General Pharmaceutical Council

Swansea University, Master of Pharmacy (MPharm) degree and MPharm degree with preparatory year Step 7 accreditation event report, February 2025



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Event summary and	conclusions
Provider	Swansea University
Courses	Master of Pharmacy (MPharm) degree
	Master of Pharmacy (MPharm) degree with preparatory year
Event type	Step 7 accreditation
Event date	4 – 5 February 2025
Approval period	2024/25 to 2030/31
Relevant requirements	Standards for the initial education and training of pharmacists, January 2021
Outcome	Approval
	The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the MPharm degree and MPharm degree with preparatory year offered by Swansea University be fully accredited. This is subject to satisfactory findings at the MPharm examination board in June 2025, which forms part 2 of this step of the process.
	Accreditation is recommended for a period of 6 years, with an interim event in 3 years' time.
	Subject to the Registrar's approval, Swansea University's MPharm programmes will move from the process for the accreditation of new MPharm degrees to ongoing quality assurance processes for existing MPharm degrees. This means that Swansea MPharm graduates will be eligible to apply for registration as a pharmacist with the GPhC, once they have successfully completed foundation training and passed the GPhC registration assessment.
	The team's recommendation includes approval for a maximum intake of 120 students into year 1 of the MPharm degree (to include direct entry and those students progressing from the preparatory year), and 65 for entry to the MPharm with preparatory year. The University must seek approval from the GPhC for any increases beyond these numbers.
Conditions	There were no conditions.
Standing conditions	The standing conditions of accreditation can be found <u>here</u> .
Recommendations	The process for routine review of progression data against protected characteristics should be developed further to ensure that there is a robust, formal and structured process in place to

	and the detection of the second secon
	consider the data, document the outcome of the review, and record any planned actions. This relates to criterion 2.4.
	A response to the recommendation should be sent to the GPhC for review by the accreditation team by <b>28 March 2025</b> .
Registrar decision	Following this event, the GPhC Registrar accepted the team's recommendation and approved the full accreditation of the Swansea University MPharm degree and MPharm degree with preparatory year, subject to satisfactory finding at the exam board for the first cohort of graduating students (Step 7 part 2).
	Approval is for a period of 6 years (until 2030/31), with an interim event at the mid-way point.
Key contact (provider)	Professor Andrew Morris, Head of Pharmacy*
Accreditation team	Professor Chris Langley (Team leader), Professor of Pharmacy Law & Practice and Deputy Dean (Engagement and Development) of the College of Health and Life Sciences, Aston University*
	Dr Gemma Quinn (team member - academic), Head of School of Pharmacy and Medical Sciences, University of Bradford
	Dr James Desborough (team member - academic), Associate Professor in Pharmacy Practice, School of Pharmacy, University of East Anglia*
	Shahzad Ahmad (team member - pharmacist), Clinical Lead, NHS England Transformation Directorate
	Arshad Patel (team member - pharmacist newly qualified), Assistant Professor in Pharmacy Practice, University of Bradford; PCN Clinical Pharmacist (Independent Prescriber), South & East Leeds GP Group; Extended Access Pharmacist; Placement Lead, The Medicines Management Team
	Katie Carter (team member - lay), Consultant in Healthcare Regulation and Education
GPhC representative	Philippa McSimpson, Quality Assurance Manager (Education) General Pharmaceutical Council*
	Liam Anstey, Director for Wales, General Pharmaceutical Council (day 1 only)
Rapporteur	Ian Marshall, Emeritus Professor of Pharmacology, University of Strathclyde; Proprietor, Caldarvan Research (Educational and Writing Services)

<sup>\*</sup>Attended pre-event meeting

#### Introduction

#### Role of the GPhC

The General Pharmaceutical Council (GPhC) is the statutory regulator for pharmacists and pharmacy technicians and is the accrediting body for pharmacy education in Great Britain. The GPhC is responsible for setting standards and approving education and training courses which form part of the pathway towards registration for pharmacists. The UK qualification required as part of the pathway to registration as a pharmacist is a GPhC-accredited Master of Pharmacy degree course (MPharm).

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.

The powers and obligations of the GPhC in relation to the accreditation of pharmacy education are legislated in the Pharmacy Order 2010. For more information, visit: http://www.legislation.gov.uk/uksi/2010/231/contents/made

The GPhC's process for initial accreditation of a UK MPharm degree involves seven steps, each of which are normally completed in consecutive academic years. Step 1 involves an initial engagement meeting by an application institution to share their proposal and no formal decision on accreditation is made. For steps 2 to 7, the process requires a formal evaluation of the programme and the providers progress towards meeting the <u>Standards for the initial education and training of pharmacists</u>, <u>January 2021</u>. Step accreditation events are held on-site at the provider's proposed delivery location and involve a full accreditation team.

Following successful completion of step 3, students may be accepted on to year 1 of the programme. Each accreditation step must be passed successfully in order to progress to the next. An MPharm degree holds provisional accreditation status until the provider has completed all seven steps successfully.

#### **Background**

#### MPharm degree

Early in 2018, Swansea University Medical School approached the General Pharmaceutical Council (GPhC) to accredit a new MPharm degree, the intention being to admit the first cohort of students in the 2020/2021 academic year. A Step 1 event occurred on 25 May 2018, following which the University was permitted to proceed to step 2 of the seven-step accreditation process. Following successful Step 2 (September 2019) and Step 3 (September 2020) events, the University was permitted to accept its first intake of student onto its new MPharm degree and to progress to Step 4 subject to one condition; this required the University to remove the vacation optional module between years 2 and 3, because the team regarded this as potentially unfair to students who may not be able to engage with it. This condition was met

Steps 1-3 of the accreditation process for Swansea University had been to the GPhC 2011 'Future Pharmacists: Standards for the initial education and training of pharmacists'. In January 2021 the GPhC published updated standards for the initial education and training of pharmacists and required that all students starting on an MPharm degree in the 2021-22 academic year onwards must meet the

requirements of the 2021 Standards. The first cohort of Swansea University MPharm students started in the 2021-22 academic year and as such, this cohort, and all future cohorts, would be required to meet the requirements of the GPhC 2021 Standards. It was agreed that Swansea University would be reviewed against the 2021 Standards for the remaining steps of the accreditation process, with the accreditation team having regard for the transition between standards.

#### MPharm degree with preparatory year

The GPhC began accrediting MPharm degrees with a preparatory year as a separate course to the MPharm degree in 2020-21. Prior to this, the accreditation of the MPharm degree component of the course was accepted to allow students entry to pre-registration training.

An MPharm degree with preparatory year is a single course that leads to a Master of Pharmacy award. It is recruited to separately from the accredited 4-year MPharm degree and is assigned a different UCAS code. For most schools this will be a 5-year course which includes a preparatory year followed by four further taught years that are the same as that of the accredited MPharm degree.

An MPharm with preparatory year must meet all of the GPhC's initial education and training standards for pharmacists in all years of the course. All teaching and assessment of the learning outcomes is expected to take place in taught years 2-5, with the first taught year being set aside for preparatory learning only. For the purpose of accreditation, it is assumed that the course content for the four taught years following the preparatory year will be identical for students on the MPharm degree and the MPharm degree with preparatory year.

During Step 3 of the accreditation process at Swansea University, the University informed the GPhC that an MPharm with a Foundation Year (henceforward referred to as MPharm with Preparatory Year), based on a similar programme for entry to the Medical School, was undergoing approval by the University; the approval was confirmed in December 2020. The programme includes two modules, one with a chemistry focus and the second with a focus on pharmacy practice. The pharmacy practice-focussed module will include an assessment that is similar to that used for the interview process for admission to the MPharm and will employ MMIs (see Standard 1). The MPharm with Preparatory Year will have its own UCAS code distinguishing it from the standard MPharm.

#### Steps 4, 5 and 6

The Step 4 event took place on 13/14 July 2022 at which time the accreditation team agreed to recommend that the MPharm degree and MPharm with preparatory year be accredited to proceed from Step 4 to Step 5 of the process for new MPharm degrees. This meant that the degrees were provisionally accredited for another year. The recommendation was subject to two recommendations that 1. in relation to criterion 1.7, consideration should be given to harmonising the approaches to admissions at the point of initial selection in both versions of the MPharm degree. In particular, the use of interactive components for admission to the five-year course; and 2. in relation to criteria 6.4, 6.6 and 6.7 further consideration should be given to the contemporary nature of the standard-setting methodologies used. The team recommended that Pharmacy sought advice from elsewhere in the Faculty of Medicine, where such methodologies were already embedded. This issue would be revisited in future step events.

The Step 5 event took place on 14/15 June 2023, when the accreditation team agreed to recommend that the MPharm degree and MPharm with preparatory year be accredited to proceed from step 5 to step 6 subject to one condition, with the degrees provisionally accredited for another year. The condition was that the School revisit and develop its standard-setting approach. This was because the team agreed that it was not coherent at present. Specifically, the condition was that a fully developed

standard-setting policy be developed and be in place for the start of the 2023-2024 academic year, when the MPharm Third Year will be delivered. It must have a coherent overall rationale, which the current approach did not; and a rationale for using particular standard-setting methodologies for particular modes of assessment, which may vary between modes. This was to meet criterion 6.7. The team also recommended that the School clarify and justify its position in relation to failing critical OSCE stations and the School's resit policy in relation to OSCEs. In particular, the number of critical fails which would result in failure of the OSCE overall. In the team's view this was a patient safety issue.

The Step 6 event took place on 26/27 June 2024, when the accreditation team agreed to recommend that the MPharm degree and MPharm with preparatory year be accredited to proceed from Step 6 to Step 7 subject to two conditions, with the degrees provisionally accredited for another year. The conditions were: 1. an appropriate standard-setting process must be used to set the pass criteria for all summative assessments, including MCQ and EMQ assessments, which must be in place from the 2024/25 academic year. This was to meet criterion 6.4. 2. an additional process must be introduced to the marking of OSCEs which provides a fair and robust mechanism for review of any student actions which raise potential patient safety issues that fall outside of the pre-identified red flags within the mark scheme. This was because the current marking arrangements that had been presented had the potential to permit a student to pass the OSCE where they had met the pass mark and critical elements, but their actions had demonstrated unsafe practice. This process had to be in place from the 2024/25 academic year for OSCEs in Years 2 to 4. This was to meet criteria 6.5 and 6.6.

Following the Step 6 event, the Registrar of the GPhC accepted the accreditation team's recommendation and confirmed that Swansea University be permitted to move from Step 6 to Step 7 of the of the process for new MPharm degrees with the Step 7 accreditation taking place on-site in the 2024/25 academic year. This is the report of the first stage of the Step 7 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 20 January 2025. 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

#### The event

The event was held on site on 4-5 February 2025 and comprised a series of meetings between the GPhC accreditation team and representatives of the proposed MPharm programme, along with a meeting with students and with experiential learning partners.

#### **Declarations of interest**

Professor Langley declared that he had co-supervised the PhD thesis of Dr Adam Turner, a member of the Pharmacy academic staff of Swansea University. The team agreed that this did not constitute a conflict of interest.

Dr Quinn declared that Professor Guirguis is an external examiner at the University of Bradford School of Pharmacy and Medical Sciences, of which she is the Head. The team agreed that this did not constitute a conflict of interest.

#### Schedule

#### Day 1: 4 February 2025

Private meeting of the accreditation team including break

#### Welcome and introductions

Management and oversight of the MPharm degree

- Presentation from provider covering updates since the last event, and developments and plans in relation to:
  - Resources (including facilities, staffing and placement capacity)
  - Management of risk
  - Selection and admissions
  - o Monitoring, review and evaluation of the MPharm and MPharm with preparatory year
  - Any other high-level updates
  - Specific areas of standards 1,2,3,4, and 7 as identified by the accreditation team (shared at preevent meeting).
- Questions and discussions focused on standards 1, 2, 3, 4 and aspects of 7

Lunch break and private meeting of the accreditation team

#### Tour of new clinical simulation facilities

Private meeting of the accreditation team

#### Meeting with students

Students in Years 0 (preparatory year), 1, 2, 3 and 4

Break

Teaching, learning, support and assessment part 1

- Presentation from provider covering:
  - Delivery of all years of the MPharm degree and MPharm with preparatory year during the 2024/25 academic year:
- Questions and discussions focused on standards 5 and 6 as well aspects of standards 2 and 7

Private meeting of the accreditation team

#### **Day 2: 5 February 2025**

Private meeting of the accreditation team

Meeting with experiential learning partners and placement supervisors

Break and private meeting of the accreditation

Teaching, learning, support and assessment - part 2:

Detailed exploration of the summative assessment of learning outcomes

- Provider presentation:
  - Detailed walk-through of the summative assessment of five GPhC learning outcomes as selected by the accreditation team (confirmed in advance) (maximum 10 minutes per learning outcome)
- Questions following each presentation
- Specific questions regarding the assessment of other learning outcomes (if required)

This session will focus on:

Standard 6: Assessment

**The Learning Outcomes** 

Private meeting of the accreditation team (including lunch at 12:30)

Deliver outcome to programme provider

#### **Attendees**

#### Course provider

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

Name Designation at the time of accreditation event

Professor Andrew Morris\* Head of Pharmacy/Drugs and Medicines Teaching Group

Lead

Emma Westwood\* Academic Quality and Programme Development Lead

Professor Amira Guirguis\* MPharm Programme Director/Practice of Pharmacy Teaching

**Group Lead** 

Dr Adam Turner MPharm Year 0 & Year 1 Lead

Dr Rhian Thomas MPharm Year 2 Lead

Dr Michael McKeever MPharm Year 3 Lead/Pharmacy EDI Lead

Assoc Prof Simon Wilkins Pharmacy Placements Lead
Dr Salvatore Ferla Pharmacy Admissions Tutor

Dr Suresh Mohankumar Health, Disease and Patients Teaching Group Lead

Dr Georgina Marsh Year 4 Lead/IPE Lead
Dr Juman Dujaili Assessments Lead

Assoc Prof Kate Spittle Associate Professor in Clinical Pharmacy
Dr Paul Deslandes Associate Professor in Clinical Pharmacy

Professor Delyth James Professor in Pharmacy & Behavioural Medicine

Professor Margaret Allen Pharmacy Dean, HEIW

Laura Doyle Head of Undergraduate and Foundation Education, HEIW

Dr Melanie Healy Senior Tutor

Ian Jenkins Advanced Pharmacist & Teacher-Practitioner, Swansea Bay

University Health Board

Charlotte Waller Advanced Pharmacist & Teacher-Practitioner, Swansea Bay

University Health Board

Dr Gillian Phua Lecturer

Dr Giulio Nannetti Academic Disability Coordinator
Gwenno Williams Fitness to Practise Lead/Oriel Lead
Dr Ali Blebil Senior Lecturer in Clinical Pharmacy
Dr Nia Davies Medical School Education Lead

#### **MPharm students:**

The team met with a group of 21 Swansea MPharm students as follows:

Current year of study	MPharm (4-year)	MPharm with preparatory year (5-year)	Total
Year 0		3	3
Year 1	2	4	6
Year 2	3	1	4
Year 3	3	2	5
Year 4	3	0	3
Total	11	10	21

<sup>\*</sup> attended the pre-event meeting

#### Meeting with experiential learning partners' and placement supervisors' representatives

Sophie Croucher Acting Principal Pharmacist Education, Training

and Workforce Development, Swansea Bay UHB

Charlotte Waller Advanced Pharmacist & Teacher Practitioner,

Swansea Bay University Health Board

Ian Jenkins Advanced Pharmacist & Teacher Practitioner,

Swansea Bay University Health Board

Rhiannon Lewis Senior Mental Health Pharmacist, Swansea Bay

UHB

Mohammed Ajam Clinical Education Lead & Specialty Pharmacist,

Swansea Bay UHB

Kelly Jones Medical Education Pharmacist, Swansea Bay via Zoom

UHB

Mary Williams Hywel Dda UHB via Zoom

Eugene Catangui Cwm Taf Morgannwg UHB via Zoom

Simon Jones Village Pharmacy via Zoom

Jonathan Rees Penclawdd Pharmacy via Zoom

Matt Hussain Sands Pharmacy Via Zoom

#### **Key findings - Part 1 Learning outcomes**

The team reviewed the commentary in the submission to all 55 learning outcomes relating to the MPharm degrees. To gain additional assurance the team also tested a sample of **five** learning outcomes during the event, and was satisfied that **all 55 learning outcomes were likely to be met** to a level as required by the GPhC standards. The following learning outcomes were tested at the event: **6**, **7**, **28**, **35 and 37**.

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 pharmacists</u>, <u>January 2021</u>.

Domain: Person-centre	ed care and	d collaboration (learnin	ng outcomes 1 - 14)
Learning outcome 1 is:	Met <b>√</b>	Likely to be met □	Not met □
Learning outcome 2 is:	Met <b>√</b>	Likely to be met □	Not met □
Learning outcome 3 is:	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 4 is:	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 5 is:	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 6 is:	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 7 is:	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 8 is:	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 9 is:	Met <b>✓</b>	Likely to be met $\square$	Not met □
Learning outcome 10 is:	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 11 is:	Met <b>✓</b>	Likely to be met $\square$	Not met □
Learning outcome 12 is:	Met <b>✓</b>	Likely to be met $\square$	Not met □
Learning outcome 13 is:	Met <b>✓</b>	Likely to be met $\square$	Not met □
Learning outcome 14 is	Met <b>√</b>	Likely to be met $\square$	Not met □

LO6: Treat people as equals, with dignity and respect, and meet their own legal responsibilities under equality and human rights legislation, while respecting diversity and cultural differences

There is an underpinning thread of equality, respect and dignity throughout all years of both programmes. Student expectations are clearly outlined during induction week. In Year 1 there is a basic introduction to professional standards, roles and responsibilities, leading through the years to a Health Equity week in Year 4 addressing areas of unconscious bias, microaggressions and health inequalities.

Assessment is by coursework, OSCEs (assessed at Shows How), written exams, and integrated case studies.

The team agreed that this learning outcome was met

#### LO7: Obtain informed consent before providing care and pharmacy services

Teaching develops from Year 1 where ethical considerations and ethics in pharmacy practice are considered, along with GPhC Standards for Pharmacy Professionals, accountability and ethical dilemmas, to Year 4 where ethical dilemmas in clinical workshops with simulated scenarios in variety of settings are considered.

Assessment is by coursework, OSCEs (assessed at Shows How), written exams, an integrated case study, project proposal and dissertation and Prescribing Assessment and Patient Enquiries (PAPE - assessed at Shows How).

The team agreed that this learning outcome was met

<b>Domain: Professional</b>	practice (le	arning outcomes 15 -	44)
Learning outcome 15 is	Met <b>√</b>	Likely to be met □	Not met □
Learning outcome 16 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 17 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 18 is	Met ✓	Likely to be met □	Not met □
Learning outcome 19 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 20 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 21 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 22 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 23 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 24 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 25 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 26 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 27 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 28 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 29 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 30 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 31 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 32 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 33 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 34 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 35 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 36 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 37 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 38 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 39 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 40 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 41 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 42 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 43 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 44 is	Met <b>√</b>	Likely to be met $\square$	Not met □

# LO28: Demonstrate effective diagnostic skills, including physical examination, to decide the most appropriate course of action for the person

Year 1 includes handwashing & BLS, physiological understanding, lab skills & result interpretation, BP, urine dipstick, BMI and temperature, diagnostic decision-making skills. Years 2 and 3 contain body system-specific diagnostics and tools that aid in diagnosis. Basic observations include: blood pressure, heart rate and rhythm, respiratory rate/body temperature/peripheral oxygen saturation, basic skin, ear, throat examinations, head and neck lymph node assessment and head to toe examination. Year 4

includes Integration of diagnostics and point of care testing in pharmaceutical care planning and decision-making.

Assessment is by in-class tests, practical assessments, examination, OSCE (assessed at Shows How), PAPE (assessed at Shows How), integrated case study, and clinical lab.

The team agreed that this learning outcome was met

## LO35: Anticipate and recognise adverse drug reactions, and recognise the need to apply the principles of pharmacovigilance

Teaching and learning is by MHRA lectures and workshops in Years 1, 2 and 4, plus Post marketing surveillance and Case study on ADRs related to GLP-1 RA for weight loss in Year 4.

Assessment is by in-class tests, practical assessments, examination, OSCE (assessed at Shows How), PAPE (assessed at Shows How), project proposal and dissertation (assessed at Shows How), clinical lab (assessed at Shows How) and e-portfolio (assessed at Does).

The team agreed that this learning outcome was met

#### LO37: Prescribe effectively within the relevant systems and frameworks for medicines use

Year 1 deals with knowing and working within legal and regulatory frameworks affecting prescribing practice. Year 2 covers understanding and using relevant national, regional and local frameworks for the use of medicines. Years 3 and 4 cover effectively using the systems necessary to prescribe medicines, and Year 4 deals additionally with reporting near misses and critical incidents, as well as medication and prescribing errors using appropriate reporting systems, whilst regularly reviewing practice to prevent recurrence.

Assessment is by calculations (assessed at Does in all years), practical assessments, in-class tests, OSCEs (assessed at Shows How), examinations, ICS, PAPE, e-portfolio (for prescription writing) and clinical lab. Relevant EPAs are judged at the Shows How level.

The team agreed that this learning outcome was met

Domain: Leadership a	nd manage	ment (learning outcon	nes 45 - 52)
Learning outcome 45 is	Met <b>√</b>	Likely to be met □	Not met □
Learning outcome 46 is	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 47 is	Met ✓	Likely to be met $\square$	Not met □
Learning outcome 48 is	Met <b>√</b>	Likely to be met □	Not met □
Learning outcome 49 is	Met ✓	Likely to be met $\square$	Not met □
Learning outcome 50 is	Met ✓	Likely to be met $\square$	Not met □
Learning outcome 51 is	Met <b>√</b>	Likely to be met □	Not met □
Learning outcome 52 is	Met ✓	Likely to be met $\square$	Not met □

All learning outcomes in this domain were met by the Step 6 event

Domain: Education ar	nd research	(learning outcomes 53	3 - 55)
Learning outcome 53:	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 54:	Met <b>√</b>	Likely to be met $\square$	Not met □
Learning outcome 55:	Met <b>√</b>	Likely to be met $\square$	Not met □

All learning outcomes in this domain were met by the Step 6 event

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

#### 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 ✓ Not met □ Likely to be met □ **Criterion 1.7 is:** Met ✓ Not met □ Likely to be met □ **Criterion 1.8 is:** Met ✓ Likely to be met □ Not met □

All nine criteria relating to Standard 1, Selection and admission, were met by the Step 6 event.

Likely to be met □

Criterion 1.9 is:

Met ✓

The submission stated that the Admissions and Interview Strategy still applies to this Step 7 submission. It also confirmed that an additional fluent Welsh-speaking Pharmacy academic commenced work with the University in January 2025 to support the aim of having at least one fluent Welsh-speaking academic involved in every MMI session for applicants.

Not met □

The MPharm programme pages continue to be updated regularly in both English and Welsh, including any required changes. Student ambassadors continue to play a role in the Open Days for applicants. The submission further indicated that Pharmacy was now entering the second admissions cycle where the numeracy MMI station has been delivered as an online assessment and where volunteers from the People who Use Services and their Carers Volunteer Group (PUSC) have overseen the problem-solving MMI station. Informal feedback from students on these changes has been overwhelmingly positive. The submission stated that there continue to be no aspects of or omissions from the Swansea MPharm admissions criteria that would preclude any of the Swansea MPharm undergraduates from engaging with periods of learning in practice, or that would preclude an application for entry to the Foundation Training Year. The team was told that the interviews check that applicants meet the entry standards and that almost all those interviewed are accepted.

All admissions and selection processes continue to include an interactive component, to assess applicants' values and professional suitability. The performance of any students who are accepted having not met the published entry requirements have been monitored, with no emerging patterns to indicate poor progression among applicants who had not met the published academic entry requirements. In this respect, the Step 6 commentary noted that in the 2023/24 intake into Year 1, 4 students were accepted with BBC A-level grades, 10 with ABC, 4 with ACC, 1 with AAC and 1 with AAD. Of these 20 students, only one individual failed to progress to Year 2 of the programme. The current team noted that 14 students were accepted onto the MPharm this academic year that did not meet the minimum BBB A-level requirement and wished to know what criteria had been used to make the

decision to accept these students, and what monitoring and support will be in place for these students. The team was told that the BBB requirement was aimed at attracting the best applicants, but that Pharmacy considered that applicants with BBC qualifications would be capable of undertaking the MPharm. The acceptance of such candidates also allowed Pharmacy to reduce Clearing admissions and potentially accepting students for whom pharmacy was not their first choice. The team was told that the Health and Conduct Group which includes all year leads can discuss any applicant for suitability and monitor any non-progressing students.

The team was told that admissions data were examined by the Pharmacy EDI Group which, despite the continued low amount of data available, had found no cause for concern, with the higher proportions of female and Asian students in line with sector norms. There had been no discrimination in the admissions process. With respect to this, the team learned that Pharmacy was still adjusting to the newly introduced University admissions process but that it would provide the Pharmacy EDI Group with better and more confidential information on applicants.

The team wished to know what processes were in place to review student progression data against qualifications held on entry for both the MPharm and MPharm with preparatory year to help inform ongoing review of entry criteria, and was told that good progression rates were being seen such that there were insufficient data to draw any conclusions. In relation to the Preparatory Year, there were no significant progression issues with around 75 percent of the students progressing to the MPharm. The team was told that as the data base increases, value-added will be examined, for example, for BTEC entrants.

#### 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 <b>√</b>	Likely to be met $\square$	Not met □
Criterion 2.2 is:	Met <b>√</b>	Likely to be met □	Not met □
Criterion 2.3 is:	Met <b>√</b>	Likely to be met □	Not met □
Criterion 2.4 is:	Met <b>√</b>	Likely to be met □	Not met □
Criterion 2.5 is:	Met <b>√</b>	Likely to be met □	Not met □
Criterion 2.6 is:	Met <b>√</b>	Likely to be met □	Not met □

Five of the six criteria relating to Standard 2, *Equality, diversity and fairness*, were met by the Step 6 event.

The submission stated that as of November 2024, the Pharmacy academic team remains approximately gender-balanced. Of the 22 academic staff members on the team, 12 are female, 10 are male. At Professor/Associate Professor level, there are two female and four male academic staff. A third professorial appointee who is female and bilingual started in January 2025.

The University assessment marking and feedback policy has been updated with enhanced terminologies to promote race inclusion more effectively. Colour-vision enhancing eyewear was made available to students for a new Year 1 chemistry laboratory class that requires colour vision for completion. Students interviewed told the team that they had received teaching on conditions in different skin colours and that although they did not see a very diverse range of patients on

placements, had received teaching on different belief systems, communication, consent and female issues with case studies covering demographics and ethnicities.

The submission stated that the Pharmacy EDI Group continues to meet regularly to discuss patterns in student progress and success. Although data are limited due to the infancy of the programme, the datasets are becoming sufficiently large to explore some aspects of performance and progression by sex and race. Thus, female students tend to perform better than their male counterparts in the *Practice of Pharmacy* module. This is important as it is the principal pharmacy practice/clinical pharmacy-focused credit-bearing module within the year. Performance by gender will continue to be monitored in this module. It is hoped that increased male representation among the clinical teaching team will encourage improved performance from male students in this element of the course. There will also be a male advanced pharmacist and teacher-practitioner joining the team in early 2025 for a temporary period. The team was told that all placement providers are sourced by HEIW which guarantees quality assurance and training, including in EDI, some of which is provided by the University.

Although student progression by race has also been investigated, the submission indicated that it has been difficult to draw any firm conclusions due to the notably different outcomes for Year 0 and Year 1, and the fact that there are very limited data for Year 2 and 3 progression rates. Thus, Year 0 data show 7 of 13 non-progressing students to be White British or White Irish, whereas only 33% of the Year 0 students identify as white. Conversely, in Year 1 there were 9 non-progressing students and 4 of these identified as Black-African or African British, yet only 18% of this year group identify as black.

The team was told that data on protected characteristics had been examined only informally, looking for trends by using a spreadsheet containing many aspects over and above protected characteristics relating to progression. The provider indicated that there were no minutes or list of actions from the EDI group meetings as some aspects were not completely anonymous. The team was also told that University Arque reports could examine module-level data and that examination board reports are broken down by gender alone to date. No issues have been identified to date, but the team was told that in the event of issues emerging they would be discussed at the Board of Studies and then at module review. Any disparity of performance in individual modules such as the above-mentioned better performance of female students would be investigated. Further, the team was told that Insights data covers all protected characteristics except pregnancy. The team agreed that there be a **recommendation** relating to criterion 2.4. namely that the process for routine review of progression data against protected characteristics should be developed further to ensure that there is a robust, formal and structured process in place to consider the data, document the outcome of the review, and record any planned actions.

To support students who may face challenges in attending campus, MPharm year groups have been consulted on the continued delivery of the live online lectures that have been in place since the 2021/22 academic year. The rationale of this was to reduce the number of days that students need to be physically on campus and was aimed at promoting inclusivity for students for whom travelling to campus can present challenges, for example those in employment and with caring responsibilities. Recent surveys demonstrated that all year groups supported the idea of retaining this style of learning.

Integrated case studies continue to provide the opportunity to introduce diverse fictitious patients to students through Year 2 and Year 3, now taught within the context of clinical workshops. Year 3 students had several weeks dedicated to addressing *Special Cohorts* where patients with protected

characteristics were explored in detail. *Health Equity* is one of the study units in Year 4, in which there will be a deeper exploration of EDI issues in pharmacy by students focussing on a personal health equity issue and producing a training plan and document.

# 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 □

All three criteria relating to Resources and Capacity were met by the Step 6 event

The team noted that a new Dean of Faculty had been appointed since the Step 6 event who had taken up their position the day before the current event. The team was told that the Dean has been invited to the next meeting of the School Management Board in March.

The documentation and the presentation confirmed that the four pharmacy academic posts referred to in the Step 6 commentary had all now been filled. These comprise an associate professor, a bilingual senior lecturer, an advanced pharmacist and teacher-practitioner, and a bilingual professor in pharmacy and behavioural medicine. The team was told that there is one teacher-practitioner post still to be filled along with a replacement for a year lead that is leaving. The documentation indicated that from January 2025 there will be 13 members of the core pharmacy academic team that are GPhC-registered pharmacists and, of these, six have independent prescriber annotations. There are a further six colleagues that are pharmacists registered overseas. It is ensured that there is sufficient expert coverage of the seven subject themes around which the MPharm is structured through the Drugs & Medicines Teaching Group, and the Health, Disease & Patients Teaching Group. Pharmacy is also able to draw upon specialist expertise from the wider Faculty and a growing pool of pharmacy honorary appointees and other visiting lecturers to support delivery. The team was told and shown in a presentation that the staffing plan is largely on track with respect to maintaining the student to staff ratio of around 15:1, despite challenges in recruiting staff.

The submission indicated that the MPharm business case document has been updated to show the actual student numbers. Thus, there has been an increase in the proposed student intake numbers to 120 students into year 1 of the MPharm degree, to include direct entry and those students progressing from the preparatory year, and 65 for entry to the MPharm with preparatory year. The increase is in the planned preparatory year numbers since the provider is increasingly confident that there are no significant differences between performance amongst students on the 4-year and 5-year MPharm degrees. As a result of this the provider has become more comfortable with there being a greater proportion of students entering Year 1 via the preparatory year. The team was told that this increase will only have a limited effect, since the numbers entering Year 1 of the MPharm, either from Year 0 or via UCAS, will be unchanged from 2026/27 onwards. It was confirmed that the University has always supported Pharmacy by allowing increased staff to cover changes in student numbers, and that Pharmacy had not lost any staff members in the recent voluntary redundancy scheme. It was emphasised to the provider that the University must seek approval from the GPhC for any increases beyond these agreed numbers.

The team wished to know how Pharmacy planned to secure additional placements to support the increase in student numbers and was told that there are no issues currently and that the placement provision was not at full capacity, with many health boards willing to take more students. Similarly, in terms of workplace demand, the team was told that Wales does not have enough Foundation Year trainees and that HEIW wishes to retain Welsh-trained pharmacists in Wales. In relation to HEIW, the team wished to know what collaborative working is taking place with HEIW in relation to foundation training places in Wales to help inform student intake numbers and ensure accurate information is provided to applicants and was told that the link with HEIW is covered in Open Days and at the Oriel Day in Year 3. There are adequate Foundation Year training places in Wales but graduates can also undertake Foundation Year training elsewhere in the UK. A national recruitment process is targeting recruitment in Wales, although a presentation showed a large number of entrants from the Midlands and South of England.

In terms of facilities, Year 4 students will undertake activities in the Swansea University Simulation and Immersive Learning Centre (SUSiM) in semester 2 of 2024/25 academic year. The team took the opportunity to visit the SUSiM which it agreed was an impressive development. The Head of Pharmacy indicated to the team that a focus for the future would be the further development of research. In this context, the submission indicated that discussions have taken place between the Head of Pharmacy and the Grove Building 117 research laboratory manager regarding the pharmacy research that will be undertaken at that site. Students interviewed praised the high quality of the facilities available them, particularly chemistry laboratories, library and pharmacy skills room.

#### 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 □ Met ✓ Criterion 4.3 is: Likely to be met □ Not met □ **Criterion 4.4 is:** Met ✓ Likely to be met □ Not met □ Met ✓ Criterion 4.5 is: Likely to be met □ Not met □ **Criterion 4.6 is:** Met ✓ Likely to be met □ Not met □

All six criteria relating to *Managing, developing and evaluating MPharm degrees* were met by the Step 6 event

The submission indicated that a further expansion of the Funded Pharmacy Undergraduate Placement Programme (FPUPP) scheme will take place in the 2025/26 academic year, where the number of days of placement for Year 2 will increase to 10 days from the current five-day provision. This will see placements covered by the FPUPP reach steady state; one week in Year 1, two weeks in Year 2, three weeks in Year 3 and five weeks in Year 4. The team was told that there are currently 600 weeks of

placements delivered which will increase to 900 weeks in future in all sectors of pharmacy. Teaching will be designed to link with the placement activities. The team was told that there is a surplus of placements in secondary care and community pharmacy and that there had been no issues in retaining the existing placements. However, there is a need to build up placement capacity in general practice medicine practices. It was emphasised that the placements require flexibility on behalf of the placement hosts.

Placements are available across the whole of Wales to allow students to experience both urban and rural environments, with funding available for travel and accommodation where necessary. Contracts are in place between the University and HEIW, and between the University and placement providers. The team was told that the teacher-practitioners are an important conduit between the hospital providers and the University in terms of communication and organisation. HEIW provides online training sessions for placement supervisors that includes the use of and mapping to EPAs which are constantly being monitored by the HEIW EPA Working Group. The views of placement supervisors are sought through a questionnaire, providing comments on the support and organisation provided by the University, as well as the preparedness and conduct of the students. Experiential learning partners interviewed told the team that students were generally well-prepared for the placements with good clinical knowledge, but with some exceptions. Students were described as confident and aware of what was required to meet the learning outcomes. There are monthly meetings with the health boards that conduct FPUPP placements, HEIW, and Bangor and Cardiff Universities to discuss the placements.

Patient volunteers are contributors to admissions interviews and, increasingly, teaching and learning activities. A patient representative continues to be a formal member of the Pharmacy Board of Studies. Students interviewed were largely supportive of the placement scheme, but had concerns about the lack of notice about the allocation of the year one, one day 1 placement, making it difficult for them to organise travel arrangements. The team was told that this had been a one-off occurrence due to changes in capacity requiring some redistribution of the placement sites and that better notice will be provided in future.

Pharmacy engages with students via Student-Staff Forums, Head of Pharmacy workshops, module feedback, and other formal and *ad hoc* feedback sessions. Internal benchmarking is sought through the University's Student Experience Survey for non-final year students. The most recent data return in May 2024 showed the MPharm programmes being viewed the most positively out of the undergraduate programmes delivered within the Medical School.

CPD is built into the Swansea University annual professional review system for all members of the Pharmacy academic team, and the pharmacist academics also maintain CPD portfolios as part of their professional revalidation. There is financial support for attending professional and pharmacy education conferences, ensuring that all team members stay informed about the latest advancements in pharmacy practice.

Two recent examples of course changes centre around addressing health inequalities. To address health inequalities through effective prescribing, the prescribing week in Year 4 will include a session on conducting consultations with patients who have autism or learning disabilities. Additionally, in response to the development of the Welsh 10-year women and girls' health plan (2024-34) and linking with further work at the University around the menopause, the curriculum content on women's health has been reviewed and sessions on menopause enhanced and sessions on termination of pregnancy and fertility treatments included.

The team wished for an update on the situation with the tenures of the external examiners and was told that the intention was to extend the tenure of some examiners to avoid all retiring coterminously.

#### 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 <b>√</b>	Likely to be met □	Not met □	
Criterion 5.2 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.3 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.4 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.5 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.6 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.7 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.8 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.9 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.10 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.11 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.12 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 5.13 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	

Twelve of the thirteen criteria relating to Curriculum design and delivery were met by the Step 6 event

The submission emphasised that the programme adheres to a curriculum and Teaching and Learning Strategy for the MPharm degree, designed explicitly to ensure student pharmacists achieve the GPhC learning outcomes. The Year 4 curriculum is designed to ensure that students have developed the necessary knowledge and skills to be ready for practice on graduation. Collaboration with HEIW and contributions from the MPharm team were said to have strengthened the programme. The Year 4 modules are designed to foster independence and enhanced competencies through structured placements. These placements are tailored to progressively prepare students for real-world practice, allowing them to apply their knowledge and skills in diverse professional settings.

Expanded placements now contribute to students' exposure to patients, parents and carers in a variety of healthcare settings in both urban and rural locations, allowing them to demonstrate their competence within these settings. For all years, placements have now transitioned fully to the FPUPP process set out by HEIW. For the first time, Year 1 students will experience a five-day placement in the community sector. Placements have primarily been within Swansea Bay and Cwm Taf Morgannwg University Health Boards with some placements in Hywel Dda University Health Board. Entrustable Professional Activities (EPAs) of increasing complexity have been developed, and all students are now assessed by these measures. Students interviewed told the team that they found the paper-based EPA guide to be unwieldy and asked that consideration be given to digitising the format. This sentiment was acknowledged by the HEIW representatives who agreed that this should be a priority. The team was told that the EPAs are being revised to slim down the clinical parts and link them more explicitly

to the GPhC learning outcomes. Although the EPA working group wishes to increase the number of EPAs, the current EPAs need to be embedded into the programme first. The team was assured that students are aware of what they need to do to achieve the EPAs.

Public/patient volunteers have been trialled in formative OSCE scenarios, allowing students to experience higher fidelity situations. The OSCE stations have been designed to reflect the cross-section of pharmacist interactions encompassing patients, carers and other healthcare professionals. It is planned to use Year 4 students in addition to public/patient volunteers to assist with Year 1 formative OSCEs. This will provide a mentoring role for Year 4 students but will allow the Year 1 students to experience a diverse range of simulated patients/carers. Year 4 includes simulation activities in which students will act as a pharmacist and manage a workload representative of hospital, community or GP practice pharmacy. The team was told that this activity had not yet taken place but simulated patients, carers, healthcare volunteers and other healthcare professionals will increase fidelity and allow students to exercise safely their skills and knowledge. Students will be given formative feedback on their performance.

Issues around confidentiality and consent relating to patients and carers is considered in Year 1 while further legal issues are considered in Year 2 with the role of carers in collecting Controlled Drugs. Issues of communication with patients, parents and carers, particularly around vaccinations and vaccine hesitancy are considered in Year 3, and students discuss with carers their experiences and the role of a carer relating to chronic pain management in a Year 4 workshop. Additionally, carers are involved in the formative and summative OSCEs.

The Inter-Professional Education Strategy described in earlier reports continues in Year 4 with learning with and from a variety of healthcare professionals with sessions being facilitated by clinical psychologists, midwives, physiotherapists and physician's associates. Students interviewed from all years described the IPL sessions as being useful, although on occasions there had not been an appropriate balance of numbers or much interaction between the different professions.

In relation to academic regulations, the submission explained that Year 1 students now have the option of repeating the year should they fail the supplementary assessments. Repeating up to one year of the degree was previously only an option for students in Years 2, 3, and 4, and following feedback raised by external examiners, this possibility has now been extended to those in Year 1.

Pharmacy has expanded its research capacity by appointing a new chair with expertise in social pharmacy and the psychology of healthcare professionals and patients. There is already significant research activity amongst the Pharmacy academic team, as evidenced by more than 150 Scopus-listed publications over the last 5 years from the current academic team. Year 4 group coursework is focused on emerging therapies. This involves identifying research gaps or unmet clinical needs in existing therapies and developing novel, innovative approaches. Students applied concepts from emerging pharmaceutical innovation pathways, including pharmacogenomics, gene editing tools, nano-drug delivery, pharmacometrics, epigenetic modulation, phased therapy, 3D printing, amongst others.

#### **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

pharmacist's pract	ice is safe		<i>.</i>	
Criterion 6.1 is:	Met <b>√</b>	Likely to be met □	Not met □	
Criterion 6.2 is:	Met <b>√</b>	Likely to be met □	Not met □	
Criterion 6.3 is:	Met <b>√</b>	Likely to be met □	Not met □	
Criterion 6.4 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 6.5 is:	Met <b>√</b>	Likely to be met □	Not met □	
Criterion 6.6 is:	Met <b>√</b>	Likely to be met □	Not met □	
Criterion 6.7 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 6.8 is:	Met <b>√</b>	Likely to be met □	Not met □	
Criterion 6.9 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 6.10 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 6.11 is:	Met <b>√</b>	Likely to be met □	Not met □	
Criterion 6.12 is:	Met <b>√</b>	Likely to be met □	Not met □	
Criterion 6.13 is:	Met <b>√</b>	Likely to be met $\square$	Not met □	
Criterion 6.14 is:	Met <b>√</b>	Likely to be met □	Not met □	

outcomes in part 1 of these standards. The assessment strategy must assess whether a student

Eight of the fourteen criteria relating to *Assessment* were met by the Step 6 event, with three criteria judged as not met

The submission explained that the Pharmacy academic team revisited its standard-setting approach following the outcomes of the Step 6 accreditation event. This review was conducted in collaboration with the Academic Quality and Programme Development Lead, the Academic Quality & Assessment Manager, and the Assessment Lead for Graduate Entry Medicine. A revised version of the MPharm Standard-Setting Policy was produced, outlining the expanded process of applying standard-setting to all summative assessments incorporating final exams and in-class tests. The Modified Angoff method is now used to standard-set all in-class tests and end-of-module final exams, along with the borderline regression method to analyse student performance by identifying the threshold at which students consistently exhibit safe and effective practice. The team was told that staff members have been trained for competency requirements at different levels, and that results will be continuously reviewed with year-to-year comparisons.

The team learned that a new OSCE Framework has been produced, incorporating how potential patient safety concerns are addressed. OSCEs are must-pass assessments from Year 2 to Year 4. To pass the OSCE, students must achieve the required standard-setting cut score and address the critical red flag item criteria. Additionally, students must demonstrate performance that does not raise safety alerts due to their recommendations or behaviours during the stations. To further ensure patient safety, a new marking criterion has been introduced in OSCEs, and safety alerts are now incorporated into all OSCE assessments. These alerts help identify and address any behaviours or recommendations that could potentially harm patients. For group assessments where the standard-setting process does not apply, additional measures have been implemented to prioritise patient safety. These measures include the development of clear marking criteria and rubrics by experts in the field, internal vetting of assessments by teaching staff, reviews by external examiners, and moderation of marking. There is also a mark deduction strategy that addresses patient safety concerns. Additionally, the team was told that all OSCEs are recorded to allow post-assessment review. Failing students are informed as quickly as possible after the examination, meet with their tutor and assessment lead for a support session

before any resit. Prescribing assessments are also must-pass in Years 3 and 4. An expert panel defines the criteria for borderline students using the Modified Angoff method, ensuring that the passing score reflects the necessary knowledge and skills at each year level.

Students were introduced to the assessment criteria and standards at the beginning of the semester during induction week. In addition, the team was told that all staff involved in administering assessments received targeted training to establish fair and consistent standards for summative assessments. To support continuous development, the Pharmacy Community of Practice Hub, hosted on Canvas, provides all academic staff involved in assessments with access to a centralised repository of training materials and resources. This hub serves as both a reference point and a mechanism for the ongoing review and refinement of the standard-setting process within the MPharm programme. The team was told that there had not been an issue with the standard-setting to date.

Since September 2024, fortnightly meetings between the Pharmacy academic team and the Assessments Team have been introduced to ensure that assessments scheduled on the Assessments Planner run smoothly in the academic year. There is support from the Assessments Team with exam venue booking, dissemination of exam-related information, creation of coursework submission portals, and arrangements for invigilators. Volunteer patients and carers are being incorporated into both formative and summative OSCEs, allowing students to interact more authentically with real patients who can provide formative feedback but do not mark summative OSCEs. The team was told that such volunteers and carers are given EDI and in-house specific training but are never left alone during OSCEs.

As part of the continuous review of the programme, student performance in assessments is evaluated as part of the moderation process. This evaluation has highlighted that the students struggled with the reflection component of their practice. Thus, a new workshop exploring the process of reflection was introduced. Feedback was positive with students particularly benefitting from the opportunity to critique a mock reflective account. The design and delivery of EPAs on and off site has been reviewed. The team was told that HEIW provides a training session for the assessment of the achievement of EPAs, using the RPS assessment tool. Placement providers told the team that although it is not possible to meet all the EPAs in one placement, the students engage well and know to write up evidence for meeting EPAs. The team learned that for the Year 3 and 4 students, a learning needs student self-assessment analysis was introduced to encourage students to identify gaps in their pharmacy practice skill development and develop a placement development plan to allow them to maximise their placement experiences. In this context, EPAs are signed off by the placement supervisor and entered into e-portfolios which are marked internally to confirm the mapping to learning outcomes. The team was told that if at the start of Year 4 students have insufficient evidence to meet the learning outcomes, this may involve additional attendance at their placement site or HEIW will assist them to engage in targeted different sectors to obtain the necessary evidence. A professional problem may require a student to undertake a reflective piece of work. Placement supervisors told the team that they knew what to do in the case of struggling students and referred to the pivotal role of the teacher-practitioners.

New Year 4 assessments include the application of advanced pharmaceutical technologies and the management of complex patients through pharmaceutical care plans, clinical labs, group presentations and GPhC-style exams. These focus on population health, pharmaceutical innovation, pharmacoeconomics, pharmacometrics, future therapies and complex patient treatment optimisation. Students will be assessed on polypharmacy through multi-sector learning weeks comprised of hospital, GP, and community pharmacy. The team was told that assessment of the Year

4 module *Emerging therapies and complex patients* will be by coursework, OSCE, prescribing assessment and formal examination. For the Year 4 module *Preparation for practice and prescribing* it will be by an in-class test, clinical lab practical test, group work (group presentation and quality target programme plan), along with a formal examination.

# 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	pharmacis	ts	
Criterion 7.1 is:	Met <b>√</b>	Likely to be met $\square$	Not met □
Criterion 7.2 is:	Met <b>√</b>	Likely to be met □	Not met □
Criterion 7.3 is:	Met ✓	Likely to be met $\square$	Not met □
Criterion 7.4 is:	Met <b>√</b>	Likely to be met $\square$	Not met □
Support for everyor	ne involved	in the delivery of the MPh	arm degree
Criterion 7.5 is:	Met <b>√</b>	Likely to be met $\square$	Not met □
Criterion 7.6 is:	Met ✓	Likely to be met $\square$	Not met □
Criterion 7.7 is:	Met ✓	Likely to be met □	Not met □
Criterion 7.8 is:	Met ✓	Likely to be met $\square$	Not met □

All eight criteria relating to Support and development for student pharmacists and everyone involved in the delivery of the MPharm degree were met by the Step 6 event

The submission explained that Year 4 students benefit from an independent study week towards the end of the semester. There is also a 1-week revision/reading week immediately prior to the end-of-module exam, which takes the style of the GPhC registration assessment. Year 3 students received an Oriel Application Training Day delivered in collaboration with HEIW and CPPE both of whom were said to have provided useful information on both Welsh and English opportunities and processes. The day provided an overview of the Oriel IT platform, and the NRS assessments including situational judgement tests and numeracy tests. A careers fair was conducted with representatives from the Local Health Boards across Wales, along with HEIW and RPS representatives. Some Foundation Year trainees were also present to offer examples of their experiences. Students interviewed described the Oriel preparation as useful but suggested that the Oriel system should be discussed from the start of the programme, weaved into pharmacy practice teaching. Year 4 students were a little concerned that after undertaking a project in Year 3 and with the Semester 1 module concentrating on industrial processes their preparation for the Foundation Year training would be compromised and were hoping that the Semester 2 module on practice and prescribing would be a sound preparation.

External professional support covering student welfare is being increasingly highlighted. The Pharmacy Defence Association is invited each year to address Year 1 students and will also be contributing to Year 4 teaching in 2045/25. Pharmacy has also been engaging with Pharmacist Support and links to their resources are provided in weekly newsletters to students. Students have ongoing support from external pharmacy professionals such as guest lectures, seminars, and workshops.

Newly-introduced Year 4 teaching sessions featured contributions from a range of GPhC-registered pharmacists with expertise in different specialisations.

As indicated at previous steps, the students interviewed valued greatly the personal tutor support scheme, describing academic staff members as approachable and easy to talk to, giving examples of wellbeing and bereavement support experienced. Students meet their tutors at least once per semester but often more. Students described feedback on their work, although varied according to the marker, as having been generally timely and having improved markedly, consisting of individual constructive criticism along with generic feedback. They also spoke of the academic staff being amenable to receiving and acting on feedback from students.

The team learned from experiential learning partners interviewed that there had been occasional problems with students not informing their placement supervisors of problems that might hinder their ability to undertake the placement successfully. The team was told that the placement team holds a register of special needs but that it is the responsibility of the students to contact and inform their placement supervisor, although it was recognised that some sensitive issues might make this difficult.

Students have access to multiple channels to raise concerns, including direct contact with staff and through personal tutoring, structured platforms like the Pharmacy Portal, and Student Services email and chat functions. Concerns are addressed promptly, with documented action taken as appropriate. Additionally, semesterly Head of Pharmacy workshops allow for anonymous student feedback via Vevox. Student attendance throughout the four years of the programme continues to be monitored. As of the 2024/25 academic year, Pharmacy staff members have real-time access to the new TDS Student System software, which allows for daily monitoring of attendance across years, modules, sessions, and teaching rooms. If students are identified as having consistently low attendance this would be followed-up in the first instance by personal tutors who may offer support and/or advice. Continued poor attendance by an MPharm student could be taken to the Pharmacy Health and Conduct Subcommittee. Students interviewed welcomed the new attendance system despite it producing a host of false positive warnings to both academic staff and students. The team was assured that these teething problems would be rectified.

There are several training opportunities for academic staff. New academic staff members undergo an induction and mandatory professional training, while all staff have continuous access to personal development resources, via DTS and SALT teams at the University, offering broad training opportunities to enhance academic and teaching skills. Placement supervisors also receive dedicated training, including the Placement Supervisor Toolkit, pre-placement materials, and EPA supervision training via live sessions. A total of 29 FPUPP training sessions have been delivered with a majority being delivered by members of the Pharmacy academic team. To date, 493 placement supervisors and approximately 50 practice assessors have been trained.

All staff members delivering the MPharm degree are provided with supervision, an appropriate and manageable workload, mentoring, time to learn, continuing professional development opportunities, and peer support. As Pharmacy becomes more established, more individuals are moving from the 3-year probationary process into the professional development review (PDR) process. Ten members of the Pharmacy academic team have moved onto the formal PDR system.

### **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 step 7. 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 step 7 without remedial measures (condition/s).

