages of assessment and contributes to quality assurance. A student panel is able to discuss and raise concerns, allowing some problems to be remedied at an early stage before the cohort completes the course. More substantial changes are made through the SAVP.

The provider ensures that the course remains topical by considering the views of local stakeholders, including employers, the student panel and PPG. There is also wider engagement with NHS groups at regional and national levels, including local integrated care boards. Teaching is regularly evaluated using peer assessment of teaching and by scrutinising assessment data. University processes are used to consider assessment data and any possible impact of protected characteristics.

The accreditation team asked for clarification as to when the course was validated. The provider confirmed that the course was last validated in 2017 and noted that the course is due to undergo revalidation in the current academic year.

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 continue to be met.

The provider submitted a clear learning strategy prior to the event. This strategy included details of the course content and delivery plan. The course includes 26 days of taught material which may be accessed using the Brightspace learning platform. Students are permitted two assessment attempts irrespective of the type of assessment, and must retake the course if they fail after two attempts.

The provider's knowledge of student demographics assists the course team in developing the curriculum, and the experience of recently qualified teaching staff aids this strategy. A pre-course survey provides information about students' strengths, weaknesses, concerns and areas they need to study. The provider also considers how students' existing knowledge should develop. For example, some students may require refreshed knowledge of pharmacology and pharmacodynamics if they initially qualified several years ago. Students are also directed to the Centre for Pharmacy Postgraduate Education which offers invaluable resources for professional practice. Extensive engagement with patients, employers and DPPs also supports curriculum design. Patients, for example, have described their experiences with prescribers and this has encouraged greater emphasis on holistic patient-centred care. These engagements operate through formal, university-led

processes, and the School has provided extra funding for such engagements to ensure that the course supports student learning and patient needs.

The course team described the measures for ensuring that students gain experience without compromising patient safety. The induction process is used to remind students of their professional obligations regarding indemnity insurance, mandatory training and professional development, as well as their need to practise within their scope of competence. An induction video informs DPPs of the requirements for supervision and its delegation, and students are required to recording details of colleagues supervising their supervised learning events (SLE): these are reviewed by the course team and DPPs are required to countersign SLEs supervised by others.

There is a clear fitness to practise process which aligns with university's internal process. An internal panel reviews concerns raised. This may be referred to a school-level cause for concern hearing which may dismiss the concern, instigate sanctions or refer the matter to a university-level hearing whose panel includes external members. The matter may also be referred to the GPhC if appropriate.

There is also a clear process for responding to concerns surrounding students' training in practice. A meeting is held with the student and DPP, and remediation is offered. The university's cause for concern process is used for matters concerning professional conduct, and concerns about organisations can be addressed by discussions with senior staff before being referred to regulators bodies if necessary. The provider has already engaged with a provider of DPPs when concerns emerged over supervision, and also later raised the issue with the GPhC.

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 or continue to be met.

The provider's written submission included clear evidence that there must be at least 90 hours of patient-facing learning in practice. This information is stated, for example, in the student handbook and DPP handbook, and constitutes part of the learning contract. The course team explained that most of this learning must include patient consultation rather than simulated learning, and has already intervened when one employer used simulated learning too extensively. The course team also explained that action plans can be implemented for students to visit other practices to gain experience in specialist areas of care, and extra support can be offered if assessments show that they lack experience in some areas.

The amount of remote prescribing experience depends on each student's area of practice. The course teaches the theoretical aspects of remote prescribing and the assessment includes a mock remote prescribing consultation in which students must explain how they would safeguard a remote prescribing scenario.

Standard 7: Assessment

Standard met/will be met? Yes No

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

The course is subject to the university's assessment regulations and assessment strategy. For example, the course team uses a mixture of assessment methods, avoiding excessive emphasis on single methods, and these are reviewed internally and by the course's external examiner. Compensation of marks is not allowed for this course.

Examinations are set, marked and moderated in accordance with university policies. Practical examinations are videoed, allowing the examination to be reviewed in cases of student failure or concerns over patient safety.

The course team confirmed that university staff mark all summative assessments which contribute to the final award, including examinations and the student portfolio. Other assessments, such as SLEs, are signed by DPPs in the student's portfolio, but they are used as formative assessments of students' progress. The course team conducts a summative assessment of the portfolio. Some assessments are taken remotely under strict conditions to ensure fairness and minimise cheating. For example, a one-hour multiple-choice assessment remains open across a two-hour window, and uses questions drawn from a large question bank presented in a randomised order.

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.

Students benefit from extensive support throughout the course. This begins during the induction session which provides comprehensive details about the course requirements, policies, and the support available to students. Support includes library services, academic skills support and advice for using MS Teams. Students have access to academic skills tutors for help with referencing, and the school has dedicated librarians with specialist knowledge of pharmacy. An online module directs students to the relevant support services. Brightspace shows whether students have engaged well with online material. The induction also includes introduction to the learning outcomes and the prescribing competency framework, and the use of the personal learning contract. The course team pointed out that there is no personal tutor but staff use an open diary for students to discuss problems with any member of the team.

The course team described an occasion in which they had resolved an issue raised by a student. One student had received insufficient enough hours of supervised experience with their DPP. The course team held a tripartite meeting with the student and DPP and advised the student that they could include hours on tasks that they had not previously considered. The accreditation team was therefore confident that the provider was supportive and responsive to student needs.

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.

The provider has a comprehensive set of measures to support and monitor DPPs. For example, students must provide the details of their DPP on their application forms, and DPPs are required to submit a declaration that they meet the necessary standards based on GPhC guidance and the Royal Pharmaceutical Society DPP competency framework. The course team also asks DPPs to describe their role and skills, for example in medication reviews, and the team will contact DPPs if insufficient information is offered.

DPPs are guided in their duties by handbooks and a training meeting. The accreditation team noted that some DPPs may not be pharmacists, but was reassured that the provider familiarised them with requirements specific to pharmacists. For example, an induction video explains pharmacists' work and directs DPPs for further support material. The course team also arranges meetings to discuss and develop DPPs' understanding of pharmacists. The learning contract between the student and DPP may be reviewed by the course team if the DPP has trouble supporting a pharmacy trainee: they may, for example, be asked to provide alternative experiences or opportunities for the student.

The course team admitted to challenges in providing feedback to DPPs on their performance. They survey trainees' opinions on their experience but response rates have been poor to date. Poor feedback from individual students can be used to engage with DPPs at an individual level, but there has been little success in gaining feedback on DPPs' performance overall. The accreditation team noted that the course team is aware of the shortcomings of the current approach and are looking at other methods to strengthen the value of feedback to DPPs. However, the team also noted that some general feedback is provided to all DPPs which is sufficient to meet this Standard.

