University College London (UCL), Master of Pharmacy (MPharm) degree reaccreditation Part 1 and MPharm with integrated foundation training Step 2 event report, June 2024



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Event summary and	conclusions		
Provider	University College London (UCL)		
Courses	Master of Pharmacy (MPharm) degree		
	Master of Pharmacy (MPharm) degree with integrated foundation training		
Event type	Reaccreditation (part 1) and step 2 for MPharm with integrated foundation training		
Event date	12-14 June 2024		
Approval period	2023/24 – 2030/31		
Relevant requirements	<u>Standards for the initial education and training of pharmacists, January</u> 2021		
Outcome	Approval		
	The accreditation team has agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the MPharm degree offered by University College London is reaccredited, subject to a satisfactory part 2 event, and that the MPharm degree with integrated foundation training offered by University College London may proceed from Step 2 to Step 3 of the accreditation process for new MPharm degrees with integrated foundation training. There were no conditions.		
	Reaccreditation is recommended for a period of 6 years after part 2 event, with an interim event at the mid-way point. The accreditation team reserves to amend this accreditation period if necessary, following the part 2 event.		
Conditions	There were no conditions.		
Standing conditions	The standing conditions of accreditation can be found <u>here</u> .		
Recommendations	No recommendations were made.		
Registrar decision	The Registrar of the GPhC has reviewed the accreditation report and considered the accreditation team's recommendation.		
	The Registrar is satisfied that University College London 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 initial education and training of pharmacists, January 2021. 2 University College London (UCL), Master of Pharmacy (MPharm) degree		

	reaccreditation Part 1 and MPharm with integrated foundation training Step 2 event report, June 2024 The Registrar confirms that University College London is approved to continue to offer the Master of Pharmacy (MPharm) degree for 6 years, subject to a satisfactory part 2 event.
	In addition, the MPharm degree with integrated foundation training is permitted to progress from Step 2 to Step 3 of the accreditation process for new MPharm degrees with integrated foundation training.
Key contact (provider)	Dr John Malkinson, MPharm Programme Director
	Prof Cate Whittlesea, Divisional Director, UCL School of Pharmacy and MPharm with Integrated Foundation Training Programme Director
Accreditation team	Professor Ruth Edwards* (Team leader), Professor of Pharmacy Education and Head of School of Pharmacy, University of Wolverhampton
	Lyn Hanning (team member - academic), Director of Practice Based Learning and Head of Pharmacy Practice, University of Bath
	Dr Marisa van der Merwe (team member - academic), Associate Professor in Clinical Pharmaceutics, Associate Dean (Academic), Faculty of Science and Health, University of Portsmouth
	Mairead Conlon (team member - pharmacist), Foundation Training Year Lead at the Northern Ireland Centre for Pharmacy Learning and Development and part-time Community Pharmacist
	Arshad Patel (team member - pharmacist newly qualified), PCN Clinical Pharmacist, South & East Leeds GP Group, Extended Access Pharmacist and OSCE Assessor
	Carl Stychin (team member - lay), Professor of Law and Director of the Institute of Advanced Legal Studies, School of Advanced Study, University of London
GPhC representative	Chris McKendrick*, Senior Quality Assurance Officer (Education), General Pharmaceutical Council
Rapporteur	Professor Brian Furman (Rapporteur) Emeritus Professor of Pharmacology, University of Strathclyde
Observer	Lisa Gilbert, Specialist Foundation Training Advisor, General Pharmaceutical Council (attendance on day 1 and 2)
*Attended the pre-event me	sting on 24 May 2024

*Attended the pre-event meeting on 24 May 2024

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 (GB). The GPhC is responsible for setting standards and approving education and training courses which form part of the pathway towards registration for pharmacists. The GB qualification required as part of the pathway to registration as a pharmacist is a GPhC-accredited Master of Pharmacy degree course (MPharm).

This Part 1 reaccreditation event was carried out in accordance with the <u>Adapted methodology for</u> <u>reaccreditation of MPharm degrees to 2021 standards</u> and the programme was reviewed against the GPhC <u>Standards for the initial education and training of pharmacists</u>, January 2021.

The GPhC's process for initial accreditation of an MPharm degree with integrated foundation training is a four-step process as the five-year integrated degree is usually built upon an established, accredited four-year programme. These Steps are reviewed against the GPhC <u>Standards for the initial</u> <u>education and training of pharmacists, January 2021</u>. Step 1 involves an initial engagement meeting by an application institution to share their proposal. Following successful completion of Step 1, students may be accepted on to year 1 of the MPharm degree with integrated foundation training programme. Steps 2, 3, and 4 normally take place respectively in years 3, 4 and 5 of the programme. The completion of the Step 4 process will require GPhC representatives to attend the examination board at the end of year 5. Following successful completion of the Step 4 process, graduates of the MPharm with integrated Foundation Training are permitted to apply to the GPhC pharmacist register subject to passing the GPhC registration assessment and meeting other registration requirements.

The GPhC's right to check the standards of pharmacy qualifications leading to annotation and registration as a pharmacist is the *Pharmacy Order 2010*. It requires the GPhC to 'approve' courses by appointing 'visitors' (accreditors) to report to the GPhC's Council on the 'nature, content and quality' of education as well as 'any other matters' the Council may require.

Background

MPharm degree

The University College London (UCL) MPharm programme is delivered by the School of Pharmacy, which is a specialist institution within the Faculty of Life Sciences in the School of Life and Medical Sciences. A reaccreditation event took place in June 2024, when the team agreed to recommend to the Registrar of the General Pharmaceutical Council that the programme should be reaccredited for a full six-year period with no conditions or recommendations. Because of the introduction of the new (2021) IETP standards and reaccreditation methodology, a part 1 reaccreditation event was scheduled for June 2024 and the following is a report of that event.

MPharm with Integrated foundation training

The 5-year integrated iteration of the programme is targeted at non-EU students, especially those from Hong Kong, Singapore and Iran. The need for this originally arose from the changes in UK visa rules which reduced opportunities for overseas MPharm graduates to remain in the UK to undertake pre-registration training; the 5-year programme that integrates pre-registration training with

academic study allows them to remain in the country on student visas. A step 1 event took place in June 2019 at which the accreditation team agreed to recommend to the GPhC's Registrar that UCL's 5-year MPharm degree should be accredited provisionally without any conditions or recommendations. This meant that UCL could progress from step 1 to step 2 of the process for accrediting new 5-year MPharm degrees and that students could be admitted in the 2019-2020 academic year. It was also agreed that the step 2 visit would take place in the academic year prior to the first final year placement blocks being delivered and, among other matters, would look at recruitment to the 5-year course, student induction for placement blocks, a placement block training plan, the training of designated supervisors, the accreditation of training sites and the status of clinical placement agreements. Furthermore, UCL was required to inform the GPhC well in advance of when practice blocks would be delivered for the first time, so that the step 2 visit could be arranged at an appropriate time. In September 2020, 16 new students enrolled as the first cohort of the 5-year Integrated MPharm. A combined steps 2 and 3 event was arranged for July 2021. On that occasion, the accreditation team agreed to recommend to the Registrar of the GPhC that the MPharm degree provided by University College London should progress from step 3 to step 4 of the process for accrediting new 5-year MPharm degrees. There were no conditions or recommendations, but the team advised the University to amend its website and other promotional material to ensure that there is absolute clarity about the 5-year MPharm degree being a 5-year course and not a 4+1 model, and also the conditions in which an appropriate exit qualification would be awarded. In view of the change in the integrated foundation year as a result of the introduction of the new (2021) standards for the initial education and training of pharmacists, the GPhC required the programme to undergo a repeat of step 2 of the accreditation process and the following includes a report of that event.

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 ('the team') and it was deemed to be satisfactory to provide a basis for discussion.

Pre-event

In advance of the main event, a pre-event meeting took place via videoconference on 24 May 2024. The purpose of the pre-event meeting was to prepare for the event, allow the GPhC and the provider to ask any questions or seek clarification, and to finalise arrangements for the event. The provider was advised of areas that were likely to be explored further by the accreditation team during the event and was told the learning outcomes that would be sampled.

The event

The event took place on site at the University on 12-14 June 2024 and comprised of a series of meetings between the GPhC accreditation team and representatives of the MPharm degree and a meeting with past and present students.

Declarations of interest

There were no declarations of interest.

Schedule

Day 1: 12 June 2024

12:30 - 15:00	Private meeting of the accreditation team (including lunch)
15:00 - 16:00	Welcome and introductions.
	Management and oversight of the 4-year MPharm degree, and MPharm degree with integrated foundation training - part 1 • Presentation from provider
16:00 - 16:45	Tour of MPharm teaching and learning facilities

Day 2: 13 June 2024

09:00 - 11:30	Management and oversight of the 4-year MPharm degree, and MPharm degree with integrated foundation training - part 2 • Questions and discussions
11:30 - 11:45	Break and private meeting of accreditation team
11:45 - 12:15	Teaching, learning, support and assessment 4-year MPharm degree, and MPharm degree with integrated foundation training - part 1a • Presentation
12:15 - 13:15	Lunch and private meeting of accreditation team
13:15 - 15:30 Inc optional break at midpoint	Teaching, learning, support and assessment 4-year MPharm degree, and MPharm degree with integrated foundation training - part 1b Questions and discussion
15:30 - 15:45	Break and private meeting of accreditation team
15:45 –17:15	Student meeting

Day 3: 14 June 2024

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08:30 - 09:00	Private meeting of the accreditation team
09:00 - 10:00	 MPharm degree with integrated foundation training quality assurance and supervision Presentation Questions and discussion
10:00 - 10:15	Break and private meeting of the accreditation team
10:15 - 11:15	 Teaching, learning, support and assessment 4-year MPharm degree - part 2 Presentation covering independent prescribing Questions and discussion
11:15 - 11:30	Break and private meeting of the accreditation team
11:30 - 12:30	 Teaching, learning, support and assessment 4-year MPharm degree - part 3 A detailed look at the teaching, learning and assessment of a sample of learning outcomes selected by the accreditation team
12:30 - 16:00	Break and private meeting of accreditation team (including lunch between 13:30 – 14:15)
16:00 - 16:15	Deliver outcome to the University

Attendees

Course provider

The accreditation team met with the following representatives of the provider:

Name	Designation at the time of accreditation event		
Ahad, Professor Rahim	Professor, Head of the Research Department of		
	Pharmacology		
Aghakhani, Poureya	London North West University Healthcare NHS Trust -		
	Pharmacy Operational Site Lead		
Ahmad, Anika	Lecturer, Department of Practice and Policy		
Ali, Bukky	Green Light Pharmacy - Community Pharmacist		
Ali, Professor Afia	Department of Pharmacology, BAME Awarding Gap Lead for		
	Faculty of Life Sciences, Module Lead PHAY0078		
Al-Saad, Sarah	Green Light Pharmacy - Pharmacy Teacher-Practitioner		
Badru, Heather	School of Pharmacy Staffing and HR Manager		
Bates, Professor Ian	Professor of Pharmacy Education, Department of Practice and Policy		

Lead, Module Lead PHAY0002. Martin, Kirsty* Teaching & Learning Manager Massaro, Dr Giulia Lecturer, Department of Pharmacology University College London (UCL), Master of Pharmacy (MPharm) degree reaccreditation Part 1 and MPharm with integrated foundation training Step 2 event report, June 2024

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Boucher, Charles Patient/Carer - PPI Group Associate Professor, Department of Practice and Policy, School of Pharmacy, Careers Lead Brown, Professor Louise* Professor of Pharmacy Education, Clinical Pharmacy Lead for MPharm programme, Module Lead PHAY0085 Senior Pharmacy Technician, School of Pharmacy Associate Professor, Department of Policy and Practice, Admissions Tutor, Module Lead PHAY0001 School of Pharmacy Divisional Manager Technical Manager (Teaching Laboratories), School of Pharmacy Boots - Healthcare Academy Trainer Lecturer, Department of Practice and Policy, Module Lead PHAY0072. Day Lewis - Superintendent Pharmacist Lecturer, Department of Pharmaceutical and Biological Chemistry Senior Technician, School of Pharmacy Lecturer, Department of Pharmaceutics Patient/Carer - PPI Group Professor, Department of Practice and Policy Lecturer, Department of Practice and Policy Royal Free London NHS Foundation Trust - Principal Pharmacist - Education & Training Associate Lecturer, Department of Pharmaceutics Training & Enquiry Support Librarian, School of Pharmacy Professor, Department of Pharmacology, Chair of **Departmental Extenuating Circumstances Panel** School of Pharmacy Library Manager Teaching & Learning Manager/Assessments & Programme Manager, School of Pharmacy Associate Professor, Department of Pharmaceutical and Biological Chemistry Professor, Department of Practice and Policy Clinical Safety Lead Digital Healthcare, UCLH Hospitals NHS Foundation Trust Barts Health NHS Trust - Pharmacy Training and Workforce **Transformation Lead** Professor, Department of Pharmacology, Associate Director (Education), Year 4 Lead. Patient/Carer - PPI Group Associate Professor, Department of Pharmaceutical and Biological Chemistry, MPharm Programme Director, Year 1

Boyd, Jen

Buck, Maria Bukhari, Nadia

Bunting, Dr Steve Calladine, Matthew

Carville, Elaine Chaudhry, Dr Navila

Chhatralia, Rachna Dickman, Dr Rachael

Dolling, Alison Dziemidowicz, Dr Karolina Etkind, Mike Franklin-Dean, Professor Bryony Garfield Dr Sara, Giddings, Steve

Gurgul, Dr Seb Harris, Neroli Harvey, Professor Kirsten

Heath, Abi Hendrix, Lavon

Hilton, Dr Steve

Horne, Professor Rob Yogini, Jani Dr

Khatun, Shammi

Lever, Professor Rebecca*

Lloyd, Jill Malkinson, Dr John*

Mercer, Dr Audrey	Associate Professor, Department of Pharmacology, Deputy MPharm Programme Director, Senior MPharm Academic
Morris, Dr Chris	Tutor, Year 2 Lead, Module Lead PHAY0077 Associate Professor, Department of Pharmaceutics, Module Lead PHAY0080
Murdan, Dr Sudax	Associate Professor, Department of Pharmaceutics, Module Lead PHAY0004
Narayanan, Dr Selva Athi	Learning Technologist, School of Pharmacy
Ng, Terry	Associate Professor, Department of Practice and Policy, Year 3 Lead
Nichols, Rebekah	Partnerships & Placements Manager, School of Pharmacy
Offord, Robin	UCLH Hospitals NHS Foundation Trust - Director of Clinical Pharmacy
Olayide, Ade	Lecturer, Department of Policy & Practice
Olayide, Ade	Day Lewis - Foundation Training Manager
Orlu, Mine	Professor, Department of Pharmaceutics, MPharm
	Interprofessional Education Lead & Athena Swan Lead
Parhizkar, Dr Maryam	Lecturer, Department of Pharmaceutics
Parkinson, Dr Gary	Associate Professor, Department of Pharmaceutical and
	Biological Chemistry
Phillips, Adam	Digital Education Manager, School of Pharmacy
Phillips, Professor James	Professor, Department of Pharmacology, Module Lead PHAY0003
Pyzik, Oksana	Lecturer, Department of Practice and Policy
Rayan, Anshu	Central and North West London NHS Foundation Trust (CNWL) - Deputy Chief Pharmacist
Rayner, Dr Melissa	Lecturer, Department of Pharmacology
Ruiz, Dr Arnaud	Associate Professor, Department of Pharmacology, Module Lead PHAY0060
Shaikh, Amira	Lecturer, Department of Practice and Policy
Shivaanand, Minal	Lead Pharmacist – Education, Training and Workforce Development, Whittington Health NHS Trust
Sidhu, Priya	Admissions and Student Services Manager, School of Pharmacy
Smith, Dr Hazel	Faculty Tutor, Faculty of Life Sciences
Stapleton, Dr Paul	Lecturer, Department of Pharmaceutical and Biological Chemistry, Chair of MPharm Board of Examiners, Module Lead PHAY0079
Swain, Will	Lecturer Department of Practice and Policy, Associate Director (Clinical Education)
Taylor, Professor Gail	Professor, Dean of the Faculty of Life Sciences
Todd, Professor Matt	Professor, Head of the Research Department of
-	Pharmaceutical and Biological Chemistry
Waller, Dr Zoe	Associate Professor, Department of Pharmaceutical and Biological Chemistry

Warner, Lindsey	Partnerships & Placements Administrator, School of Pharmacy
Wei, Professor Li	Professor, Head of the Research Department of Practice and Policy
Wells, Dr Geoff	Associate Professor, Department of Pharmaceutical and Biological Chemistry, Chair of the PGT Board of Examiners
Weston, Lisa	Study Abroad and Placements Administrator, School of Pharmacy
Whitehead, Graham	London Metropolitan University, IPE Theme – BA (Hons) Social Work
Whittlesea, Professor Cate*	Professor, Director School of Pharmacy
Williams, Professor Gareth	Professor, Head of the Research Department of Pharmaceutics

* also attended the pre-event meeting on 24 May 2024

The team also met a group of 11 students comprising one from year 1, three from year 2, four from year 3 and one from year 4, along with two former students, one a foundation year trainee and one a recent registrant.

Key findings - Part 1 Learning outcomes

During the reaccreditation process the accreditation team reviewed the provider's proposed teaching and assessment of all 55 learning outcomes relating to the MPharm degree. To gain additional assurance the accreditation team also tested a sample of **SIX** learning outcomes during a separate meeting with the provider.

The following learning outcomes were explored further during the event: Learning outcomes 9, 28, 32, 35, 36 and 45.

The team agreed that all 55 learning outcomes were met (or would be met at the point of delivery) or likely to be met by the part 2 event.

See the **<u>decision descriptors</u>** for an explanation of the 'Met' 'Likely to be met' and 'not met' decisions available to the accreditation team.

The learning outcomes are detailed within the <u>Standards for the initial education and training of</u> pharmacists, January 2021.

Domain: Person-centre	ed care and	d collaboration (learnir	ng outcomes 1 - 14)
Learning outcome 1 is:	Met 🗸	Likely to be met 🗆	Not met 🗌
Learning outcome 2 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Learning outcome 3 is:	Met 🗸	Likely to be met \Box	Not met 🗆
Learning outcome 4 is:	Met 🗸	Likely to be met \Box	Not met 🗆
Learning outcome 5 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Learning outcome 6 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Learning outcome 7 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Learning outcome 8 is:	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 9 is:	Met 🗸	Likely to be met \Box	Not met 🗆
Learning outcome 10 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Learning outcome 11 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Learning outcome 12 is:	Met 🗸	Likely to be met \Box	Not met 🗆
Learning outcome 13 is:	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 14 is	Met 🗸	Likely to be met 🗌	Not met 🗌
Domain: Professional	practice (le	arning outcomes 15 - 4	14)
Learning outcome 15 is	Met 🗸	Likely to be met 🗌	Not met 🗌
Learning outcome 16 is	Met 🗸	Likely to be met 🗌	Not met 🗌
Learning outcome 17 is	Met 🗌	Likely to be met 🗸	Not met 🗌
Learning outcome 18 is	Met 🗆	Likely to be met 🗸	Not met 🗆
Learning outcome 19 is	Met 🗸	Likely to be met 🗌	Not met 🗖
Learning outcome 20 is	Met 🗸	Likely to be met \Box	Not met 🗆
Learning outcome 21 is	Met 🗸	Likely to be met \Box	Not met 🗆
Learning outcome 22 is	Met 🗸	Likely to be met 🗌	Not met 🗌

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Learning outcome 23 is	Met 🗸	Likely to be met 🗌	Not met 🗌
Learning outcome 24 is	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 25 is	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 26 is	Met 🗸	Likely to be met 🗌	Not met 🗖
Learning outcome 27 is	Met 🗸	Likely to be met 🗆	Not met 🗖
Learning outcome 28 is	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 29 is	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 30 is	Met √	Likely to be met 🗆	Not met 🗆
Learning outcome 31 is	Met √	Likely to be met 🗆	Not met 🗆
Learning outcome 32 is	Met √	Likely to be met 🗆	Not met 🗆
Learning outcome 33 is	Met √	Likely to be met 🗌	Not met 🗆
Learning outcome 34 is	Met √	Likely to be met 🗌	Not met 🗆
Learning outcome 35 is	Met √	Likely to be met 🗆	Not met 🗆
Learning outcome 36 is	Met 🗆	Likely to be met ✓	Not met 🗆
Learning outcome 37 is	Met 🗌	Likely to be met 🗸	Not met 🗆
Learning outcome 38 is	Met 🗸	Likely to be met 🗆	Not met 🗆
Learning outcome 39 is	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 40 is	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 41 is	Met 🗸	Likely to be met 🗆	Not met 🗆
Learning outcome 42 is	Met 🗸	Likely to be met 🗆	Not met 🗆
Learning outcome 43 is	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 44 is	Met 🗸	Likely to be met 🗌	Not met 🗆

The accreditation team agreed that the following learning outcomes were likely to be met:

- 17. Recognise and work within the limits of their knowledge and skills and get support and refer to others when they need to.
- 18. Take responsibility for all aspects of pharmacy services, and make sure that the care and services provided are safe and accurate.
- 36. Apply relevant legislation and ethical decision-making related to prescribing, including remote prescribing.
- 37. Apply relevant legislation and ethical decision-making related to prescribing, including remote prescribing.

This was because there was insufficient evidence at the part 1 event to deem these outcomes to be met. Further evidence will be available as the new MPharm programme rolls out in the next academic year, with the expansion in the placement programme, the increased incorporation of prescribing and the use of the e-portfolio.

Domain: Leadership and management (learning outcomes 45 - 52)					
Learning outcome 45 is	Met 🗌	Likely to be met ✓	Not met 🗌		
Learning outcome 46 is	Met 🗸	Likely to be met 🗌	Not met 🗌		

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Learning outcome 47 is	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 48 is	Met 🗸	Likely to be met \Box	Not met 🗆
Learning outcome 49 is	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 50 is	Met 🗸	Likely to be met 🗌	Not met 🗆
Learning outcome 51 is	Met 🗸	Likely to be met \Box	Not met 🗆
Learning outcome 52 is	Met 🗌	Likely to be met 🗸	Not met 🗆

The accreditation team agreed that the following learning outcomes are likely to be met:

- 45. Demonstrate effective leadership and management skills as part of the multi-disciplinary team.
- 52. Demonstrate resilience and flexibility, and apply effective strategies to manage multiple priorities, uncertainty, complexity and change.

This was because while there was sufficient evidence for meeting these outcomes at the 'knows how' level through team working, further evidence is needed to demonstrate that individual students meet the outcome at the 'shows how' level.

Domain: Education and research (learning outcomes 53 - 55)					
Learning outcome 53:	Met 🗸	Likely to be met 🗌	Not met 🗌		
Learning outcome 54:	Met 🗌	Likely to be met 🗸	Not met 🗆		
Learning outcome 55:	Met 🗸	Likely to be met 🗌	Not met 🗆		

The accreditation team agreed that the following learning outcome is likely to be met:

• 54. Support the learning and development of others, including through mentoring.

This was because while there was sufficient evidence for meeting this outcome at the 'knows how' level through team working and peer feedback, further evidence is needed to demonstrate that individual students meet the outcome at the 'shows how' level.

Key findings - Part 2 Standards for the initial education and training of pharmacists

The criteria that sit beneath each standard are detailed within the **<u>Standards for the initial education</u>** and training of pharmacists, January 2021.

Standard 1: Selection and admission

Students must be selected for and admitted onto MPharm degrees on the basis that they are being prepared to practise as a pharmacist

Criterion 1.1 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Criterion 1.2 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 1.3 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 1.4 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Criterion 1.5 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 1.6 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 1.7 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 1.8 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 1.9 is:	Met 🗸	Likely to be met 🗆	Not met 🗆

The documentation described how information for prospective applicants is provided primarily via the online prospectus and School website, as well as through Open Days which may either comprise visits to the School or be held virtually. Information provided includes details of the course, entry requirements, the need for good character and health checks, information on access and widening participation and details of the selection process. Those applicants meeting the entry requirements are asked to complete an online selection test comprising numeracy and situational judgment tests, which are marked automatically, as well as a written component designed to determine literacy and communication skills and the absence of any overt values-based concerns; the written component is scored by the MPharm admissions tutor. All three components are scored on the basis of exceeding, meeting, partially meeting, or failing to meet the School's requirements. The criteria for meeting requirements are clearly defined and applications not meeting requirements are usually rejected but may be referred for further consideration. Applicants who meet the requirements are invited for a 15minute online interview conducted by a panel comprising an academic member of staff, a GPhCregistered pharmacist, who is usually also a staff member, and one current MPharm student ambassador. Interview questions cover aspects such as motivation to study pharmacy and professionalism and are scored individually by panel members against specified criteria. Applicants receiving a low interview score are reviewed by the Admissions Tutor and Admissions Manager. All staff members receive equality, diversity and inclusion training. Student ambassadors must complete the Harvard University 'Project Implicit' tests prior to participating in interview panels and reflect on the outcome of these tests. Every year, the School of Pharmacy scrutinises data relating to applicants, offer holders and new student intake demographic data broken down by age, ethnicity, disability status, religion, sexual orientation and sex. These data are reviewed by the School's EDI Committee and indicate that the application process does not appear to be disadvantaging applicants with any protected characteristics. The University's widening participation scheme ensures that eligible applicants receive a contextual offer based on grades lower than the standard entry requirements.

In response to the team's wish to learn how the School quality assures the interview process and ensures consistency, the staff stated that the same process is used for 4- and 5-year programmes following anonymous screening of applicants by the central admissions team, and reiterated the above description of the online test and interview processes; prior to the online test, candidates undergo a compulsory, online briefing, which is interactive, allowing them to ask questions. All questions are reviewed annually by staff members as well as by members of the Public and Patient Involvement (PPI) group, along with members of the admission team; as there is a large proportion of international applicants, the language of the questions is adjusted accordingly. There is also a staff briefing at the beginning of the selection cycle. Consistency is assured through training of panel members, including in equality, diversity and inclusion, and panel members are rotated so that the composition of interview panels changes throughout the cycle. Noting that some applicants with a non-standard educational background may undergo an extended technical interview, the team sought clarification of which students are affected by this and what is covered in the interview. The staff explained that this applied to mature applicants and those presenting different college qualifications. These applicants go through exactly the same admissions process as others, but this additional interview is primarily to ensure that their chemistry knowledge is sufficiently up to date so that they will not struggle on the course.

Noting that after confirming their identities, applicants have 24 hours to do the online test which requires a threshold score to achieve an interview, and seeking reassurance on how the School ensures that it is the applicant him/herself who has completed the test, the team was told that the compulsory briefing emphasises the importance of professionalism. In response to the team's concern that applicants from disadvantaged backgrounds may suffer compared with those who might receive support in completing the test, the staff accepted that this may happen, but emphasised that only about 6% of applicants fail the online test and do not progress to the interview stage. Moreover, the interview assesses the same points and values as those assessed in the online test; a large number of applicants are from backgrounds that would make them eligible for a contextual offer. Wishing to know what considerations are given to applicants' socio-economic and education background during the selection process, the team was told that the whole process is blind, and that people involved in interviews do not have any information concerning applicants' protected characteristics at the time. Contextual offers, which are two grades lower than a standard offer, are made automatically to appropriate applicants by the central admissions team.

In response to the team's wish to know how the School reviews equality, diversity and inclusion data in the context of selection and admissions, the staff described how they receive a breakdown of data covering all stages of the application and selection process by protected characteristics. Scrutiny of these data has provided assurance that no group is being disadvantaged; any evidence of such disadvantage would instigate an investigation.

The team was satisfied that all nine criteria relating to the selection and admission of MPharm students are met.

Standard 2: Equality, diversity and fairness

MPharm degrees must be based on, and promote, the principles of equality, diversity and fairness; meet all relevant legal requirements; and be delivered in such a way that the diverse needs of all students are met

Criterion 2.1 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Criterion 2.2 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Criterion 2.3 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 2.4 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Criterion 2.5 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 2.6 is:	Met 🗸	Likely to be met 🗆	Not met 🗌

The documentation described the range of systems and policies in place to promote and support equality, diversity and inclusion (EDI) at institutional, Faculty and School of Pharmacy levels. The School's Equality, Diversity, and Inclusion Committee (EDIC), reporting to the Divisional Operational Team (DOT), is responsible for ensuring an inclusive and supportive, successful learning and working environment for all staff and students, as well as for scrutinising relevant EDI data. Annually, the School receives student demographic and attainment data, which include a breakdown of all students in each year of study of the MPharm by domicile and sex, a breakdown of new student intake by age, ethnicity, disability status, religion, sexual orientation and sex, the number of awards made by domicile and sex and the number of applicants and offers by sex (please also see the narrative under standard 1). Data analysis has not identified any significant differences in outcomes for students with different characteristics. This was confirmed by the staff, who told the team that these data did not show that any particular group was likely to be disadvantaged and that there were no awarding gaps for pharmacy students; the School continues to ensure that this situation does not change and that assessment types remain diverse.

Students with disabilities are assessed by the UCL Disability, Mental Health and Wellbeing (DMHW) Team, who would make recommendations as to whether any reasonable adjustments are required, such as additional time in written assessments, deadline extensions for written coursework, or special examination arrangements, including alternative venues and the use of a PC and/or assistive software. Transcripts of all recorded lectures and other video material are available and staff members are encouraged to post all supplementary material, such as lecture notes and slides, in an accessible format. Hearing loops are available in teaching spaces to support students with hearing impairments. Special arrangements can also be made for students with, for example, parenting or caring responsibilities, time-limited physical or mobility impairments or for maternity/paternity.

EDI training is compulsory for all staff at UCL and all staff members must renew their training at least once every three years. Records of completion are maintained by the School. The online training course covers the Equality Act 2010 and all areas of discrimination; it includes links to other University resources. Experiential learning placement tutors will also be expected to complete this training course, in addition to any training that they will have received as part of their primary employment. Additionally, all staff members who are involved in interview panels must complete the 'Fair and Inclusive Recruitment' training prior to any interviews taking place. Students are introduced to the concepts of EDI at the beginning of year 1, with continuous reinforcement throughout the programme. The University's Code of Conduct for Students includes a statement on recognising the diversity of the UCL community and not discriminating against others on the basis of any characteristics. In year 1, students complete a 'Cultural Communication in Pharmacy' e-learning module, which focuses on ways in which cultural awareness can enhance patient care; the Human Rights Act 1998 and Equality Act 2010 are introduced in this module. Students must also complete CPPE safeguarding training. The legal and ethical responsibilities of pharmacists as they relate to equality legislation are reinforced throughout years 2 and 3, and students learn about the GPhC's 'Guidance on Religion, Personal Values and Beliefs', with interactive discussion about how a pharmacist's personal values, religion or belief may intersect with the provision of patient care. All materials used in teaching are designed to be inclusive; these include anatomical models that are representative of different genders and ethnicities, models with different skin tones, and diversity in virtual simulation avatars to reflect the diversity of patients, members of the public and other healthcare professionals encountered during experiential learning. Case studies are based on patients of a variety of ages, genders, ethnicities, religious beliefs and other protected characteristics. Patients and carers who participate in planned teaching at the School are also drawn from a variety of backgrounds. The students confirmed to the team that diversity was recognised by the School and addressed during the course, although they expressed mixed views on how well certain issues were addressed, such as the appearance of skin diseases against different skin tones.

Wishing to learn of examples of the areas being explored by the School's Equality, Diversity and Inclusion Committee (EDIC), the team was told that School had recently received an Athena Swan Silver Award and was currently exploring ways of attracting more male students. The Committee was also concerned with the transition from school to university including creating a sense of belonging within the School, which has led to the introduction of a number of activities such as a workshop and a 'white coat ceremony'. The School and Faculty EDICs are also focused on recruiting a diverse student body, especially looking at intersectionality.

In response to the team's wish to learn how the School ensures that placement providers and practice supervisors understand the diversity of the students' circumstances, the staff described how regular monthly meetings with their experiential learning partners include discussions of the demography of the student population which demonstrate its diversity. The requirements of students having specific needs are discussed with providers to determine the necessary support and the most appropriate placement location for such students.

The team was satisfied that all six criteria relating to equality, diversity and fairness were met.

Standard 3: Resources and capacity

Resources and capacity must be sufficient to deliver the learning outcomes in these standards

Criterion 3.1 is:	Met 🗸	Likely to be met 🗆	Not met 🗆	
Criterion 3.2 is:	Met 🗸	Likely to be met 🗌	Not met 🗆	
Criterion 3.3 is:	Met 🗸	Likely to be met 🗆	Not met 🗆	

The documentation described how the Faculty of Life Sciences, of which the School is a Division, updates its strategic operating plan and budget for consideration by UCL's Senior Management Team ahead of the start of each financial year. The University's Finance Committee receives a consolidated plan and budget and makes a recommendation to the UCL Council. The School's plan and budget

feeds into the Faculty plan at an early stage in the planning process through discussions involving the Faculty's finance team, the Dean and the Director of Operations of the Faculty. The School's income is derived from tuition fees, Office for Students and research, with expenditure covering staff and other costs, as well as a contribution to cover central Faculty and University costs, together with an operating surplus that can be reinvested in the University's capital expenditure programme.

The School currently has 79 members of academic staff, arranged into four main research departments, these being Practice and Policy, Pharmaceutical and Biological Chemistry, Pharmacology, and Pharmaceutics. Teaching and research in the School is additionally supported by 17 members of technical staff, as well as 37 professional services staff members. Of the 79 members of academic staff, 32 are GPhC-registered pharmacists and a further 11 members of staff possess a pharmacy qualification but are not currently registered with the GPhC. Six UK-registered pharmacist members of staff are also independent prescribers. Delivery of the programme is supported by three teacher practitioners from community pharmacy and four practitioners from NHS hospitals. Additional teacher practitioners also contribute to workshops and OSCEs throughout the year on an *ad hoc* basis.

Most timetabled teaching, with the exception of experiential learning placements and some interprofessional education sessions, is currently held in the School of Pharmacy building, which has one main lecture space accommodating a full cohort of 200 students. Another lecture theatre, equipped with mobile tablets and laptops, can be used flexibly either for workshops or for lectures. The building also includes two seminar rooms, other, smaller teaching spaces, an IT suite for computer-assisted learning and a Professional Skills Suite, comprising an adaptable workshop space that adjoins a fully equipped state-of-the-art dispensing laboratory with computers, labelling printers and dispensing benches, and a full range of medicines on lockable dispensary shelving. There is a bespoke, flexible Clinical Skills facility adjacent to the Professional Skills Suite. The School recently purchased a range of anatomy models and virtual reality (VR) headsets to support the teaching of anatomy, linked to clinical skills and prescribing. There are three state-of-the-art teaching laboratories that can each accommodate 50 students, providing specialised facilities and equipment for general organic, synthetic and analytical chemistry, pharmacology, biochemistry, microbiology and formulation science. A recent upgrade of IT, lecture capture and projection equipment in large and small teaching spaces was undertaken, together with enabling all spaces with ID card readers for attendance monitoring. The team visited some teaching areas, including the multi-purpose lecture theatre, the School library, the dispensary, the pharmaceutics teaching laboratory and the Clinical Skills suite.

The School uses Moodle as the centrally managed virtual learning environment (VLE) to provide all educational material required for modules and programmes, including audio-visual recordings of lectures and workshops, and pre-recorded video introductions to practical and skills classes, as well as for communication to students, online forums and discussion groups, departmentally managed assessments including quizzes, the submission of coursework, online marking and the return and management of feedback. From 2024-25, students will use a PebblePad e-portfolio platform, as part of a collaborative pan-London process to support experiential learning and assessment in practice.

In response to the team's wish to learn how the School maintains the level of resource needed to ensure sustainability, including factoring in staff research commitment and workload planning, as well

as how risk is proactively identified and managed, the staff described how this was achieved in liaison with UCL's Senior Management Team and discussions between the Director of the School and the Dean of the Faculty. The workload model is a school-based model that has been developed to align with UCL recommended best practices with respect to EDI and career development. Risks are reviewed regularly, at least annually, with the Director taking responsibility. The team heard that some of the main risks identified concerned experiential learning placement providers, the low tariff offered for pharmacy students compared with medicine, especially for primary care placements, the lack of access to NHS funding to support pharmacy students, and the availability of designated prescribing practitioners for the 5-year MPharm, as well as for their input to the 4-year programme. There were no concerns in relation to placement providers, with whom the School has excellent contacts; the School works actively with NHSE and with primary care hubs.

The team noted from the documentation a plan to redevelop three floors of the School building to produce a 'Bloomsbury East Student Hub' with a focus on student-centred learning, providing zoned space to accommodate teaching, learning, study and social activity, and requested further information on the timescale for this development, as well as for its impact on course delivery, especially if there are any delays in construction. The staff explained that although this project had been approved, the Covid-19 pandemic had resulted in the plans being put into abeyance. There is no timescale as yet, because the project is under review as a result of escalating costs since its first approval. The team was reassured that the project is intended to create more space, rather than repurposing existing space, and will have no negative impact on teaching and learning. The project will generate multi-purpose, flexible space as well as increasing space for the library.

The team was satisfied that all three criteria relating to resource and capacity were met.

Standard 4: Managing, developing and evaluating MPharm degrees

The quality of the MPharm degree must be managed, developed and evaluated in a systematic way

Criterion 4.1 is:	Met 🗸	Likely to be met 🗌	Not met 🗌	
Criterion 4.2 is:	Met 🗸	Likely to be met 🗌	Not met 🗆	
Criterion 4.3 is:	Met 🗸	Likely to be met \Box	Not met 🗆	
Criterion 4.4 is:	Met 🗸	Likely to be met 🗌	Not met 🗌	
Criterion 4.5 is:	Met 🗸	Likely to be met 🗌	Not met 🗆	
Criterion 4.6 is:	Met 🗸	Likely to be met 🗌	Not met 🗌	

The documentation described how the Director of the UCL School of Pharmacy is responsible for all academic activities within the School and reports to the Dean of the Faculty of Life Sciences; the Dean in turn reports to the Vice-Provost (Faculties), who reports directly to the UCL President and Provost. Within the School, responsibility and day-to-day accountability is devolved to a number of senior committees including a Divisional Strategy Team, a Divisional Operational Team (DOT), and a Divisional Education Committee (DEC), which have oversight of all academic programmes in the School, with a number of committees reporting to these, including the Undergraduate Programmes Committee (UPC), chaired by the MPharm Programme Director and which reports on all matters relating to the management and development of the MPharm programmes, including their organisation and delivery, curricula, assessment and any related teaching and learning matters. The senior leadership team also includes the Divisional Manager, the Associate Director (Education), who

has oversight of all UG and PG programmes and chairs the DEC, the Associate Director (Clinical Education) and the Associate Director (Research). The MPharm Programme Director is supported by the year leads, who are each responsible for the management of one year of study. The day-to-day running of each module, including its content, delivery and assessment, is the responsibility of the respective module leads, who are supported by deputy module leads in years 1 and 4 of the programme, and by a team of discipline leads in years 2 and 3. A series of science and clinical pharmacy vertical theme leads/experts maintain oversight of key themes that are developed and revisited throughout all four years of the programme.

The delivery of the MPharm programme is monitored and improved through a number of Faculty, institutional and external mechanisms. These include Departmental Education Plans (DEPs) which draw on the results of a number of feedback and review mechanisms, including student outcome metrics, internal and external (such as the NSS) feedback surveys and discussions with internal and external colleagues. The DEP is a rolling, risk-based process that records the enhancement activity that a department has committed to undertake in a given academic year to improve the student education experience and/or student outcomes. The School DEP feeds into the Faculty of Life Sciences plan, which is discussed at the Faculty Education Committee. Progress and completion of Faculty Education Plans are considered by the Quality and Standards Committee, which reports to the UCL Education Committee. External examiners' reports are scrutinised at Faculty, School and module level, with specific issues raised considered thoroughly by UPC and DEC. UCL also holds Internal Quality Reviews (IQRs); these are-risk based and are now used only to support divisions/departments that have been identified as performing significantly below agreed benchmarks. Noting that the School's last IQR was in 2015, the team was told that as the School does well in metrics as evidenced by its annually submitted DEPs, it has not undergone a further IQR.

Feedback from students is collected through a diverse range of mechanisms including online student voice forums, meetings with student representatives, online surveys and formal staff-student committee meetings, in addition to informal and *ad hoc* communication with students. Module leads share the overall results of the surveys with all students enrolled on the module, together with any advice, guidance, and actions taken or planned in response to the results and comments, helping to ensure a closed-loop process wherever possible. The University also undertakes an Annual Programme Survey, which provides all students with an opportunity to comment on their individual modules. Comments from this survey are collated by year leads and disseminated to module leads as part of their annual module review process. The staff provided the team with examples of how the School has responded to student feedback; these included the provision of a timetable of assessment and feedback, with improvements in the timeliness of feedback, improving their experiences on the Boots placement through, for example, clarifying to the students what activities they will undertake during the placement, and changing the fourth year interprofessional education with medical students to improve the discussions on case studies and on how the students learn from each other. When asked if there were sufficient opportunities for the 'student voice' to be heard and for them to provide feedback on the programme, the students told the team that while they can present concerns, the School's responsiveness varied according to the subject, the modules and the staff involved, and that better communication between students and the School was required; some staff members were receptive to feedback while sometimes the students felt not listened to and sometimes it was hard to convince the School to act. Student representatives gather student views

and year group leads take them seriously. The students noted that the School's actions in response to their concerns are often implemented for the following year.

Specific systems and policies are in place to manage periods of experiential and inter-professional learning. Experiential placements are underpinned by legal contracts for all placement providers; these outline the responsibilities of each party for placements and the quality assurance processes required to accredit the site. The Clinical Placement Providers Working Group, comprising School staff, teacher practitioners and education and training leads from community pharmacy and NHS trusts, meets regularly to discuss and develop new and existing experiential learning opportunities and review feedback from students and placement site providers. Each experiential learning site has an experiential learning lead. Experiential learning activities for GP placements (years 3 and 4) are being developed collaboratively with colleagues at KCL and Kingston University as part of the Pan-London Pharmacy UG Placements Consortium. Comprehensive tutor support material is provided for each experiential placement. This is currently provided at the experiential supervisor induction event, which takes place either face-to-face or remotely, and allows supervisors to review procedures, student learning activities and assessment before the first students attend the site; at this event, the experiential learning lead is also made aware of fitness to practise procedures and contact details of School staff. Once the planned e-portfolio is developed as part of the Pan-London Pharmacy UG Placements Consortium, supervisor support material will be available for all placements within this system. Supervisor support training is also currently being developed based on the UCL Statement of Teaching Proficiency. The School has a dedicated partnership and placements team to support placement activities ensuring, for example, that DBS and health checks (including vaccinations) are up to date prior to undertaking a placement. This team liaises with experiential learning leads, providing details of students attending each placement activity. Students and supervisors are provided with a placement workbook, which provides comprehensive details of the placement, learning outcomes, activities and associated assessment. All of this information will be presented within the new eportfolio once developed. Placement hosts are invited to monthly meetings to ensure that any current issues are addressed in a timely manner. Placement hosts are additionally invited to raise any issues or concerns, at any point, directly with the School via the Clinical Placements Coordinator. Wishing to know of any updates on the development of the Pan-London UG Placements Consortium, the team learned that it is currently being chaired by UCL in rotation; there is a committee which meets quarterly to provide oversight for the various workstreams. Its aims are to ensure the sustainability of placements for the future and a fair level of experience for all students, while increasing efficiency and reducing barriers to the placement provision. The various workstreams include the development of a common e-portfolio for use across all the London schools of pharmacy, for which the consortium has secured £1.5M of funding from NHSE. Efficiency is being increased through the use of a single quality assurance process across all three schools and one training solution for all placement providers.

The School has sought the input of patients, the public, pharmacy stakeholders, current students, staff and alumni in order to understand their perceptions of pharmacy and pharmacy education, and to ensure that the MPharm programme continues to reflect their views and the needs of the profession. The Patient and Public Involvement (PPI) Panel continues to meet regularly, with a recent focus on the design and development of the new 4-year MPharm programme, and on teaching and learning resources, as well as on independent prescribing. Input from staff, students and the annual module and year-of-study review process ensures that the MPharm programme remains up-to-date, relevant and current. Requesting examples of how the School's engagement with stakeholders, especially patients and the public has informed and shaped the development of the MPharm programmes, the team was told that the stakeholder group, which includes patient representatives, advises on placements, and patients, carers and the public are involved in programme design. The Patient and Public Involvement (PPI) group, which comprises people of diverse ages and with very diverse conditions, reviews the admissions process and has provided advice on the year 5 placements, including on when trainees receive feedback and on the arrangements for transfer between the two 26-week placements. The 5-year Employer Placement working group and the associated Foundation and Early Careers group also has input into this process.

The team was satisfied that all six criteria relating to the management, development and evaluation of MPharm degrees were met.

Standard 5: Curriculum design and delivery

The MPharm degree curriculum must use a coherent teaching and learning strategy to develop the required skills, knowledge, understanding and professional behaviours to meet the outcomes in part 1 of these standards. The design and delivery of MPharm degrees must ensure that student pharmacists practise safely and effectively

Criterion 5.1 is:	Met 🗸	Likely to be met 🗌	Not met 🗌	
Criterion 5.2 is:	Met 🗸	Likely to be met 🗌	Not met 🗌	
Criterion 5.3 is:	Met 🗸	Likely to be met 🗌	Not met 🗆	
Criterion 5.4 is:	Met 🗸	Likely to be met 🗆	Not met 🗆	
Criterion 5.5 is:	Met 🗸	Likely to be met 🗆	Not met 🗆	
Criterion 5.6 is:	Met 🗆	Likely to be met 🗸	Not met 🗆	
Criterion 5.7 is:	Met 🗸	Likely to be met 🗆	Not met 🗆	
Criterion 5.8 is:	Met 🗸	Likely to be met 🗌	Not met 🗆	
Criterion 5.9 is:	Met 🗸	Likely to be met 🗆	Not met 🗌	
Criterion 5.10 is:	Met 🗸	Likely to be met 🗆	Not met 🗆	
Criterion 5.11 is:	Met 🗸	Likely to be met 🗌	Not met 🗌	
Criterion 5.12 is:	Met 🗸	Likely to be met 🗌	Not met 🗌	
Criterion 5.13 is:	Met 🗸	Likely to be met 🗆	Not met 🗆	

The documentation described the structure of the new MPharm programme designed to meet the 2021 GPhC standards. The first year comprises four 30-credit modules designed to introduce fundamental material that underpins the later years and supports students in their transition from school to university. Years 2-4 each comprise two 60-credit modules, which in years 2 and 3 address clinical therapeutics and the scientific basis of practice in a body-system approach, culminating in dealing with cancer along with advanced formulation and therapeutics. In year 4, students undertake a research project in parallel with a term-long wiki-based integrated therapeutics project, supported by workshops focussing on transdisciplinary integration, where they bring together their knowledge and understanding of clinical pharmacy and the physical and biological sciences from all four years of the programme. The final year also includes a 'Preparation for Practice' module, which considers

complex patient cases, advanced clinical decision making and consideration of advanced aspects of medicines safety, in which students apply their understanding to more complex clinical pharmaceutical situations in a fully integrated manner. In each of the four years, there is a zero-credit rated 'Clinical, Professional and Scientific Skills' module covering topics such as calculations, study and research skills, academic integrity, engagement, professionalism and CPD, physical assessment and communications skills. Throughout the programme, lectures, patient-centred integrated therapeutics workshops, seminars and practical and professional classes, in addition to experiential and interprofessional learning, are used to support students' learning of science integrated with practice. The programme uses a blended learning approach, which supplements traditional on-campus and workplace-based face-to-face teaching and learning activities with a collaborative online learning experience. The students confirmed to the team the blended nature of their learning through a mixture of online and face-to-face activities. On the whole, they agreed that the School had achieved the right balance between online and face-to-face learning, valuing the flexibility of online lectures, but emphasising the importance of mandatory, in-person workshops.

Students gain practical experience of working with patients, carers and other health professionals through practical classes and simulations as well as clinical placements. There are approximately 70 days of placements across the four years, covering learning in a variety of settings including community pharmacy, NHS hospital and specialist pharmacy, GP practices, and in third sector healthcare settings. Noting the planned marked expansion in placements and the transition to the new programme for all years in October 2024, the team wished to know what experiential learning has been delivered to date to meet the 2021 GPhC standards and what is still to be developed. The staff described how all placement provider partners have been identified, with the year 3 and 4 Green Light community pharmacy and expanded hospital placements already established; the Central North West London (CNWL) NHS Trust placement covering the multidisciplinary team concerned with addiction services is already running. Talks are in progress to provide GP placements in year 4, where the staff acknowledged that capacity is an issue. The students confirmed to the team their experiences of working with patients. While valuing their exposure to patients and hospital staff during placements, as well as to simulated patients, for example, in OSCEs, and stating that they were aware of the expansion in the placement programme throughout the MPharm, they reported variability in their experiences during placements and expressed the view that they should be better structured, with more opportunity to undertake activities. Some placements had caused them to miss lectures, which they had then been required to follow up in their own time, although the staff later confirmed that this was only in the transition period and that this will not be the case in future. Placement providers from NHS trusts and community pharmacies told the team about their very positive relationships with UCL School of Pharmacy. Different branches of the profession are coming together to provide placements in different sectors, working with UCL to meet demand for clinical skills, ensuring patient exposure from a very early stage and developing students' interpersonal skills. The relationships were built on trust and communications were very good, with good planning to determine what is wanted and what can be delivered, along with a collaborative approach, enabling any issues to be readily addressed. UCL has robust, thorough quality assurance processes and the students are patient centred and safe. A similar positive experience was described by representatives of the Patient and Public Involvement group, who described their role in the admissions process, in developing scenarios for objective, structured clinical examinations (OSCEs) and in working with students in exercises on communication skills, for which they told the team the students were well prepared.

Students are introduced to interprofessional education (IPE) in year 1: this introduction includes student engagement with avatars of other healthcare professionals such as nurses and GPs. Plans for IPE in the new MPharm programme across years 2-4 include pharmacy students working with a wide range of other healthcare professional students, such as students of nursing, audiology, ophthalmology, dentistry, physiotherapy, psychology, and medicine, building on several successful pilot projects. Year 4 IPE focuses on interprofessional prescribing in primary care, with pharmacy students working with year 5 medical students; the sessions are run by GPs and community pharmacists and the students discuss more challenging cases involving multimorbidity and complex therapies. The students confirmed to the team their experiences of interprofessional education, including work with nursing students in year 2, an online activity with various healthcare professional students from Hong Kong University, and activities with medical students in year 4.

Patient safety is emphasised throughout and unsafe practice in any assessment will result in failure of that assessment. All modules, including the zero credit 'Clinical, professional and scientific skills' modules must be passed for students to progress or graduate. Students are expected to show professional behaviour at all times and are aware that unprofessional behaviour may result in fitness to practise investigations and potential sanctions; students must make an annual fitness to practise declaration. Fitness to practise concerns may be raised by fellow students, members of staff, placement providers, or members of the public. Mechanisms are in place for addressing any concerns relating to a student's fitness to practise.

Noting that the new MPharm programme to meet the 2021 GPhC standards starts for all four years simultaneously in the academic year 2024-25, the team wished to learn of the gaps needing to be addressed for the current year 3 students transitioning into year 4 and how these gaps will be met. The staff explained that the main gap will be in the teaching of prescribing. The team heard that teaching relevant to prescribing is embedded throughout four years of the programme in the new course. It is delivered through lectures, workshops and placements and covers aspects such as clinical decision making, consultation skills and physical assessment skills, including measurements of temperature, respiration, pulse and blood pressure and various metabolic parameters such as blood glucose and cholesterol. By year 4, students will be dealing with complex cases in a prescribing workshop working with pharmacist independent prescribers and actors. Much of the material has already been covered in the current course and that which has not been covered will be addressed for the 2024-25 year 4 students, for example, through using space available in the 'Preparation for practice' module. Activities will take place in term 1; thus, in the hospital placement, students will spend time in clinics with prescribers and will write reflections on their observations. Prescribers can also be brought into the School, which has access to partners and alumni who are independent prescribers and who are willing to help. Prescribing-related material will be incorporated into the eportfolio from October 2024.

Requesting information about how students are matched with supervisors for their final year research projects, the team was told that the process starts in year 3, where students express their preferences for projects either within the School or with overseas partners; their preferences cover choices of department, research area and project type. The School then looks at staff availability taking into account other commitments such as MSc projects and allocates projects taking into account student wishes. Most students are allocated their preferred choice; although some students are disappointed

by the allocation, all projects allow students to acquire skills and learn how to undertake research, with some undertaking laboratory-based projects, while others, such as those concerned with metaanalysis, are library based. Those undertaking projects abroad have a supervisor within the School as well as in the host institution; the students told the team that they value the opportunity to study abroad.

While criteria 5.1-5.5 and 5.7-5.13 are met, the team agreed that criterion 5.6 is likely to be met. This is because although plans for the expansion in experiential learning across all four years are very well advanced, not all placements have yet been delivered and the GP placements are yet to be confirmed. The team looks forward to seeing the progress in experiential learning at the part 2 event in January 2025.

Standard 6: Assessment

Higher-education institutions must demonstrate that they have a coherent assessment strategy which assesses the required skills, knowledge, understanding and behaviours to meet the learning outcomes in part 1 of these standards. The assessment strategy must assess whether a student pharmacist's practice is safe

Criterion 6.1 is:	Met 🗸	Likely to be met 🗌	Not met 🗌
Criterion 6.2 is:	Met 🗌	Likely to be met 🗸	Not met 🗌
Criterion 6.3 is:	Met 🗌	Likely to be met 🗸	Not met 🗌
Criterion 6.4 is:	Met ✓	Likely to be met 🗆	Not met 🗌
Criterion 6.5 is:	Met 🗸	Likely to be met 🗆	Not met 🗌
Criterion 6.6 is:	Met ✓	Likely to be met 🗆	Not met 🗌
Criterion 6.7 is:	Met 🗸	Likely to be met 🗆	Not met 🗌
Criterion 6.8 is:	Met 🗌	Likely to be met 🗸	Not met 🗌
Criterion 6.9 is:	Met 🗸	Likely to be met 🗆	Not met 🗌
Criterion 6.10 is:	Met 🗸	Likely to be met 🗆	Not met 🗌
Criterion 6.11 is:	Met 🗸	Likely to be met 🗆	Not met 🗌
Criterion 6.12 is:	Met 🗸	Likely to be met 🗆	Not met 🗌
Criterion 6.13 is:	Met 🗸	Likely to be met 🗆	Not met 🗌
Criterion 6.14 is:	Met 🗸	Likely to be met 🗆	Not met 🗆

The documentation described how the assessments, which have been mapped to the 55 GPhC learning outcomes, ensure that students meet these at the appropriate levels ('knows', 'knows how', 'shows how' or 'does'). Assessments include end-of-module written and multiple-choice question (MCQ) examinations, course work based on, for example, practical work, data analysis, laboratory reports and online assignments, and objective, structured clinical examinations (OSCEs). Competency based outcomes, including those based on generic skills acquired in experiential and practical learning are assessed in students' 'portfolio of practice' in the zero-credit 'Clinical, Professional and Scientific Skills' modules; these cover aspects such as pharmaceutical calculations, study and research skills, academic integrity, engagement, continuing professional development (CPD), physical assessment and communications skills. The years 2-4 portfolio of practice incorporates the students' e-portfolios, which includes assignments relating to experiential and inter-professional learning, work-based

assessments, and other professional activities. Assessments are designed by the staff members responsible for the delivery of the related taught content, then reviewed by the relevant module teams, an internal review committee of subject experts and year leads, and by the external examiners. All assessments are subjected to standard setting using appropriate methods, so that pass marks reflect the achievement of a minimally competent candidate. The outcomes of all summative assessments are evaluated to ensure that they are effectively and fairly assessing student achievement. Results, together with a statistical analysis of marks, a summary report for external examiners and an audit and review summary, detailing quality assurance processes such as second marking and/or moderation, are presented to the Board of Examiners. Four external examiners, who are subject matter experts in chemistry, pharmacology, pharmaceutics and pharmacy practice, review samples of student work, assessment statistics and summary reports to check that assessments are being conducted appropriately and are adequately addressing the extent to which students have met the learning outcomes. Students are assessed for safe practice and will fail any assessment in which they make a mistake that in real life would lead to patient harm. Successful completion of the requisite assignments relating to experiential learning, work-based assessments and other professional activities is assessed within the experiential learning e-portfolios and must reflect safe and effective practice. Any unaddressed instances of unsafe practice would result in a student failing this element and being provided with appropriate feedback and support ahead of resubmission. Students are expected to keep a log of errors and near-misses (for example, in professional skills classes), reflection on these incidents, and on how they can improve. The team heard from students that they would like to see increased consistency in marking across the modules as well as having access to a question bank that crossed the various modules.

Summative assessments are supported both by diagnostic assessment, for example, for English language and numeracy, and by opportunities for formative practice and feedback, particularly when a type of assessment is new or unfamiliar. Students receive feedback on assessments, allowing them to review, reflect and evaluate their performance so that they can take appropriate action to improve in subsequent related assessments. Feedback in professional skills classes, workshops and on online quizzes, as well as from supervisors during placements, is often immediate. There is an emphasis on peer-supported learning and there are many opportunities to receive feedback from student peers.

Noting the use of summative assessment of group work, the team wished to learn how the School ensures the integrity of such assessment in terms of recognising the relative contribution of each member of the group. The staff stated that group work is encouraged, in order to develop communication and leadership skills and to learn how to resolve difficulties, for example in a year 2 project, and in a year 4 team project to develop a new pharmaceutical service proposal. In these activities all students must contribute to producing the final report and individual contributions can be identified. Peer assessment incentivises individuals and contributes to the final mark, with students marking each other, and staff intervening where disputes arise.

In response to the team's wish to learn more about the e-portfolio, and how it is designed to enable assessment at the 'does' level as outlined in the documentation, the staff explained that this is currently being developed and will address the assessment of competence in the workplace through workplace-based assessment templates, which students will complete and which will be accessible to all parties involved, although each student will only see his/her own template; their competences will be signed off by the placement supervisor, as happens currently during foundation training. Placement supervisors already use workplace-based assessments for postgraduate students and

foundation trainees and a training session is available. Students will also be trained in the use of the portfolio, which will also incorporate reflective accounts based on their interprofessional learning. Students will be able to revert to paper-based records in the event of failure of the electronic system. Activities required to demonstrate meeting outcomes at the 'does' level will be repeated as many times as possible to achieve competence, and the e-portfolio will allow staff to see students' progress in achieving the learning outcomes. The team was told that the OSCEs are the main means of demonstrating learning outcomes at the 'shows how' and 'does' levels and OSCEs are currently being developed so that they match to the outcomes defined in the 2021 GPhC standards. OSCEs will increase in complexity across the years, with students assessed at the 'knows how' and 'shows how' levels in years 1 and 2 and with years 3 and 4 including assessment at the 'does' level. The staff described how 'red flags' are built into OSCE stations and students must identify these in order to pass. If students do anything in an OSCE which may cause patient harm, this would be passed to a staff panel to address relevant safety issues.

Wishing to learn how students receive individual feedback across the MPharm programme, the team was told that academic tutors receive their tutees' results, which form the basis of tutorials in which students receive one-to-one feedback. There are also numerous opportunities in practical classes and in workshops, where, for example, students receive individual feedback on their communication and consultation skills; formative feedback on project reports enables students to improve before final submission. In their final year Green Light Pharmacy work on running a pharmacy, students receive feedback from staff and patients on what they did well and what needed improvement. Other examples of feedback from patients were from exercises in which students use the Medication-Related Consultation Framework (MRCF), including patients providing feedback on their communication and consultation skills, and from students' 'Walking in the pharmacist's shoes' activities, in which they receive feedback from standardised patients and actors. Students will also record feedback from patients and pharmacists in their e-portfolios. The students expressed mixed views on the quality and timeliness of feedback and told the team that the provision of feedback varied among staff members, including academic tutors and research project supervisors. Feedback was frequently given to the whole year rather than individually, and sometimes they simply received the mark on a piece of work without any feedback and feedback may be provided very late. However, individual feedback was given on year 3 essays, and in clinical skills classes. In general, the students expressed the view that feedback was an area of the programme where improvement was needed.

The team was satisfied that criteria 6.1, 6.4-6.7 and 6.9-6.14 relating to assessment were met. The team also agreed that the following criteria are likely to be met by the time of the part 2 event:

- 6.2. Higher-education institutions must demonstrate that their assessment plan is coherent, fit for purpose, and makes sure that assessment is robust, valid and reliable, and includes diagnostic, formative and summative assessments.
- 6.3. Assessment plans for the MPharm degree must assess the outcomes in part 1 of these standards. The methods of assessment used must be appropriate to the learning outcomes, in line with current and best practice, and be routinely monitored, quality assured and developed
- 6.8. Higher-education institutions must have in place effective management systems to plan, monitor and record the assessment of students. These must include the monitoring of experiential and inter-professional learning, during the MPharm degree, against each of the learning outcomes.

This was because workplace-based assessments were still under development, as was the e-portfolio in which students will record their achievements and competences. The team noted that the e-portfolio will be complete in time for its use starting in October 2024.

Standard 7: Support and development for student pharmacists and everyone involved in the delivery of the MPharm degree

Student pharmacists must be supported in all learning and training environments to develop as learners and professionals during their MPharm degrees. Everyone involved in the delivery of the MPharm degree should be supported to develop in their professional role

Support for student pharmacists					
Criterion 7.1 is:	Met 🗸	Likely to be met 🗌	Not met 🗌		
Criterion 7.2 is:	Met 🗸	Likely to be met 🗌	Not met 🗌		
Criterion 7.3 is:	Met 🗸	Likely to be met 🗆	Not met 🗆		
Criterion 7.4 is:	Met 🗸	Likely to be met 🗌	Not met 🗌		
Support for everyon	e involved in	the delivery of the MPharn	n degree		
Criterion 7.5 is:	Met 🗸	Likely to be met 🗆	Not met 🗌		
Criterion 7.6 is:	Met 🗸	Likely to be met 🗌	Not met 🗌		
Criterion 7.7 is:	Met 🗸	Likely to be met 🗌	Not met 🗌		
Criterion 7.8 is:	Met 🗸	Likely to be met 🗌	Not met 🗆		

The documentation described the systems in place to support students throughout the programme, starting with an induction just prior to the start of year 1. Here, students meet key staff members of the School, as well as Faculty Wellbeing Advisers, the Library Team and the Laboratory Technical Team. The induction week includes an overview of the School's professional and academic expectations, relevant policies and procedures, and of the support mechanisms available. Students also have their first meeting with their personal academic tutors, whom they normally retain throughout their time at the University and whom they are expected to meet regularly during each year of the programme. The academic tutor is the student's first point of contact for discussion of academic matters, for pastoral support, and for obtaining feedback and support for learning. Tutors can refer students to the appropriate central support services, such as Student Support and Wellbeing services or UCL Careers, when required. Academic tutors also review their tutees' personal development plans throughout the programme, as well as providing advice on updating CVs and applying for summer work placements or internships. First year students are additionally allocated a senior MPharm student who will act as a mentor to help with their transition from school to university. The School's Teaching and Learning Team monitors student engagement and attendance and meets those students whose attendance and engagement falls below expectations, referring them where required to central support systems. Throughout the programme, students are exposed to a wide range of professional role models, including registered pharmacists and those from other professions and backgrounds, with professional skills classes and workshops being supported by pharmacist teacher practitioners, many of whom are alumni of the School.

Staff support mechanisms include an annual formal appraisal process with line managers, this addressing, for example, career aspirations, workload and identification of training needs. New

members of academic staff undergo a structured induction process and a period of probation appropriate to their prior experience. The School's own teaching induction ensures that new staff members meet with existing staff and provides an opportunity to visit a partner NHS hospital trust and Green Light Pharmacy, so that teaching can be framed within the clinical context of the programme. The School induction also signposts new staff members to relevant training, including obtaining a teaching qualification where required, along with an introduction to peer review of teaching and the appointment of a suitably experienced teaching mentor where appropriate. The School and University provide ongoing support and professional development opportunities for all academic, technical and professional services staff, including support in obtaining Associate Fellowship, Fellowship or Senior/Principal Fellowship of the Higher Education Academy. The School's Teaching Innovation Committee helps to disseminate best teaching and learning practices, including the use of new technology. All academic staff members are expected to undertake a minimum of three continuing professional development activities each year, these being discussed at appraisal.

There are established routes for both students and staff members to raise concerns and escalating these where required. Students can raise concerns, for example, via their academic tutors, with any other member of staff, through the Staff-Student Consultative Committee or through an online service AskUCL. Staff members can raise concerns via a range of staff forums, relevant School committees, module leads, or their line managers, with these concerns being addressed at School or Faculty managerial level. The staff confirmed to the team the mechanisms for raising concerns, including those available for both students and providers to raise concerns relating to placements; legal agreements with placement providers cover how to raise and address concerns. Student induction before placements includes an explanation of how to raise concerns and covers the relevant GPhC guidance. Any concerns raised by placement providers or students on placement are discussed with the placement administration team, and any actions taken are fed back to the students.

Noting that in the new programme students take a zero-credit weighted module in each year in addition to the 120 credits comprising the other modules, the team asked if the School was assured that the student workload is appropriate and realistic. The staff explained that the zero-credit 'Clinical, Professional and Scientific Skills' modules are just for assessment purposes, with the workload sitting within each of the credit-bearing modules. The change to two 60-credit modules in years 2 to 4 ensures that students have more time by removing the need for repetition of material, which was unavoidable in the previous course based on four 30-credit modules in each year. The current students told the team that the workload balance needed improvement, however, it is recognised that the students on the current iteration of the MPharm are being 'levelled up'.

Attendance at classes is monitored and managed, with early interventions if attendance slips. Placement attendance is recorded in a daily diary, which the placement supervisors sign off; placement supervisors notify the School if students miss a placement, and missing more than two days of placement work leads to a conversation with the student to determine any problems and to allocate additional time if required. Attendance and engagement are also monitored by academic tutors, whom students normally meet three times per term in the first year and three times per year thereafter. The students confirmed to the team their meetings with tutors, who were often very supportive, although they reported variability among the tutors and members of academic staff in general in the support offered, with some staff members appearing unapproachable. They told the team that the School was quite helpful in academic and other matters and that good support was available from the University, although they felt that support should be publicised more effectively. Wishing to learn about the training offered to placement providers, and how this training enables consistency in the student experiences and their assessment, the team was told that this had been developed as part of a joint project between the Pan-London Consortium and providers, who have undertaken training and who already have extensive experience of supervision of foundation year trainees. The training will be extended to community pharmacy providers to ensure uniformity across London.

The team was satisfied that all eight criteria relating to the support and development for student pharmacists and everyone involved in the delivery of the MPharm degree were met.

Key findings - Part 3 Standards for foundation training

The criteria that sit beneath each standard are detailed within the **<u>Standards for the initial education</u>** and training of pharmacists, January 2021.

Standard 1: Select	ion and admi	ssion	
Trainees must be s	selected for a	nd admitted onto the four	ndation training year on the basis that they
are being prepared	d to practise a	as a pharmacist	
Criterion 1.1 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 1.2 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 1.3 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 1.4 is:	Met 🗸	Likely to be met 🗆	Not met 🗆

The documentation described how the admissions process for the 5-year MPharm with Integrated Foundation Training programme is the same as that is in place for the 4-year MPharm programme. Any home student applicants are informed that the 5-year MPharm programme includes the foundation training year but requires an additional year's payment of fees to support their placement to register as qualified pharmacists. The only difference is in the composition of the interview panels, which must include a member of the 5-year MPharm team along with a practising pharmacist who is an academic member of staff involved in the 5-year programme, an additional academic member of staff and a current MPharm student ambassador from either year 3 or 4. All students on the programme who meet the year 4 progression requirements and who have no disciplinary issues enter the year 5 foundation training module, which begins in the first week of July. Those who do not meet the year 4 progression requirements may switch into the 4-year MPharm programme at any time between year 1 and term 1 of year 3, where this is due to general preference rather than due to academic or pastoral issues.

Year 5 of the 5-year MPharm with Integrated Foundation Training year consists of 2 × 26-week placements, one placement in hospital and one in community pharmacy. This is explained in the online prospectus and in an introductory session at the beginning of year 1. The 5-year MPharm trainees decide their two 26-week placement preferences in year 3, which the School allocates on the basis of students' ranked preferences, taking into account geographic location within Greater London, to avoid the need for trainees to relocate during year 5, as well as academic performance across years 1 and 2. As students enter year 3, they receive a booklet providing them with all the information they require concerning training providers. Additionally, video recordings covering each of the training sites are made available on Moodle. This allows them to make an informed selection of placements. If the students have questions about the placements, they can contact the year 5 module lead, who can, where needed, host a session with the education leads at the respective placement sites to provide further information.

The small cohort numbers for the 5-year programme, especially when broken down by protected characteristics, together with the significant number of applicants who initially apply for the 5-year programme then change their application to the 4-year programme, make it challenging to analyse progression from application to admission. Analysis of the combined data for both the 4-year and 5-year programmes indicates that the application process does not appear to be disadvantaging any students, with similar proportions of applicants representative of all protected characteristics receiving offers. The admissions profile for the foundation training year itself will be that for the

trainees on the 5-year programme who successfully meet the progression requirements. When these data, broken down by protected characteristics, are available for the first time, they will be similarly analysed with appropriate actions taken if discrepancies are identified.

The staff confirmed to the team that if a student progresses to year 5 and fails this year, they will not be awarded a registerable MPharm degree. As they will have already accumulated 480 credits, they will be eligible for the award of an MSc in Pharmaceutical Studies. Students are made aware of this from the start of the programme, and it is reinforced throughout. Some students transfer from the 5year to the 4-year programme, for example, for financial reasons or career choice.

The team was satisfied that all four criteria relating to the selection and admission of students to the 5-year programme with integrated foundation training were met.

Standard 2: Equality, diversity and fairness

The foundation training year must be based on, and promote, the principles of equality, diversity and fairness; meet all relevant legal requirements; and be delivered in such a way that the diverse needs of all trainees are met

Criterion 2.1 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 2.2 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 2.3 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 2.4 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 2.5 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 2.6 is:	Met 🗸	Likely to be met 🗆	Not met 🗆

Any student who has had reasonable adjustments for a disability or long-term medical condition during years 1 to 4, will have such support continued into their year 5 foundation training module. Where new adjustments are required with the issue of a new 'Summary of Reasonable Adjustments' in year 5, these would be applied and communicated to all the placement supervisors, the year 5 module team and appropriate UCL teams supporting the programme. Should a trainee require any additional support they would raise this with the year 5 Module Lead in the first instance, who would subsequently liaise with the designated supervisor and designated prescribing practitioner, and with UCL Student Support and Wellbeing as needed.

Progression and award data are not yet available for the first cohort of students that started on the 5year programme, as they have not yet progressed to year 5 to commence their foundation training year. Once available, the School will monitor and analyse data relating to progression from year 4 to year 5 and the award of the degree, broken down by protected characteristics. If analysis indicates that there are any issues in progression or outcomes, appropriate investigations will be undertaken, and adjustments will be made. The small numbers on the 5-year programme and the possibility that some students may elect to transfer from the 5-year to the 4-year programme, may make it more challenging to identify differences, but any apparent trends in larger sets of data over time will help to offset this.

Designated supervisors and designated prescribing practitioners will be required to complete the mandatory UCL 'Introduction to Equality, Diversity and Inclusion' training course upon receiving their honorary appointments to support the year 5 module foundation trainees during their 2 × 26-week

placements. They are also highly likely to have already completed EDI-related training in their respective places of employment. Students will have considered issues relating to equality, diversity and fairness during the first four years of the programme as described earlier. During year 5, trainees will be expected to respond appropriately and competently to complex situations and ethical dilemmas. Support and feedback will be provided by the designated supervisor, designated prescribing practitioner, other pharmacists, pharmacy staff and other healthcare professionals as appropriate to the situation. Trainees will reflect upon any learning needs and actions taken to learn about and understand communities and cultures as part of their 'Record of In-training Assessment' (RITA), along with portfolio and/or reflective diary evidence.

The team was satisfied that all six criteria relating to equality, diversity and fairness were met.

Standard 3: Resources and capacity			
Resources and capacity must be sufficient to deliver the learning outcomes in these standards			
Criterion 3.1 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 3.2 is:	Met 🗸	Likely to be met 🗆	Not met 🗖
Criterion 3.3 is:	Met 🗸	Likely to be met 🗆	Not met 🗆

The documentation described how the year 5 foundation training collaborating sites are organisations with extensive experience of delivering pharmacist foundation training. The hosts for the year 5 foundation training module must complete a Clinical Placement Agreement, which specifies the requirements of the programme. The educational leads, who may also be designated supervisors or designated prescribing practitioners, are aware of the programme content. This Clinical Placement Agreement allows the School to determine that appropriate resources are in place.

In year 5 of the programme, trainees have designated supervisors (DSs) and designated prescribing practitioners (DPPs) who are responsible for supervising their practice or delegating this to other members of the practice team. These are practising pharmacists in hospital or community clinical settings and who have extensive experience in supporting foundation trainee pharmacists. The DSs and DPPs will be trained for this role and be fully cognisant of the UCL and School of Pharmacy support services. The trainee will continue to engage with their academic tutor, and the year 5 Module Lead will be an additional resource for support. Attendance in year 5 will be monitored and the Clinical Placement Agreement outlines the trainee engagement monitoring requirements in practice. The delivery of the year 5 foundation training module is supported by the pharmacy practice team in the School.

Only accredited sites are used for the year 5 placements, ensuring continuity of quality assurance. The year 5 Clinical Placement Agreement ensures long-term commitment to the provision of placements with suitably qualified supervisors and sites and having sufficient resource and capacity to deliver the appropriate level of training required at the correct standard. Formal feedback from both trainees and placement hosts is collected each academic year to facilitate continuous monitoring and improvement of provision. Following initial accreditation, the sites complete an annual premises declaration, designated supervisors comply with the requirements specified by the School of Pharmacy, these being in alignment with the NHS England and GPhC requirements for designated supervisors and designated prescribing practitioners.

In response to the team's wish to learn how placements will be allocated for the integrated foundation training year, and how the School monitors and quality assures the premises, the staff described how information on all placements is provided in a booklet, and students have the opportunity to meet providers and ask questions. In allocating placements, the School tries to consider students' preferences, but if there are too many requests for particular placements, allocation would then be based on academic performance. Clinical placement agreements address contractual matters and there is a quality assurance panel, with all sites being accredited and all partners involved in a quality assurance framework. Accreditation of sites involves the School in discussions with the management of the organisations hosting placements, in which consideration is given to the physical and staff resources. A form is completed as part of the annual review and this specifies any anticipated changes for the coming year, these being discussed with the educational leads and designated supervisors.

Wishing confirmation of the process for recruiting suitable designated prescribing practitioners (DPPs) and designated supervisor (DSs), as well as assurance that there will be sufficient numbers, the team was told that the School has been working on this with educational leads to ensure that DSs are in place before the foundation training placements start. Both DSs and DPPs undertake the 'Statement of Teaching Proficiency' course, with consideration given to any previous training. There were no concerns about capacity.

Standard 4: Managing, developing and evaluating MPharm degrees The quality of the foundation year must be managed, developed and evaluated in a systematic way			
Criterion 4.1 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 4.2 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 4.3 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 4.4 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 4.5 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 4.6 is:	Met √	Likely to be met 🗆	Not met 🗖

The team was satisfied that all three criteria relating to resources were met.

The documentation described how the School of Pharmacy team evaluates the placement sites' ability to support the year 5 foundation training module as part of quality assurance via the accreditation process as well as an annual review. Any changes identified through the annual review are discussed with the relevant educational leads and designated supervisors to ensure that adjustments are made to support the delivery. The placement hosts sign a 'Clinical Placement Agreement' that specifies the programme details, the conditions associated with hosting the foundation training module, organisational compliance relating to, for example, quality assurance processes, the roles and responsibilities of the designated supervisor (DS) and designated prescribing practitioner (DPP), overall accountability, lines of management and mechanisms for raising any concerns. The DS and DPP must sign an educational agreement that outlines their roles and responsibilities and trainees sign a 'Student Learning Agreement' with the School, outlining their responsibilities.

The year 5 foundation training plan was produced in collaboration with the Employer Working Group, which consists of educational leads from all the collaborating sites. The 52-week plan, split across two placements, includes specific rotations that must be covered by the trainee to achieve the GPhC

learning outcomes and provide sufficient evidence to support this, as well as successfully completing specified assessments. The programme contains various points termed 'flexible weeks', which allow trainees to catch up with any of the areas needing improvement or which they have not had the opportunity to experience. Trainees will be required to complete a log of prescribing-related activities. There is regular and consistent engagement between trainees and the School through 'anchor' days and webinars, providing trainees with opportunities to review and reflect on their practice and learning.

The trainee will have joint supervisory meetings in weeks 7, 20, 33 and 45 to assess their progress, and will address the learning outcomes achieved, any adjustment of the learning needs analysis to support the coming weeks of the programme, the trainee's level of engagement and response to feedback, and to address any concerns; these meetings will be attended by the designated prescribing practitioner, designated supervisor and the UCL Year 5 Module Lead/module team. The update from these meetings will feed into the 13-weekly reviews, which will be attended by the same individuals as the joint supervisory meetings, to determine whether the trainee has made sufficient progress and has addressed matters identified in the previous meetings.

The content and delivery of the year 5 module will be continually reviewed and developed annually after the first trainees have completed their 52-week clinical placement; this will also ensure the incorporation of any significant changes to practice, for example, as a result of changes in national guidelines. The annual review will utilise a feedback form completed by trainees, together with feedback obtained from student representatives, who will have regular meetings with the year 5 Module Lead/module team, as well as providing feedback through the Staff-Student Consultative Committee (SSCC). Feedback from the year 5 workplace supervisors will also be obtained. Feedback will continue to be provided through the UCL 5-Year MPharm Employer Placement Working Group, particularly as many members are Educational Programme Directors and/or designated supervisors and designated prescribing practitioners.

The team was satisfied that all six criteria relating to the management, development and evaluation of the foundation training year were met.

Standard 5: Foundation year design and delivery The programmes for the foundation training year must develop the required skills, knowledge, understanding and professional behaviours to meet the outcomes in part 1 of these standards by using a coherent training strategy. The design and delivery of the foundation training year must ensure that trainee pharmacists practise safely and effectively			
Criterion 5.1 is:	Met 🗆	Likely to be met ✓	Not met 🗆
Criterion 5.2 is:	Met 🗆	Likely to be met 🗸	Not met 🗆
Criterion 5.3 is:	Met 🗆	Likely to be met 🗸	Not met 🗆
Criterion 5.4 is:	Met 🗆	Likely to be met 🗸	Not met 🗆
Criterion 5.5 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 5.6 is:	Met 🗆	Likely to be met 🗸	Not met 🗆
Criterion 5.7 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 5.8 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 5.9 is:	Met 🗸	Likely to be met 🗌	Not met 🗆

University College London (UCL), Master of Pharmacy (MPharm) degree reaccreditation Part 1 and MPharm with integrated foundation training Step 2 event report, June 2024

Criterion 5.10 is: Met ✓ Likely to be met □ Not met □

The documentation described how the 52-week training plan covering both placements, has been developed to achieve all GPhC learning outcomes. The plan incorporates protected clinical time relating to prescribing activities, including diagnostics and clinical reasoning, therapeutics and the development and practising of consultation skills; the plan also includes eight 'anchor' days and seven webinars across the year to maintain contact between the trainee and the year 5 teaching team. The first 26-week placement allows trainees to develop their consultation, history taking, physical and clinical examination and diagnostic skills. In the second placement, they use these skills to manage a structured consultation and prescribe safely while being supervised by their DPP. At the end of each placement, they will be required to complete a reflection on their days of prescribing and related activities. The plan includes flexible weeks that allow trainees to catch up with any required activities that they have not yet been able to undertake. The split placement across hospital and community pharmacy allows the trainees to review patients of different complexities and exposes them to the types of issues they may encounter as registered pharmacists, allowing them to follow various care protocols for patients in different healthcare settings. Trainees will complete their reflections, casebased discussions, case studies, mini-clinical examinations (MiniCEX) and Medicines Related Consultation Assessment Tool (MR-CAT), which could be applied to both settings. Case studies and case-based discussions with reflections will allow them to explore the different options for the patients and then decide on the best course of action.

The School's year 5 module team works closely with the placement site team to ensure that the 52week timetable is adhered to and that the trainees are engaging in activities within the module during placements; the School team also works collaboratively to produce the material to be taught on the 'anchor days'. The site team and the UCL Module Lead will meet regularly during the joint supervisory meetings, and 13-weekly review meetings to discuss the trainee's progress and identify areas to be addressed if inadequate evidence is presented. The trainee learning contract and learning needs analysis is updated after each meeting to ensure that the trainee has a plan in place to achieve all the GPhC learning outcomes and is on track to sit the GPhC registration assessment. There are established methods for communication among the trainee, the placement site team, and the School year 5 module team; these include the Moodle virtual learning environment webpages for the year 5 module, as well as the platform on which the trainees will complete their e-portfolio. Another University communication platform, 'Extend', is available for communication among the placement site team, the year 5 module team and the School teaching team.

The e-portfolio will be marked in week 45 and signed off upon successful completion during the week 45 'Record of In-training Assessment' (RITA) meeting. The trainee will be assessed through a viva voce examination in week 46. The final sign off for the trainee will be completed during week 52 of their placement. If there are any outstanding fitness to practise concerns, the trainee will not be signed off until the issues are resolved. Where a trainee's fitness to practise is considered to be impaired, the trainee would exit the programme and be eligible for the award of an MSci in Pharmaceutical Studies.

The team was satisfied that criterion 1, criterion 5.5, and criteria 5.7-5.10 were met. The team also agreed the following criteria are likely to be met by the time of the step 3 event in January 2025:

• 5.1. There must be a training plan (or plans) for the foundation training year, which sets out how trainee pharmacists will achieve the learning outcomes in part 1.

- 5.2. The learning outcomes must be delivered in an environment which places training in a professional context and requires trainees to conduct themselves professionally.
- 5.3 Trainee pharmacists must be exposed to an appropriate breadth of patients and people in a range of environments. This experience should be progressive, increase in complexity and take account of best practice.
- 5.4. Everyone involved must work together to deliver the foundation training year.
- 5.6. Trainees must pass all assessments and be declared competent before being signed off.

This was because no students had yet entered year 5 and there was insufficient evidence at the step 2 event to allow the team to agree that these criteria were met.

Standard 6: Assessment (not examined as part of Step 2 process) Everyone involved must demonstrate that they have a coherent assessment strategy which assesses the required skills, knowledge, understanding and behaviours to meet the learning outcomes in part 1 of these standards. The assessment strategy must assess whether a trainee pharmacist's practice is safe Criterion 6.1 is: Met 🛛 Likely to be met Not met 🗆 Criterion 6.2 is: Met 🗆 Not met 🗆 Likely to be met Criterion 6.3 is: Met 🛛 Likely to be met Not met 🗆 Criterion 6.4 is: Met 🗆 Likely to be met Not met 🗆 Criterion 6.5 is: Met 🗆 Likely to be met Not met 🗆 Criterion 6.6 is: Met 🗆 Likely to be met Not met 🗆 Criterion 6.7 is: Met 🗆 Likely to be met Not met 🗆 Criterion 6.8 is: Met 🗌 Likely to be met Not met 🗌 Criterion 6.9 is: Met 🗆 Likely to be met 🗆 Not met 🗆 Criterion 6.10 is: Met 🗆 Not met 🗆 Likely to be met \Box Criterion 6.11 is: Met 🛛 Not met 🗆 Likely to be met 🗌

This standard was not reviewed at the step 2 event.

Standard 7: Support and development for trainee pharmacists and everyone involved in the				
delivery of the foundation training year				
Trainee pharmacists must be supported in all learning and training environments to develop as				
learners and profes	learners and professionals during their initial education and training			
Everyone involved	in the delive	ry of the foundation trai	ning year should be supported to develop in	
their professional r	ole			
Support for trainee pharmacists				
Criterion 7.1 is:	Met 🗸	Likely to be met 🗆	Not met 🗆	
Criterion 7.2 is:	Met 🗸	Likely to be met 🗆	Not met 🗆	
Criterion 7.3 is:	Met 🗸	Likely to be met 🗆	Not met 🗖	
Criterion 7.4 is:	Met 🗸	Likely to be met 🗆	Not met 🗖	
Support for everyone involved in the delivery of the foundation training year				
Criterion 7.5 is:	Met 🗸	Likely to be met 🗆	Not met 🗆	
Criterion 7.6 is:	Met 🛛	Likely to be met 🗸	Not met 🗆	

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Criterion 7.7 is:Met □Likely to be met ✓Not met □Criterion 7.8 is:Met ✓Likely to be met □Not met □

The documentation described the support systems available for trainees during the year 5 integrated foundation training year. An induction is held on the first 'anchor' day, covering the 52-week training plan, the trainee guide, the importance of the learning contract and learning needs analysis, assessments and what trainees are expected to achieve during each placement. Following the induction, trainees complete their learning needs analyses and learning contracts; these take into account their experience accumulated during the first four years of the MPharm.

During the two placements, the trainee is supervised by the designated supervisor (DS) and the designated prescribing practitioner (DPP). The School module team will review progress in the joint supervisory 'Record of In-Training Assessment (RITA) meetings with the trainees, the DS and the DPP in weeks 7, 20, 33 and 45, as well as in the 13-weekly meetings in weeks 13, 26, 39 and 52. Trainees can also request a one-to-one meeting with the Year 5 Module Lead at any time and continues to have access to their personal academic tutors, as well as all central UCL support systems and resources. Designated supervisors must undergo a training course, following which they gain a Statement of Teaching Proficiency (STP). DPPs complete specific training equivalent to the STP. Training days are also provided for DSs and DPPs specifically to cover the year 5 foundation training module and they also have access to UCL central systems, providing opportunities for further professional development in education, as well as access to an online discussion forum for peer support. There is an annual induction and update event for DSs and DPPs relating to the year 5 foundation training module. Surveys to obtain feedback from DSs and DPPs are conducted at the end of each 26-week placement; results from these surveys support the review of the programme so that adjustments can be made for continuous improvement. Systems are in place for trainees, DSs, DPPs or any other individuals supporting the delivery of the year 5 foundation training module to raise concerns directly with the year 5 Module Lead and/or with the 5-year MPharm Programme Director. Concerns will be reviewed and escalated appropriately based on the nature of the concern.

The team was satisfied that criteria 7.1-7.5 and criterion 7.8 were met. The team also agreed that the following criteria were likely to be met:

- 7.6. Training must be provided for everyone involved in the delivery of the foundation training year.
- 7.7. Everyone involved in the delivery of the foundation training year must have effective supervision, an appropriate and realistic workload, mentoring, time to learn, continuing professional development opportunities, and peer support.

This was because designated prescribing practitioners and designated supervisors have not yet been appointed.

	aining year m	• • •	nal practice of pharmacists and must
Criterion 8.1 is:	Met ✓ Met ✓	Likely to be met 🗆	Not met 🗆
Criterion 8.2 is:	Iviet •	Likely to be met 🗆	Not met 🗆

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Criterion 8.3 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 8.4 is:	Met 🗆	Likely to be met ✓	Not met 🗆

The documentation described the 52-week plan for the foundation training year as also discussed under standard 5. The plan is designed to ensure that all learning outcomes will be met and incorporates 90 hours for prescribing-related activities. The first 26-week period will include activities relating to preparing trainees for prescribing in practice. During the second placement, trainees will be able to prescribe under the direct supervision of the designated prescribing practitioner.

Quality assurance processes for the MPharm described in part 2 standard 4 also apply to the foundation training year. Anonymised feedback provided by the students, the designated supervisors (DSs) and designated prescribing practitioners (DPPs) will be presented annually at the Employer Working Group to further refine and improve the year 5 module. The 5-year Module Lead will be responsible for the effective running of the year 5 placements, in close liaison with the DSs, DPPs, the 5-Year MPharm Programme Director and the Associate Director (Clinical Education); this will include the monitoring of trainee performance, behaviour and attendance. The placement supervisors meet with their trainees every six-seven weeks to review progress and work-based assessment. The UCL year 5 Module Lead/team can review trainee progress in real time through the e-portfolio. At the start of each 26-week placement, the trainee, supported by their placement supervisors, prepares a learning contract that is submitted and agreed with the year 5 Module Lead/team. Progress against this learning contract is reviewed by the year 5 Module Lead, the trainee and placement supervisors at the regular review meetings.

In response to the team's wish to know how 'engagement monitoring' will be used with trainees the staff explained that this is a Tier 4 visa requirement and is undertaken at numerous points during both placements, including the 'anchor days', the performance review meetings, the mock OSCE and the webinars. Trainees' engagement will be signed off by the School's 5-year programme lead.

Asking how the School plans to support the transition between working environments/sectors when students transfer from the first 26-week placement, the team was told that towards the end of the first placement the trainees will meet with their designated supervisors and designated prescribing practitioners to review their learning needs analyses and complete the handover documentation; this will document any outstanding tasks, which will be included in the learning needs analysis and plan for the second placement. Flexible weeks are timetabled in both placements to allow time to catch up.

Wishing to know if there were plans to expand training beyond hospital and community pharmacy, for example to include GP practices, the team was told that there were no such plans at present. This is because the students are from overseas countries that have very different primary healthcare systems However, this will be reviewed over time in light of developments in these other countries.

The team was satisfied that criteria 8.1-8.3 were met. The team also agreed that the following criterion was likely to be met:

• Criterion 8.4 - Trainee pharmacists must follow a training plan or plans during periods of the foundation training year. This must have a clear purpose to enable trainees to meet the learning outcomes in part 1 of these standards.

This is because the evidence for meeting this criterion will become clear once trainees commence year 5.

Standard 9: Foundation training year supervision			
Trainee pharmacists must be supervised by a designated supervisor and a designated prescribing practitioner during the foundation training year to help them meet the learning outcomes			
Criterion 9.1 is:	Met ✓	Likely to be met 🗆	Not met 🗆
Criterion 9.2 is:	Met 🗆	Likely to be met 🗸	Not met 🗖
Criterion 9.3 is:	Met 🗆	Likely to be met 🗸	Not met 🗆
Criterion 9.4 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 9.5 is:	Met 🗆	Likely to be met 🗸	Not met 🗆
Criterion 9.6 is:	Met 🗆	Likely to be met 🗸	Not met 🗆
Criterion 9.7 is:	Met 🗆	Likely to be met 🗸	Not met 🗆
Criterion 9.8 is:	Met 🗸	Likely to be met 🗆	Not met 🗆
Criterion 9.9 is:	Met 🗆	Likely to be met 🗸	Not met 🗆

The documentation described how trainees' supervision in the year 5 foundation training module will be undertaken by the designated supervisors (DSs) and designated prescribing practitioners (DPPs), who work collaboratively with the year 5 Lead to ensure that trainees have the appropriate learning opportunities, are progressing on target, are providing clear evidence, and are completing all assessments in the specified timeframe. Assessments include Mini-Peer Assessment Tool exercises (mini-PAT), Mini-Clinical Evaluation Exercises (mini-CEX), case-based discussions, Medicines Related Consultation Assessment Tool (MR-CAT) and Direct Observation of Practical Skills (DOPS), as well as trainee reflections. Evidence for these assessments is placed on an electronic platform to ensure clear, real-time data and transparency of the portfolio, and for ease of access by the trainee, DS, DPP and the year 5 Module Lead/team. This progress will be reviewed regularly during the 'Record of Intraining Assessment' (RITA) meetings involving the trainee, the DS and the DPP in weeks 7, 20, 33 and 45, as well as in the 13-weekly reviews in weeks 13, 26, 39 and 52. These meetings determine whether trainees are successfully meeting the required competencies. If a trainee is failing to meet the learning outcomes or shows unsatisfactory performance, then the learning plan will be amended for them to focus on the areas needing attention. The requirements of the DS and DPP are as specified by the GPhC. The designated supervisors must be UK-registered pharmacists and must declare that they have full knowledge and understanding of the 5-year MPharm with Integrated Foundation Training programme and understand the support that they need to provide during the placements. The DPP must be a UK-registered independent prescribing pharmacist. All DSs and DPPs will be trained annually and will have completed the Statement of Teaching Proficiency (STP) programme or equivalent; this training will also address their responsibility for co-ordinating the rotations and supervision during the 26-week training period. Other healthcare professionals may contribute to the supervision of trainees, subject to the DS and DPP determining their suitability as supervisors for particular tasks.

Following the final 52-week review, the trainee must be deemed competent by the DS and the DPP before the year 5 Module Lead/team, in collaboration with the 5-year MPharm Programme Director, finally signs the trainee off as competent.

Wishing further information about the process of the sign off of the trainee as competent and where the ultimate responsibility lies, the team was told that ultimate responsibility rests with UCL. Trainees will be reviewed in online or face-to-face sign-off meetings involving the DS, the DPP, and the UCL year 5 module lead held in weeks 13 and 26 of placement 1 and weeks 29 and 39 of the second placement. The final review and sign off against the GPhC outcomes will take place in week 51-52, with the DS signing the declaration; the School year 5 module lead will then review the whole sign off. In response to the team's wish to know how the School ensures that DPPs and DSs have the appropriate abilities to assess trainees in the workplace, including the assessment of their clinical examination skills, the staff described how DPPs and DSs will complete the 'Statement of Teaching Proficiency' (STP) programme which involves a number of sessions over a 12-week period culminating in the completion of the STP portfolio. This is mapped to the RPS framework (Advanced Pharmacy Framework for Education, Training & Development) and covers workplace-based assessments.

The staff confirmed to the team that there will be regular documented meetings involving the DS, the DPP, the School 5-year lead and trainee at fixed time points in weeks 7, 13, 20, 26, 33, 39 and 45. These meetings will review competences achieved and will cover the learning plan, the record of intraining assessment (RITA), as well as the trainee's clinical, dispensing and accuracy log. The flexible weeks built into each placement will allow the trainee to undertake any further work required to meet the learning outcomes. Consistency in the assessments will be assured by the regular review meetings and the fact everybody involved will be able to access the trainee's e-portfolio. The team was told that where any problems arise such as DPPs or DSs leaving, or the relationship between the trainees and their DPPs or DSs breaking down, alternatives will be appointed, although this may require the trainee to move to a different site.

The team was satisfied that criteria 9.1, 9.4 and 9.8 were met. The team also agreed that the following criteria are likely to be met, because there was insufficient evidence at step 2 of the accreditation process to deem these criteria as met.

- 9.2 Trainee pharmacists must have a designated supervisor, who, working with everyone involved, is responsible for co-ordinating their supervision, overseeing their progress and signing them off. The designated supervisor must be a pharmacist.
- 9.3 During the period of learning in practice specifically relating to prescribing, the trainee must be supervised by a designated prescribing practitioner.
- 9.5 All supervisors must be trained and appropriately experienced to act as supervisors. Everyone supporting trainees must take into account the GPhC's guidance. People carrying out assessments of the foundation training year or being involved in trainees' sign-off must be appropriately trained, qualified and competent to assess the competence of trainee pharmacists.
- 9.6 The designated supervisor and the designated prescribing practitioner, or their delegates, must have regular developmental and documented meetings with a trainee pharmacist during the foundation training year.
- 9.7 During the period of learning in practice, trainees must only carry out tasks at which they are competent, or are learning under supervision to be competent, so that patient safety is not compromised.
- 9.9 Sign-off confirms that a trainee has achieved all the learning outcomes in part 1 of these standards. The decision to sign off a trainee must be made by more than one person and be

based on evidence. As a minimum, if they are not the same person, the designated supervisor and the designated prescribing practitioner must both be involved in the decision to sign off a trainee. The designated prescribing practitioner must provide a formal confirmation once they are satisfied of the trainee's competence in prescribing. Other healthcare professionals involved in co-ordinating trainees' supervision, overseeing their progress, or in supervising them can be involved in signing them off. Agreed mechanisms for sign-off must be defined, including the roles and competences of those involved.

Teach out and transfer arrangements for the 4-year and 5-year MPharm degrees

All four years of study of the new MPharm programme will be launching simultaneously in 2024-25. The course design is such that students who have successfully completed years 1, 2 or 3 of the existing programme will be adequately equipped to enter years 2, 3 or 4 respectively of the new programme. In transitioning towards the new MPharm programme, elements underpinning independent prescribing were introduced from 2021-22; these include legal and regulatory frameworks, an increased emphasis on anatomy, responding to symptoms, diagnostic skills and clinical decision-making. There has also been an increase in the volume of experiential learning placements. Plans for the new programme, including the transitional changes introduced in the last three years, have been regularly discussed with and communicated to students. While students had the option to continue on the old programme, discussions with staff had emphasised the value of transfer to the new MPharm with its emphasis on independent prescribing. The team heard that the changes, including the design of the new programme, had been discussed at meetings with student representatives. Students were aware that additional work will be required outside the academic year in order to make up for gaps in learning associated with the transition to the new course. If students are impacted by deferring assessment, they will know the implications and what they will need to do.

Students who fail several assessments will be given the opportunity to repeat the year. The students told the team that they were informed via Moodle of the changes to the programme including the incorporation of independent prescribing. Town hall meetings took place at the end of the last academic year, although these were not mandatory, and attendance was poor. The students expressed the view that there remained a lack of clarity on the changes.

UCL regulations specify that a resitting student must be reassessed under the syllabus in place at the first attempt, and by the same method of assessment. For students with deferred assessments, suitable assessments of the same format and addressing the same learning outcomes that correspond to the session in which the student studied will need to be set, along with appropriate additional support. As these must be completed within two years of the registration on the module, these arrangements would only be in place for one more year.

Students whose studies are interrupted at the end of 2023-24 due to extenuating circumstances, or in order to retake deferred assessments, may be adequately prepared to join the next year of study on the new programme when they resume studies. However, they will be joining the new programme one year later than their peers. In such cases, students will be provided with access to the equivalent 2024-25 module content on the Moodle VLE and signposted to any additional work they may be required to complete before resuming studies, as well as being given additional support to help familiarise them with the structure of the new programme. Additional opportunities will also be given

as appropriate to catch up on any newly introduced practical, professional and experiential learning that they would have undertaken if they had not interrupted their studies; these opportunities will be provided across the summer or during the course of the new academic year, as appropriate.

The year 5 foundation training module following the 2011 standards will run only during 2024-25. Any trainee who fails due to fitness to practise concerns or academic failure will be eligible for an MSci in Pharmaceutical Studies award. If a trainee withdraws during year 5 due to extenuating circumstances (having completed 480 credits in years 1 to 4), they may be eligible for an MPharm degree. If a student enrolled on the 5-year MPharm with Integrated Foundation Training programme fails more than 60 credits in years 1 to 3 and is therefore required to repeat a year of study, they will be transferred onto the 4-year MPharm programme. Similarly, if any student enrolled on the 5-year MPharm 4, they too will be transferred onto the 4-year MPharm programme.

Decision descriptors

Decision	Descriptor
Met	The accreditation team is assured after reviewing the available evidence that this criterion/learning outcome is met (or will be met at the point of delivery).
Likely to be met	The progress to date, and any plans that have been set out, provide confidence that this criterion/learning outcome is likely to be met by the part 2 event and (where applicable) the end of the Step event process. However, the accreditation team does not have assurance after reviewing the available evidence that it is met at this point (or will be met at the point of delivery).
Not met	The accreditation team does not have assurance after reviewing the available evidence that this criterion or learning outcome is met. The evidence presented does not demonstrate sufficient progress towards meeting this criterion/outcome. Any plans presented either do not appear realistic or achievable or they lack detail or sufficient clarity to provide confidence that it will be met by the part 2 event or Step event process without remedial measures (condition/s).

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