

University of Portsmouth independent prescribing course reaccreditation event report, June 2024



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Event summary and conclusions

Provider	University of Portsmouth
Course	Independent prescribing course
Event type	Reaccreditation
Event date	24 June 2024
Approval period	September 2024 – September 2027
Relevant standards	<u>Standards for pharmacist independent prescribers, January 2019, updated October 2022</u>
Outcome	Approval 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 Portsmouth should be reaccredited for a further period of three years.
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	<ul style="list-style-type: none"> The entry criteria on the website must be updated to refer to PSNI as well as GPhC and to refer to DPP rather than DMP
Registrar decision	The Registrar ¹ of the GPhC accepted the accreditation team's recommendation and approved the reaccreditation of the course for a further period of three years. The Registrar noted that the condition as outlined in the report had been met.
Maximum number of all students per cohort	40
Number of pharmacist students per cohort	40
Number of cohorts per academic year	One

¹ Registrar or appointed delegate

Approved to use non-medical DPPs	Yes
Key contact (provider)	Dr Nick Warren, Course Lead PgC Independent Prescribing for Pharmacists
Provider representatives	<p>Mr Mahmood Visram, Deputy Course Lead PgC Independent Prescribing for Pharmacists</p> <p>Dr Helen Hull, Programme Lead Pharmacy Practice and Pharmacology</p> <p>Dr Nicola Barnes, Pharmacy Practice Placement Development Lead</p> <p>Ms Roshni Simmons, Senior Teacher Practitioner - Pharmacy Practice</p> <p>Dr Marisa van der Merwe, Associate Dean Academic, Faculty of Science and Health</p> <p>Dr Tony Lewis, Associate head Academic - School of Medicine, Pharmacy and Biomedical Sciences</p> <p>Dr Karen Ball, Head of School - Medicine, Pharmacy and Biomedical Sciences</p> <p>Emily Bond, Designated Prescribing Practitioner</p>
Accreditation team	<p>Dr Brian Addison (event Chair) Associate Dean for Academic Development and Student Experience, Robert Gordon University</p> <p>Shahzad Ahmad (team member – pharmacist) Clinical Lead, NHS England Transformation Directorate</p> <p>Fiona Barber (team member – lay) Independent Member, Standards Committee, Leicester City Council</p>
GPhC representative	Chris McKendrick, Senior Quality Assurance Officer
Rapporteur	Jane Smith, Chief Executive Office, European Association for Cancer Research

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 Portsmouth, 'the provider', was accredited by the GPhC in September 2010 to provide a programme to train pharmacist independent prescribers. The programme was reaccredited in February 2014, May 2017 and in June 2021 (following a one-year extension due to the Covid-19 pandemic).

At the June 2021 event, the programme was reaccredited for three years with no conditions. An event was therefore scheduled on 24 June 2024 to review the course's suitability for further reaccreditation.

From 2024-25, the provider plans to increase the cohort size from 30 to 40, but to move from two cohorts per year to just one. The course continues to be led by a pharmacist. Since the last event, a deputy course lead has been appointed who is a pharmacist independent prescriber.

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 24 June 2024 and comprised of several meetings between the GPhC accreditation team and representatives of the University of Portsmouth 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

Private meeting of the accreditation team and GPhC representatives

Meeting with course provider representatives

Learning outcomes testing session

Private meeting of the accreditation team

Deliver outcome to the provider

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 six learning outcomes during the event. The team 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: **5, 9, 13, 17, 23, 26.**

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. One criterion requires minor amendments.

Course specific entry requirements are stated on the course website, along with the provider's standard entry criteria. Applicants are currently required to have at least two years' appropriate patient-orientated experience in a UK hospital, community or primary care setting following their pre-registration year. As this is no longer a GPhC requirement, the provider confirmed that this will be removed from the website once the current recruitment cycle is complete. From the 2025 intake, it will be a requirement that applicants have relevant experience in a UK pharmacy setting and are able to recognise, understand and articulate the skills and attributes required by a prescriber to act as the foundation of their prescribing practice whilst training. It will also be a requirement that, for the purposes of developing their independent prescribing practice, applicants must identify an area of clinical or therapeutic practice on which to base their learning.

Applicants must have identified a designated prescribing practitioner (DPP) who can either be a medic or a non-medical prescriber. The DPP must have agreed to provide supervision, support and shadowing opportunities for the student, and be familiar with the GPhC's requirements and learning outcomes for the programme. DPPs are required to complete part of the online application form to confirm their suitability and willingness to undertake the role.

All applicants who meet the entry requirements are invited to a multicomponent interview with one member of the course team. The interview uses structured questions addressing and applicant's motivation for joining the course, together with the use of values-based situational judgement questions. The interview is also used to explore the applicant's experience relating to their intended scope of practice. If the interviewer does not have relevant experience in this area, they refer to another member of staff on the course team who does have relevant expertise. The DPP's experience and suitability for the role are also probed during the interview.

Interviews are recorded for quality assurance purposes and at least 10% are reviewed by the course lead. All interviewers are trained to ensure consistency and fairness.

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.

All staff involved in the course are required to undertake training in equality and diversity every three years. The course curriculum covers equality and diversity and supports students to apply their learning to diverse populations. For example, physical assessment teaching includes the observation of signs and symptoms on different skin tones.

The provider stated that the amount of equality and diversity monitoring data available to them has increased since the last reaccreditation event. There is a lack of ethnic diversity amongst students on the course, but this is also the case at applicant level. No issues in terms of disparity between applicants and those admitted has been found.

The provider accommodates students' inclusivity needs as they arise. For example, prayer spaces and breast-feeding spaces have been created, and study days are arranged during school term-times to avoid creating childcare issues for students who are parents. Reasonable adjustments are also made on the recommendation of the provider's Additional Support and Disability Advice Centre. For example, a stethoscope that amplifies sound was purchased for a student with hearing loss.

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 provider plans to reduce from two cohorts of 30 students per year to one cohort of 40 students. The team asked about the rationale for this change and the associated impact on the sustainability of the course. The provider explained that it wants to maintain the course at 60-credits, despite the fact that many prescribing courses are 30-credits only. This means that it is intensive to deliver. The course is important to the university and is financially successful, as well as helping to create and build links with local placement providers and other stakeholders. Delivering the course to one cohort will reduce staff workload and associated staff costs, especially as the number of students on the provider's MPharm course has increased. MPharm students bring more resource per head than students on this course. The NHS has provided placement capacity for up to 60 students in one cohort, but initially at least the provider intends to cap the cohort size at 40 to relieve the current burden on staff, and because this is the maximum capacity of the teaching room for physical assessment skills. This number will be kept under review as the provider is aware that demand for the course is increasing.

The roles and responsibilities of all those involved in delivering the course are clear, including those of the DPP. An induction session is held for DPPs, but engagement is low, and the provider acknowledged that it can do more to improve the quality and frequency of contact with DPPs.

The Course Lead and Deputy Course Lead are responsible for the operational running of the course and its future strategic direction. The Course Lead is a member of the School Education Committee, along with other course leaders in the School, which allows for the sharing of good practice. Course leads also work closely with the School Associate Head of Students in matters related to student experience, and the School Associate Head Academic in matters related to the development and quality of academic provision.

Using the RPS Competency Framework for all Prescribers, students assess their current competency and confidence in each of the RPS competency statements at the start of the course and develop bespoke learning needs to ensure gaps are filled. These learning needs are discussed with the DPP and incorporated into a Learning Agreement which is agreed between the student, DPP and University Tutor and signed in tripartite. There is a minimum of three formal progress review meetings during the course and these are documented in the portfolio.

The simulation facilities available to the course have improved in recent years. Students now have access to two small wards, eight consultation rooms and 26 dispensing spaces, as well as a nursing home environment and mock GP surgery. Mannequins are used to teach blood pressure taking as well as cardiovascular and respiratory clinical skills.

17 academic staff from the School of Pharmacy and Biosciences have some involvement on course delivery. 15 staff are GPhC registered pharmacists, with three also being qualified Independent Prescribers. Five of the 15 GPhC registered pharmacists are Teacher Practitioners or Teaching Fellows working part time alongside a pharmacy practice role.

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.

There are appropriate systems and processes in place within the University to monitor and review the course content and delivery. A course-level dashboard records data from multiple sources such as admissions, performance, student feedback and attainment gaps. Each year the Course Lead must write an action plan for any areas flagged as amber or red in the dashboard. This is reviewed at both faculty and university level. The provider confirmed that the course continues to be validated by the University.

The team asked how the provider quality assures the learning in practice environment. The provider stated that this starts at the point of application with robust checks to ensure that the DPP is suitable to undertake the role. Once the student starts the course, they must then complete an audit to confirm that the practice environment is suitable. The course review process flags any issues and students have regular meetings with their tutor where the experience in practice is discussed. The provider has introduced group tutorials at key points in the course so that students can share their experiences and questions can be addressed by staff.

Stakeholders, including employers and local Trusts, provide feedback on the course and are consulted on any proposed changes to the course. The team asked if there had been any feedback from stakeholders that had been acted upon and was told that stakeholders had asked for weekend study days to be introduced. These had been trialled, but were not popular with students and uptake was low. They were therefore discontinued, with the support of stakeholders. In addition, the requirement for students with a non-medical DPP to have 30-hours of supervised practice with a medic had been changed in response to feedback from stakeholders that this was unmanageable. The requirement now is for the DPP to ensure that students have appropriate supervision.

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 course teaching and learning strategy continues to be based on the GPhC learning outcomes. As the learning outcomes have been updated, the course has been adapted, for example with an

increased emphasis on clinical skills. The team asked how the delivery of the course builds on the pre-existing knowledge, skills and practice of the pharmacists in training and was told that, having ascertained that students have the required baseline knowledge and skills through the application process, then the course contains core items that are directly taught and additional learning items that students can access if needed, such as pharmacology. These are identified at the start of the course and documented in the Learning Agreement (see Standard 3).

The course team continuously reflects on and reviews the course, via regular course team meetings and the University's quality assurance processes. Any changes to course design or delivery which are of consequence to the future practice of current students, for example legal changes, are highlighted to all cohorts.

The team asked what structures were developed to engage with stakeholders, the public and patients to refine the design and delivery of the course. The provider explained that stakeholder groups were established when the course was designed. As it has evolved, the placement lead now meets regularly with these stakeholders, especially as MPharm students will now be graduating as prescribers.

The team noted that the DPP's declaration made at the point of the student's application includes a statement of their competence in the relevant scope of practice and confirms that they have read and are aware of the RPS competency document. The provider checks the DPP's registration and experience and follows up on any queries. The team was satisfied therefore that appropriate mechanisms are in place to ensure that students are supervised by suitably qualified and experienced supervisors in the clinical practice environments.

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 continue to be met.

Applicants are required to secure access to appropriate clinical settings before they are accepted onto the programme. They are required to give details of:

- The location and environment in which they will learn;
- The clinical specialty and disease state(s) that will be their 'scope of practice' for their period of training; and
- The group(s) of patients they will focus upon.

Any areas of uncertainty regarding the learning in practice setting are discussed with the student during the interview process. The student completes a 'practice audit' upon starting the course which is reviewed by the course team and forms part of the student's portfolio. This confirms the suitability of the practice setting.

The team asked how DPPs are supported to know what constitutes appropriate delegation of supervision. The provider stated that guidance is provided in the DPP Guide that applicants are required to pass to the DPP at the point of application. Examples of delegation are provided to students during the second study day. It is made clear to students that they must only seek experiences within that person's competency.

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 comprises a single 60-credit module with four assessments:

- Therapeutic framework
- Practical Skills Assessment (PSA)
- Case study
- Portfolio

All assessments are pass/fail and cannot be compensated. The assessments are designed to encourage independent learning, reflection and continuous professional development. All pass criteria reflect safe and current practice.

Assessment Approval Panels review all assessments, including learning outcomes and formative and summative assessments. Students are offered formative feedback by way of mock exams and feedback on drafts of written assessments. Post-assessment, all fails are moderated as well as 10% of all other assessments.

The team asked the provider to describe its mechanisms for undertaking the mark verification and standardisation of the competencies signed off by DPPs. The provider stated that the RPS competencies and bespoke clinical skills are signed off by DPPs. The provider takes assurance from the robust checks of DPP suitability carried out at the point of application and also takes a sample of students to confirm that the RPS competencies are met. Core clinical skills are assessed in the PSA, and the GPhC learning outcomes are also met in the taught elements of the course.

Standard 8: Support and the learning experience

Standard met/will be met? Yes No

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

The University induction introduces students to the University facilities (both physical and virtual) including the library, University expectations regarding engagement, student feedback mechanisms, and key sources of information and support for non-academic needs.

The course induction introduces students to the course team, the GPhC, course and module learning outcomes including an overview of assessments, the RPS Prescribing Competency Framework, and to their University tutor. Tutors are equipped to signpost students to support where needed, and recognise that students may have been out of study for some time.

The tutor, DPP and student agree and sign a Learning Agreement, to support the student in achieving the RPS prescribing competencies, as in doing so support their achievement of the GPhC and course learning outcomes. The student's progress is reviewed regularly by all three signatories. Open communication is encouraged, and all parties as part of their roles and responsibilities agree to raise concerns early should they arise. Students are asked to raise concerns about their learning in practice environment with the course lead.

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 continue to be met.

The team asked for further details of the checks carried out to ensure the suitability of a DPP and was told that these include checking that they have appropriate experience, that they meet the RPS requirements and that their registration is current. The provider also checks that the DPP has permission from their employer and looks at their current supervision workload. The DPP and the practice environment are discussed with the student at interview and the provider follows up with the DPP direct if further detail is needed. If a student's DPP changes part-way through the course, the proposed replacement DPP goes through the same process of review of suitability.

An online induction is provided for DPPs and includes further information on the role of pharmacist independent prescribers, both in and after training, encourages DPPs to consider their professional development needs to help them fulfil the DPP role, as well as providing an opportunity for DPPs to ask questions and share good practice. A recording of the session is made available online for those unable to attend the live event.

The team asked what mechanisms are in place for providing feedback to DPPs and was told that they are given feedback from the reports of the formal review meetings. The provider confirmed that every DPP is given formal feedback. The team noted that some providers offer cohort-level feedback to DPPs and the provider will consider introducing this for future cohorts.

