

# **Guidance on supervising pharmacy learners** in practice

## June 2025

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## **About this guidance**

### Introduction

The purpose of this guidance is to assist healthcare professionals who have taken or are planning to take on the responsibility to supervise pharmacy learners in practice and to explain the regulatory requirements¹ surrounding the different supervisory roles. Healthcare professionals taking on a supervisory role will be expected to exercise professional judgement on the competence of their learners, which can include responsibility of assessing learners in practice. Supervision occurs over a wide range of learners and courses (for example, learners who are trainee pharmacists enrolled on a foundation training programme), and as such, supervisors will collaborate with others involved in supervised training in order to monitor and support learners' progression. Collaboration may be with other healthcare professionals, mentors, work colleagues, line managers, practice assessors and practice supervisors.

Supervisors, therefore, play a key role in helping learners develop the skills, knowledge, understanding, attitudes and behaviours they need to meet the relevant learning outcomes leading to registration as a pharmacy technician or a pharmacist, or to annotation as a pharmacist independent prescriber. All pharmacists and pharmacy technicians registered in Great Britain must follow the GPhC standards for pharmacy professionals<sup>2</sup> as well as other relevant regulatory and/or legal frameworks when undertaking their supervisory role, day-to-day activities and throughout their practice. Other healthcare professionals supervising pharmacy learners should familiarise themselves with the relevant GPhC standards and how they apply to pharmacy practice.

This guidance supersedes the **GPhC guidance on tutoring and supervising pharmacy professionals in training (2018)**.

We recommend reading GPhC and other relevant publications listed in the <u>'Useful resources'</u> section of this guidance.

Please note that due to the GPhC standards not setting criteria for supervisors involved in the supervision of learners on experiential learning placements part of an MPharm degree, this type of supervision is not covered in this guidance. As a requirement, higher education institutions providing an MPharm degree must ensure that effective management systems are in put in place in order to plan, monitor and record the assessment of learners during their period of experiential learning. Please refer to the **GPhC guidance to support the implementation of the standards** for further information on experiential learning.

<sup>&</sup>lt;sup>1</sup> Course providers may have requirements in addition to those set by the GPhC, therefore, it is important that supervisors understand what these are directly from the relevant course providers.

<sup>&</sup>lt;sup>2</sup> Pharmacists registered in Northern Ireland must follow relevant standards set by PSNI.

## Terminology used in this guidance

#### Learners

Supervisors may supervise a range of students and trainees in practice who would be enrolled on a GPhC-approved course of education and training. For the purpose of this guidance, students and trainees are referred to as 'learners'.

## **GPhC-approved**

Learners must be enrolled on a course of education and training that is either accredited or recognised by the GPhC - including provisional accreditation and recognition - which for the purpose of this guidance, is referred to as 'GPhC-approved'.

Further information on accreditation and recognition is available on our website on the following pages:

- Pharmacist education accreditation
- Standards and accreditation for pharmacy technician education and training

## **Course provider**

A 'course provider' is any organisation that has been approved by the GPhC to deliver a pharmacy course of education and training, such as:

- further and/or higher education institutions and awarding organisations approved to deliver pharmacy technician courses and qualifications
- higher education institutions approved to deliver MPharm degrees, Overseas Pharmacists Assessment Programmes (OSPAP) and independent prescribing programmes
- statutory education bodies approved to deliver foundation training programmes

Course providers are sometimes also referred to as 'education and training providers'.

## **Supervisor**

Although there will be various professionals involved in supervision, for the purpose of this guidance, a 'supervisor' is referred to as any registered healthcare professional who is:

- a Designated Educational Supervisor (DES) responsible for the practice supervision of learners enrolled on a GPhC-approved pharmacy technician course or qualification
- a Designated Supervisor (DS) and/or Designated Prescribing Practitioner (DPP) responsible for the practice supervision of learners enrolled on a GPhC-approved integrated MPharm degree, sandwich MPharm degree or foundation training programme
- a Designated Prescribing Practitioner (DPP) responsible for the practice supervision of learners enrolled on a GPhC-approved independent prescribing programme

Supervisory roles are not mutually exclusive, meaning that, for example, a pharmacist may act in the role of DS for a learner on foundation training as well as DES for a learner on a pharmacy technician course. However, every healthcare professional acting in the role of supervisor must be approved to do so by the relevant course provider with whom the learner they supervise is enrolled. Course providers may also accept joint supervision arrangements, meaning that, for example, two pharmacists could share the role of DS for their learner.

## Sign-off

'Sign-off' in this guidance refers strictly to the GPhC requirements.

Supervisors must formally confirm to the appropriate course provider whether their learner is competent to practise by the end of the period of training in practice. This is referred to as 'sign-off' (or 'confirmation of competence') and is the process through which the supervisors ensure that their learners complete any required assessments aligned to the relevant course or qualification. This can consist of evaluating the evidence found in learners' portfolios against the relevant GPhC learning outcomes. The learning outcomes can be found in the relevant GPhC education and training standards and must be achieved by the learner through assessment to the level of competence required by the standards. Supervisors' sign-offs will then be subjected to a process of ratification which is how course providers formalise and approve the sign-offs.

Course providers may have additional requirements surrounding sign-off that can look different depending on the provider. For example, some providers may require sign-offs at different stages of the training period – such as at the end of each placement rotation from one sector to another. Therefore, it is important that supervisors understand directly from the relevant course provider how sign-off looks like in the context of their provision.

## **Level of competence**

GPhC learning outcomes must be achieved to the required level of competence as described in the relevant standards. There is a hierarchy of four levels of competence that is based on 'Miller's triangle'; these levels are: 'Knows', 'Knows how', 'Shows how', and 'Does'. The most common level for learners who are assessed in practice is 'Does' (with some exceptions), meaning that they can demonstrate acting independently and consistently in a complex but defined situation. Learning outcomes at 'Does' level must be demonstrated by learners repeatedly and reliably.

#### **Assessment**

GPhC standards require providers of approved pharmacy education and training to have an assessment plan that is coherent, fit for purpose, robust, valid and reliable. Supervisors are expected to follow these assessment plans in order to ensure that their learners are being assessed in practice against the relevant GPhC learning outcomes. Whilst the assessment methods used can vary (e.g., supervised learning events – SLEs for 'Does' level learning outcomes), these must be appropriate to the particular learning outcome that is to be assessed. Assessment must be fair, carried out against clear criteria and take into consideration any reasonable adjustments. Whilst the assessment method can be changed to accommodate a learner's individual needs (such as through adjustments granted by the course provider), the GPhC learning outcome that is to be assessed and associated level cannot be changed.

Assessment descriptors given by course providers can sometimes read differently from the GPhC learning outcomes. Course providers must demonstrate to the GPhC at approval events how their assessment descriptors align to the GPhC learning outcomes. Therefore, it is important that supervisors understand directly from the relevant course providers what needs to be assessed in practice as part of their course or qualification and how that aligns to the GPhC learning outcomes.

## **Learners training to become pharmacists**

'Learners who are training to become pharmacists' are those who undertake foundation training through one of the following routes:

- A GPhC-approved foundation training programme after they graduate from a GPhC-approved MPharm degree or OSPAP.
- A GPhC-approved foundation training programme whilst undertaking a GPhC-approved MPharm degree with Sandwich foundation training.
- Foundation training within a GPhC-approved MPharm degree with Integrated foundation training.

Learners on Sandwich and Integrated MPharm degrees are released from study by their higher education institution in order to undertake foundation training.

Any learner whose MPharm degree is to the <u>Standards for the initial education and training of Pharmacists</u>, <u>2021</u> will require both a Designated Supervisor (DS) and a Designated Prescribing Practitioner (DPP) to supervise them in practice and sign them off against the learning outcomes in these standards. These learners will be eligible for annotation as pharmacist independent prescribers at the point of registration with the GPhC.

Learners who complete an OSPAP, or whose MPharm degree is to the previous iteration of our education and training standards, will only require a DS and the sign-off will be against the **interim learning outcomes**. These learners will not be eligible for annotation as pharmacist independent prescribers at the point of registration. They will need to complete a GPhC-approved independent prescribing programme after registration in order apply for annotation.

## Registered pharmacists training to become independent prescribers

Registered pharmacists who are on an independent prescribing programme will require a Designated Prescribing Practitioner (DPP) to supervise them in practice and sign them off against the learning outcomes iterated in the **2022 standards for the education and training of pharmacist independent prescribers**.

### Learners training to become pharmacy technicians

Those who wish to register and practise as pharmacy technicians must complete a GPhC-approved combined knowledge and competency course or qualification at a minimum level 3 as described in the National Qualifications Framework (England and Wales) or level 6 as described in the Scottish Qualifications and Credit Framework. These courses and qualifications are flexible and can be delivered face-to-face, at a distance, online or as a combination of these, allowing the person to learn based on experience of clinical, operational and scientific practices and procedures. This experience consists of two years in the workplace under the supervision, direction or guidance of a pharmacist or pharmacy technician (that is, the Designated Educational Supervisor - DES) who will be required to confirm the learner's competence (that is, sign-off). The learner will need to meet the learning outcomes iterated in the **2017 standards for the initial education and training of pharmacy technicians** in order to complete their course or qualification and apply to join the professional register.

## 1. The role of the supervisor

All pharmacy professionals registered in Great Britain, including those with supervisory roles, must act in accordance with the <u>GPhC standards for pharmacy professionals</u> (or the <u>PSNI Code and Standards</u> if registered in Northern Ireland) and complete yearly <u>revalidation</u> (or <u>retention</u> if registered in Northern Ireland) in order to continue to practise. Everyone involved in pharmacy education and training should encourage learners to consider the relevant standards and revalidation process as they move closer to registration and/or annotation and professional practice.





Standards for pharmacy professionals (illustrated in Figure 1) are relevant to all supervisors as well as pharmacy professionals and learners, as they explain the attitudes and behaviours that are expected of them. This includes continuing to develop and demonstrate leadership, such as contributing to the education, training and development of others in the pharmacy profession.

Revalidation is equally relevant as it explains the activities that the GPhC require of pharmacy professionals in order to renew their registration to continue to practise. This includes reflective practice and continual development as pharmacy professionals. Pharmacy professionals with supervisory roles are expected to develop skills in this area that can be demonstrated through revalidation.

## 1.1 Power dynamics

In the context of pharmacist and pharmacy technician education and training, it is understood that power dynamics between supervisors and learners can significantly influence the learning environment, with supervisors often holding authority that can shape not only the scope of practice but also the development of professional identity and confidence in learners. It is important to acknowledge these dynamics from the outset of the supervisor-learner relationship, particularly during initial meetings and/or during the tripartite learning agreement stage, to ensure clear communication, mutual respect, and the establishment of boundaries. Fostering a supportive and collaborative environment from the beginning can be essential for effective skill acquisition, confidence building, and long-term career progression.

Supervisors should actively encourage open dialogue, feedback, and reflect on their own role in the power dynamic to create a positive, inclusive atmosphere that is conducive to professional growth.

## 1.2 Fair and objective assessment

Supervisors' assessment of performance is essential in allowing them to make professional judgement on their learners' competence to practise safely and effectively.

It is important that the assessment of performance of every learner is conducted fairly and objectively, helping learners understand, for example:

- how they are progressing towards meeting the learning outcomes
- how they are performing in line with the training plan
- how they are performing as a professional in training
- what actions they need to take following the performance assessment.

## 1.3 Demonstrating leadership

Supervisors are in a position of responsibility to guide learners through education and training leading to professional registration and/or annotation. Supervisors should demonstrate leadership and act as a role model to ensure that learners are able to take ownership and accountability for their practice.

It is expected that supervisors induct their learners at the beginning of the training, so they understand the expectations as set out in the training plan. This should include information about safeguarding procedures for themselves and vulnerable groups to whom they provide care for, and information governance processes that they must follow within the practice settings in which they train.

## 1.4 Appropriate and timely feedback

Supervisors and learners should engage with consistent and ongoing feedback throughout the period of training. Learners must receive appropriate and timely feedback on their performance in order to develop professionally and progress through their course of education and training. This approach will assist in building learners' confidence and enhancing their practice during training. Feedback should be articulated clearly and comprehensibly, enabling learners to effectively act upon the advice and improve their practice.

## 1.5 Confidentiality and disclosure of information

Supervisors have a responsibility to respect their learners right to privacy and confidentiality in order to build and sustain a positive professional relationship.

However, there may be circumstances where a supervisor needs to decide if they should disclose private and confidential information about their learners to another person or organisation - such as the course provider. For example, if the law requires the information to be disclosed, if disclosure is in the public interest, or it is necessary to disclose the information to protect the health and safety of their learner or another person. Supervisors must always assure themselves that disclosure of any information is lawful, and in accordance with data protection legislation. Where fitness to practise issues arise, supervisors have a duty to report these to the relevant course provider and, therefore, should follow the disclosure procedures set by the provider for the purposes of managing fitness to practise concerns. For further details, please see the <a href="Methods:GPhC guidance on consent and confidentiality">GPhC guidance on consent and confidentiality</a> and <a href="managing fitness to practice concerns in education and training.">Methods:GPhC guidance on consent and confidentiality</a> and <a href="managing fitness to practice concerns in education and training.">Methods:GPhC guidance on consent and confidentiality</a> and <a href="managing fitness to practice concerns in education and training.">Methods:GPhC guidance on consent and confidentiality</a> and <a href="managing fitness to practice concerns in education and training.">Methods:GPhC guidance on consent and confidentiality</a> and <a href="managing fitness to practice concerns in education and training.">Methods:GPhC guidance on consent and confidentiality</a> and <a href="managing fitness to practice concerns in education and training.">Methods:GPhC guidance on consent and confidentiality</a> and <a href="managing fitness to practice concerns in education and training.">Methods:GPhC guidance on consent and confidentiality</a> and <a href="managing fitness to practice concerns in education and training.">Methods:GPhC guidance on consent and co

## 1.6 Providing support

The pharmacy environment should be supportive and inclusive. Supervisors should encourage, listen and support learners to help them achieve their full potential; this includes providing an honest and open training environment where learners feel they are able to ask for help and share information is essential for progression. Support may be pastoral, as well as linked directly to their competence or professionalism.

Supervisors should take into account GPhC and other relevant publications, such as those published by higher education institutions or statutory education bodies delivering pharmacy education and training. Early preparation is important, and this can include liaising with the course provider to identify what support or reasonable adjustments learners may need as they begin their course of education and training, and whether this can be addressed by the support services already available through the course provider or referring them for occupational health assessment, appropriate professional bodies, careers advisers or other pharmacy organisations and support services as appropriate, for example:

- Association of Pharmacy Technicians
- Pharmacists' Defence Association
- Pharmacists Support
- Access to Work
- Royal Pharmaceutical Society

## 2. The duty of candour

A culture where pharmacy professionals learn from feedback, incidents, and challenge poor practice and behaviours when witnessed is extremely important. This is to help improve the quality of care and pharmacy practice by reflecting on and learning from feedback when things go wrong.

The <u>GPhC Standards for pharmacy professionals</u> require that they are open and honest, including with people in their care or whom they work with, such learners, colleagues, and employers. This is usually called the 'duty of candour' and refers to being open and speaking up when things go wrong or when one has concerns, these should be raised so that appropriate action to put things right is taken in a timely manner. This is also reflected in a <u>joint statement from the Chief Executives of statutory regulators of healthcare</u>, including GPhC and PSNI.

Everyone involved in pharmacy education and training should encourage learners to consider these standards, including duty of candour, as they move closer to registration and professional practice in Great Britain. This is also relevant in the context of education and training, and supervisors are encouraged to consider raising education-related concerns to the course provider in the first instance if they feel comfortable doing so. Alternatively, supervisors may escalate their concerns to the GPhC via the reporting concerns about education and training process.

## 3. Religion, personal values and beliefs

Religion, personal values and beliefs are often central to people's lives and pharmacy professionals can make a positive contribution to the safe and effective care they provide to a diverse population. It is important that pharmacy professionals, including those in supervisory roles, take their own and others' religion, personal values and beliefs into account when engaging with learners, colleagues and people using pharmacy services and understand how these have the potential to interact with and impact on the delivery of care. They must not discriminate against a person based on their own or the person's religion, personal values or beliefs, or lack of religion or belief. They should be cognisant of cultural, social, religious and clinical factors, and recognise that these can guide a person's choices.

Healthcare professionals involved in practice supervision should further embed equality, diversity and inclusion principles in their supervisory role, sharing good practice and encouraging fair and equitable learning experiences for their learners whilst taking the **GPhC guidance on religion, personal values and beliefs** into account.

## 4. Role specific guidance for supervisors

This section is designed to provide more detailed GPhC guidance tailored to each supervisory role. For quick access, click on one of the below:

- 4.1 Designated Educational Supervisor (DES) for learners enrolled on a pharmacy technician course or qualification, including apprenticeships.
- 4.2 Designated Supervisor (DS) for learners enrolled on a foundation training programme (Foundation Training Year: FTY) or integrated/sandwich MPharm degree.
- 4.3 Designated Prescribing Practitioner (DPP) for learners enrolled on a foundation training programme (Foundation Training Year: FTY) or integrated/sandwich MPharm degree.
- <u>4.4 Designated Prescribing Practitioner (DPP) for learners enrolled on a pharmacist independent prescribing programme.</u>

## 4.1 Designated Educational Supervisor (DES) for learners enrolled on a pharmacy technician course or qualification, including apprenticeships

Table 1: Key information for Designated Educational Supervisors (DES)

Area	Key information	Additional information
Primary supervisor (≥2 years)	DES	The DES is the primary supervisor for the whole duration of initial education and training, which is for a minimum of 2 years.
Criteria for primary supervisor	Holds pharmacist registration with GPhC/PSNI or pharmacy technician registration with GPhC.	
Who is responsible for supervising the learner in practice?	The DES has overall practice supervision responsibility. <sup>3</sup>	
Who is responsible for assessing the learner in practice?	The course provider has overall assessment responsibility. 4	
Who is responsible for signing off the learner in practice?	The DES has overall responsibility of confirming the learner's competence by the end of the period of initial education and training. 5	Sign-off would be subjected to a ratification process as agreed by the relevant course provider.

The initial education and training of learners enrolled on a pharmacy technician course or qualification is underpinned by a formal and documented learning agreement. The learning agreement must:

- support learners to meet the GPhC learning outcomes by establishing clear lines of responsibility for course delivery and assessment and within the training environments
- be consistent with the teaching, learning and assessment strategies of the courses or qualifications that learners are undertaking

<sup>&</sup>lt;sup>3</sup> The DES, in agreement with the course provider, may delegate supervision activities to other healthcare professionals.

<sup>&</sup>lt;sup>4</sup> The DES, in agreement with the course provider, may take on assessment activities. Likewise, the DES may delegate assessment activities to other healthcare professionals as appropriate.

<sup>&</sup>lt;sup>5</sup> During the period of training, the DES, in agreement with the course provider, may delegate sign-off responsibilities to other healthcare professionals involved in the supervision and/or assessment of the learner in practice.

 outline the roles, responsibilities and lines of accountability, including how learners will be supported during training and how they can raise concern.

The DES has overall responsibility for supervising learners in practice for a minimum of two years and for the final supervisory declaration by the end of this period; they may also have responsibility to assess learners in practice against relevant GPhC learning outcomes. During this period, assessments can only be carried out by appropriately trained and qualified people, and the course provider is responsible to ensure that this happens. This can mean that the course provider arranges or provides the DES with appropriate training, such as practice assessor training.

The DES, in agreement with the course provider, may delegate practice supervision and/or practice assessment activities to other healthcare professionals. However, the named DES should have full oversight of this delegation as they hold overall responsibility of monitoring how their learners progress through education and training within the practice settings.

The sign-off declaration will be checked by the education and training provider to ensure that the learner has met the GPhC learning outcomes to the required level of competence and assessment by the end of their training. This is usually called ratification. The DES is encouraged to work collaboratively with everyone involved in the supervision and education and training of their learners - and not in isolation (key parties involved are shown in Figure 2 below).

As the initial education and training of pharmacy technicians combines knowledge and competence, learners enrolled on a course or qualification must be given time to learn (study). This is particularly important in order to support them achieve the GPhC learning outcomes and is also a requirement of the GPhC standards. The amount of study time given will need to be agreed between the learner, DES and course provider and should take into account that some learners may need more time than others, and ensure their workload is realistic and appropriate to facilitate learning and progress through the course.



Figure 2: key parties involved in the initial education and training of pharmacy technicians

Although the GPhC does not approve DESs directly, we have the authority to approve the processes that course providers have put in place for the period of initial education and training. In line with the initial education and training standards for pharmacy technicians, course providers must ensure that learners who enrol on their course have appropriate supervision within the practice settings in which they train. This includes ensuring that learners have an induction as well as an appropriate and realistic workload during their course of education and training.

Table 2 provides some relevant GPhC standards, such as in relation to supervision and assessment.

Table 2: GPhC standards relevant to DES supervising learners on a pharmacy technician course or qualification (from the standards for the initial education and training of pharmacy technicians, 2017)

Standard number	Description
5.7	Pre-registration trainee pharmacy technicians must be supervised using an agreed system in all learning and training environments, to ensure patient safety at all times.
5.8	Pre-registration trainee pharmacy technicians must carry out only tasks in which they are competent, or are learning under supervision to be competent in, so that patient safety is not compromised.

Standard number	Description
5.10	All course providers and employers must have procedures to deal with concerns. Serious concerns that may affect a pre-registration trainee pharmacy technician's suitability for future registration must be reported to the GPhC.
6.7	Assessments must be carried out by appropriately trained and qualified people who are competent to assess the performance of pre-registration trainee pharmacy technicians.
6.9	Pre-registration trainee pharmacy technicians must receive appropriate and timely feedback on their performance, to support their development as learners and professionals.
6.10	Assessment regulations must be appropriate for a course that leads to professional registration. That is, they must prioritise professionalism, patient safety, and safe and effective practice.
7.1	There must be a range of systems in place to support trainees to achieve the learning outcomes in part 1 of these standards, including:
	• induction
	effective supervision
	an appropriate and realistic workload
	personal and academic support
	• time to learn
	access to resources.
7.7	Everyone supporting pre-registration trainee pharmacy technicians must take into account the GPhC's guidance on tutoring for pharmacists and pharmacy technicians in their work.

Table 2 should be considered in conjunction with the full set of <u>standards for the initial education and training of pharmacy technicians (2017)</u> and associated <u>evidence framework and guidance</u> by everyone involved. Course providers approved to deliver a pharmacy technician course or qualification are listed on the <u>GPhC website</u>.

## 4.2 Designated Supervisor (DS) for pharmacy learners enrolled on a foundation training programme (Foundation Training Year: FTY) or integrated/sandwich MPharm degree

Table 3: key information for Designated Supervisors (DS)

Primary supervisor (≥52 weeks)	Criteria for primary supervisor	Who is responsible for supervising the learner in practice?	Who is responsible for assessing the learner in practice?	Who is responsible for signing off the learner in practice?
DS	Holds pharmacist registration with GPhC/PSNI.	The DS has overall practice supervision responsibility. <sup>6</sup>	The course provider has overall assessment responsibility. <sup>7</sup>	The DS has overall responsibility of signing off the learner in practice by the end of the period of foundation training. <sup>8</sup>
Primary supervisor (≥90 hours)	Criteria for primary supervisor	Who is responsible for supervising the learner in practice?	Who is responsible for assessing the learner in practice?	Who is responsible for signing off the learner in practice?
DPP	Authorised to prescribe independently by a UK regulator.	The DPP has overall independent prescribing practice supervision responsibility. <sup>9</sup>	The course provider has overall assessment responsibility. 10	The DPP has overall responsibility of signing off the learner in practice by the end of the period of foundation training specifically related to independent prescribing practice. 11

<sup>&</sup>lt;sup>6</sup> The DS, in agreement with the course provider, may delegate supervision activities to other healthcare professionals where appropriate.

<sup>&</sup>lt;sup>7</sup> The DS, in agreement with the course provider, may take on assessment activities. Likewise, the DS may delegate assessment activities to other healthcare professionals where appropriate.

<sup>&</sup>lt;sup>8</sup> The decision to sign off a learner must be made by more than one person. As a minimum, if they are not the same person, the DS and the Designated Prescribing Practitioner (DPP) must both be involved in sign-off. During the period of training, the DS, in agreement with the course provider, may delegate sign-off responsibilities to other healthcare professionals involved in the supervision and/or assessment of the learner in practice.

<sup>&</sup>lt;sup>9</sup> The DPP, in agreement with the DS and course provider, may delegate supervision activities to other healthcare professionals where appropriate.

<sup>&</sup>lt;sup>10</sup> The DPP, in agreement with the DS and course provider, may take on assessment activities. Likewise, the DPP may delegate assessment activities to other healthcare professionals where appropriate.

<sup>&</sup>lt;sup>11</sup> During the period of independent prescribing training, the DPP, in agreement with the DS and course provider, may delegate sign-off responsibilities to other healthcare professionals involved in the supervision and/or assessment of the learner in practice.

Learners enrolled on a foundation training programme or integrated/sandwich MPharm degree that includes foundation training elements within the degree must all follow a training plan (or plans) for their period of learning in practice. Course providers need to make sure, by working collaboratively with employers, that the training plans have a clear purpose to enable learners to meet all of the GPhC learning outcomes and other relevant requirements, and this may happen in one or more sectors of practice.

The DS will be required to supervise and collaborate with a Designated Prescribing Practitioner (DPP), unless they are the same person. The DS, if they meet criteria, may also take on the role of DPP. Learners who are on foundation training to the full learning outcomes as iterated in the **2021 GPhC initial education and training of pharmacists standards** will require a DPP in addition to a DS whilst those who train to the **GPhC interim learning outcomes** will only require a DS. The course provider will be able to confirm and clarify on which foundation training route a learner is enrolled and what the relevant requirements are.

In either case, learners may be supervised by a range of healthcare professionals - such as doctors and nurses acting as collaborators/practice or clinical supervisors - in addition to the DS and/or DPP - and be given exposure to different people and patients in a variety of settings, including hospital, primary care or community pharmacy. GPhC standards refer to these 'other' healthcare professionals involved in supervision as 'delegates' and encourage the DS to work collaboratively with them and everyone else involved in foundation training – and not in isolation.

Although the GPhC does not approve DSs directly, we have the authority to approve the processes that course providers have put in place for the period of initial education and training if these meet the relevant standards. For this reason, the GPhC-approved course providers must ensure that agreed systems for supervision are put in place in all practice environments so that safe, person-centred care is delivered at all times.

Key parties involved in pharmacist initial education and training are shown in figure 3 below.

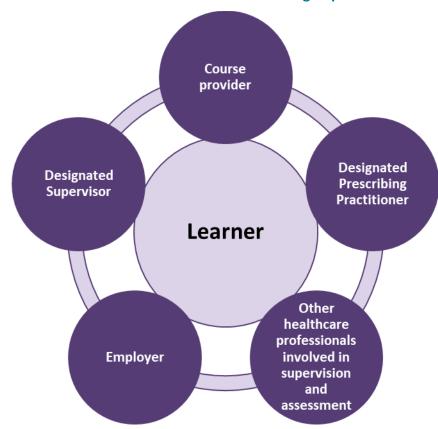


Figure 3: key parties involved in the initial education and training of pharmacists

## The responsibility of the DS

A DS has overall responsibility for supervising learners in practice. This role and overall responsibility can either be carried out by one person or it can be shared with other DSs under appropriate joint supervision arrangements. Collaboratively, a DS would also be expected to assess their learners in practice, carry out and submit sign-offs for their learners to the relevant course provider and contribute to the sign-offs carried out by other supervisors where appropriate.

Learners who are training to become pharmacists are required to work within multi-disciplinary teams, so it is important that they have access to a range of role models. As the DS, you will be expected to work collaboratively with colleagues and highlight to your learners that other people may be involved in their supervision, such as pharmacy technicians and other healthcare professionals.

It is important that the DS has regular developmental and documented meetings with their learners. The regularity of these meetings must be agreed together with the learner and course provider and maintained as agreed in the training plan. Everyone involved in supervision must understand the diversity of their learners' circumstances and experiences, and the implications these will have for learners' support and development. This can mean that the regularity to which the developmental meetings are carried out may differ from learner to learner. For example, the regularity of these meetings may change, such as for learners who may struggle with certain elements of their training and therefore and, therefore, may need additional support.

## The DS – DPP relationship

The DS will work with the DPP towards the same goal, which is to supervise learners in practice. Together, they must ensure that the learner makes necessary progress against the GPhC learning outcomes.

The DPP will sign-off the learner against GPhC learning outcomes specifically relating to prescribing and inform the DS, as agreed with the course provider and included in relevant curriculum and assessment strategy and training plans. The DS is primarily responsible to sign off their learner as 'competent pharmacist' at the end of the foundation training period if they have successfully met the GPhC learning outcomes and other requirements set by the course provider.

It is acceptable that - in cases - the role of DS and DPP for a learner is carried out by the same person. In such cases, the person carrying out both supervisory roles must be a pharmacist, and the sign-off must involve at least one additional (second) healthcare professional. The course provider must ensure that this additional healthcare professional is appropriately trained, qualified and competent, and that the mechanisms for this their involvement in sign-off are clearly defined. See <a href="mailto:section 4.3">section 4.3</a> for additional DPP requirements.

## Sign-off

Other healthcare professionals involved in co-ordinating learners' supervision, overseeing their progress or in supervising them can also be involved in sign-off, such as the DPP. However, the DS will be primarily responsible for providing formal confirmation (i.e., sign-off) to the course provider that a learner has met the GPhC learning outcomes. Therefore, the DS is not expected or required to sign-off learners in isolation.

Sign-off can be done in different practical ways - depending on the course provider - for example:

- a joint meeting between the DS and DPP (where they are not the same person) to evaluate the evidence supporting a shared decision on signing off a learner
- a joint meeting between the DS (or DPP) and the course provider to evaluate the evidence supporting a shared decision on signing off a learner
- recommendations made by a panel of healthcare professionals who would independently review the evidence of achievement against the learning outcomes
- a combination of the above.

Sign-off does not mean that the learner will automatically complete foundation training; sign-off is part of the process leading to the completion of education and training. Learners will need to satisfy all requirements set by the course provider in order to complete the integrated/sandwich MPharm degree or foundation training programme. For example, Statutory Education Bodies delivering foundation training programmes would be expected, after ratifying the sign-offs, to confirm to the GPhC that their learners achieved successful completion of the foundation training programme to the 2021 IETP standards and full (or interim) learning outcomes with no outstanding fitness to practise concerns.

Table 4 below provides some relevant GPhC standards, such as in relation to supervision, assessment and sign-off.

Table 4: GPhC standards relevant to DS supervising learners on foundation training and/or integrated/sandwich MPharm (from the standards for the initial education and training of pharmacists, 2021)

Standard number	Description
2.3	Systems and policies must be in place to allow everyone involved to understand the diversity of the trainees' circumstances and experiences and the implications that has for trainee support and development.
5.4	Everyone involved must work together to deliver the foundation training year.
5.10	Everyone involved must raise relevant issues proactively with the GPhC.
6.9	Everyone involved must support trainees to improve their performance by providing regular and timely feedback and by encouraging trainees to reflect on their practice.
6.10	Assessment must make use of feedback collected from a variety of sources, which should include other members of the pharmacy team, peers and patients.
7.1	There must be a range of systems in place during the foundation training year to identify the support needed by trainees, and to support them to achieve the outcomes in part 1 of these standards. They must be based on a trainee's prior achievement and be tailored to them. Systems must include:  a. induction  b. effective supervision  c. an appropriate and realistic workload  d. personal support  e. time to learn  f. access to resources, and  g. remediation, if necessary.
8.1	There must be 52 weeks of practical training designated as 'the foundation training year'. During these, trainees must complete at least 90 hours of supervised practice directly related to independent prescribing (period of learning in practice).
8.3	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.
9	Trainee pharmacists must be supervised by a designated supervisor and a designated prescribing practitioner <sup>12</sup> during the foundation training year to help them meet the learning outcomes.
9.1	There must be agreed systems, used by everyone involved, for co-ordinating trainees' supervision, overseeing their progress and signing them off as being fit to practise at the end of the final period of the foundation training year.

 $<sup>^{12}</sup>$  The designated supervisor and the designated prescribing practitioner referred to in the standard can be the same person.

Standard number	Description
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 <sup>13</sup> .
9.4	Trainee pharmacists may be supervised by a range of healthcare professionals, other than their designated supervisor and designated prescribing practitioner, in a variety of settings. There must be agreed systems for supervision in place in all practice environments to make sure safe, person-centred care is delivered at all times.
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.
9.8	If there are concerns that a trainee pharmacist may be failing to meet the learning outcomes for the foundation training year, an action plan must be put in place.
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 coordinating 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.

<sup>&</sup>lt;sup>13</sup> Designated prescribing practitioners must be fit to carry out that role and must have appropriate training and experience in line with the independent prescribing standards for registered pharmacists.

Table 4 above should be considered in conjunction with the full set of <u>standards for the initial education</u> and training of pharmacists (2021) and associated guidance by everyone involved. Course providers approved to deliver an MPharm degree or foundation training programme are listed on the GPhC <u>website</u>.

Supervisors who act both as DS and DPP for learners on foundation training and/or integrated/sandwich MPharm should also read <u>section 4.3</u> of this guidance.

# 4.3 Designated Prescribing Practitioner (DPP) for learners enrolled on a foundation training programme (Foundation Training Year: FTY) or integrated/sandwich MPharm degree

**Table 5: key information for Designated Prescribing Practitioners (DPP)** 

Primary supervisor (≥90 hours)	Criteria for primary supervisor	Who is responsible for supervising the learner in practice?	Who is responsible for assessing the learner in practice?	Who is responsible for signing off the learner in practice?
DPP	Authorised to prescribe independently by a UK regulator.	The DPP has overall independent prescribing practice supervision responsibility. <sup>14</sup>	The course provider has overall assessment responsibility. <sup>15</sup>	The DPP has overall responsibility of signing off the learner in practice by the end of the period of foundation training specifically related to independent prescribing practice. <sup>16</sup>
Primary supervisor (≥52 weeks)	Criteria for primary supervisor	Who is responsible for supervising the learner in practice?	Who is responsible for assessing the learner in practice?	Who is responsible for signing off the learner in practice?
DS	Holds pharmacist registration with GPhC/PSNI.	The DS has overall practice supervision responsibility. <sup>17</sup>	The course provider has overall assessment responsibility. 18	The DS has overall responsibility of signing off the learner in practice by the end of the period of foundation training. 19

<sup>&</sup>lt;sup>14</sup> The DPP, in agreement with the Designated Supervisor (DS) and course provider, may delegate supervision activities to other healthcare professionals.

<sup>&</sup>lt;sup>15</sup> The DPP, in agreement with the DS and course provider, may take on assessment activities. Likewise, the DPP may delegate assessment activities to other healthcare professionals as appropriate.

<sup>&</sup>lt;sup>16</sup> During the period of independent prescribing training, the DPP, in agreement with the DS and course provider, may delegate sign-off responsibilities to other healthcare professionals involved in the supervision and/or assessment of the learner in practice.

<sup>&</sup>lt;sup>17</sup> The DS, in agreement with the course provider, may delegate supervision activities to other healthcare professionals.

<sup>&</sup>lt;sup>18</sup> The DS, in agreement with the course provider, may take on assessment activities. Likewise, the DS may delegate assessment activities to other healthcare professionals as appropriate.

<sup>&</sup>lt;sup>19</sup> The decision to sign off a learner must be made by more than one person. As a minimum, if they are not the same person, the DS and the Designated Prescribing Practitioner (DPP) must both be involved in sign-

The DPP is a registered healthcare professional with an annotation or automatic right to prescribe independently – for example, they could be a medical independent prescriber (i.e., doctor or dentist) or a non-medical independent prescriber (e.g., pharmacist, nurse, physiotherapist or paramedic). They have experience and training that is appropriate for the supervision of learners training to become pharmacists and annotate as independent prescribers upon registration.

Learners enrolled on a foundation training programme or on an integrated/sandwich MPharm degree (that includes foundation training elements within the degree) must follow a training plan (or plans) for the whole period of learning in practice. The training plans must have a clear purpose to enable learners to meet the GPhC learning outcomes, and this may happen in one or more sectors of practice.

Learners may be supervised by a range of healthcare professionals - such as doctors and nurses acting as collaborators/practice or clinical supervisors in addition to the DPP and/or DS - and be given exposure to different people and patients in a variety of settings, such as hospital, primary care or community pharmacy. GPhC standards refer to these 'other' healthcare professionals involved in supervision as 'delegates' and encourage the DS to work collaboratively with them and everyone else involved in foundation training – and not in isolation.

Although the GPhC does not approve DPPs directly, we have the authority to approve the processes that course providers have put in place for the period of initial education and training if these meet the relevant standards. For this reason, the GPhC-approved course providers must ensure that agreed systems for supervision are put in place in all practice environments so that safe, person-centred care is delivered at all times.

Key parties involved in pharmacist initial education and training are shown in figure 4 below.

off. During the period of training, the DS, in agreement with the course provider, may delegate sign-off responsibilities to other healthcare professionals involved in the supervision and/or assessment of the learner in practice.

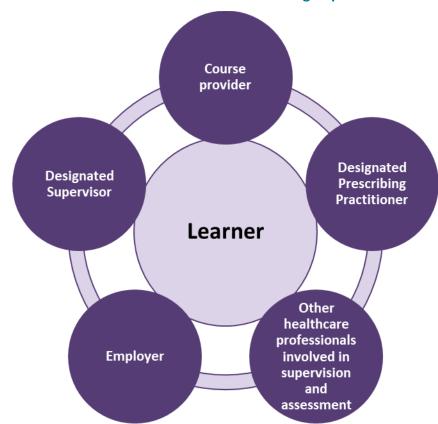


Figure 4: key parties involved in the initial education and training of pharmacists

#### The responsibility of the DPP

A DPP has responsibility for supervising learners in practice for at least 90 hours. This role and responsibility can either be carried out by one person or it can be shared with other DPPs under appropriate joint supervision arrangements. Collaboratively, a DPP would also be expected to assess their learners in practice, carry out and submit sign-offs for their learners to the DS or relevant course provider and contribute to the sign-offs carried out by other supervisors where appropriate.

Learners who are training to become pharmacists are required to work within multi-disciplinary teams, so it is important that they have access to a range of role models. As the DPP, you will be expected to work collaboratively with colleagues and highlight to your learners that other people may be involved in their supervision, such as medical and non-medical prescribers with varied backgrounds in healthcare.

It is important that the DPP has regular developmental and documented meetings with their learners. The regularity of these meetings must be agreed together with the learner and course provider, and as agreed in the training plan. Everyone involved in supervision must understand the diversity of their learners' circumstances and experiences, and the implications these will have for learners' support and development. This can mean that the regularity to which the developmental meetings are carried out may differ from learner to learner. For example, the regularity of these meetings may change, such as for learners who may struggle with certain elements of their training and, therefore, may need additional support.

### The DPP – DS relationship

The DPP will work with the DS towards the same goal, which is to supervise learners in practice, and as they are the supervisor, they must ensure that the learner makes necessary progress against the relevant GPhC learning outcomes.

The DPP will sign-off the learner against GPhC learning outcomes specifically relating to prescribing and inform the DS, as agreed with the course provider and included in relevant curriculum and assessment strategy and training plans. The DS is primarily responsible to sign off their learner as 'competent pharmacist' at the end of the foundation training period if they have successfully met the GPhC learning outcomes and other requirements as set by the course provider.

It is acceptable that - in cases - the role of DPP and DS for a learner is carried out by the same person. In such cases, the person carrying out both supervisory roles must be a pharmacist, and the sign-off must involve at least one additional (second) healthcare professional. The course provider must ensure that this additional person is appropriately trained, qualified and competent, and that the mechanisms for this their involvement in sign-off are clearly defined.

#### Sign-off

Other healthcare professionals involved in co-ordinating learners' supervision, overseeing their progress or in supervising them can also be involved in sign-off, however, the DPP will be primarily responsible for providing formal confirmation (i.e., sign-off) to the DS that a learner has met the relevant GPhC learning outcomes during the minimum period of 90 hours directly related to prescribing. This sign-off means that the DPP is satisfied of the learner's competence in prescribing.

The DPP also has responsibility to work collaboratively with the DS towards the decision to sign-off a learner by the end of the foundation training year. This is also referred to as the final sign-off, and can be done in different practical ways - depending on the course provider - for example:

- a joint meeting between the DS and DPP (where they are not the same person) to evaluate the evidence supporting a shared decision on signing off a learner
- a joint meeting between the DS (or DPP) and the course provider to evaluate the evidence supporting a shared decision on signing off a learner
- recommendations made by a panel of healthcare professionals who would independently review the evidence of achievement against the learning outcomes
- a combination of the above.

Sign-off does not mean that the learner will automatically complete foundation training; sign-off is part of the process leading to the completion of education and training. Learners will need to satisfy all requirements set by the course provider in order to complete the integrated/sandwich MPharm degree or foundation training programme. For example, Statutory Education Bodies delivering foundation training programmes would be expected, after ratifying the sign-offs, to confirm to the GPhC that their learners achieved successful completion of the foundation training programme to the 2021 IETP standards with no outstanding fitness to practise concerns.

Tables 6a and 6b below provide some relevant GPhC standards, such as in relation to supervision, assessment and sign-off.

Table 6a: GPhC standards relevant to DPP supervising learners on foundation training and/or integrated/sandwich MPharm (from the standards for the initial education and training of pharmacists, 2021)

Standard number	Description
2.3	Systems and policies must be in place to allow everyone involved to understand the diversity of the trainees' circumstances and experiences and the implications that has for trainee support and development.
5.4	Everyone involved must work together to deliver the foundation training year.
5.10	Everyone involved must raise relevant issues proactively with the GPhC.
6.9	Everyone involved must support trainees to improve their performance by providing regular and timely feedback and by encouraging trainees to reflect on their practice.
6.10	Assessment must make use of feedback collected from a variety of sources, which should include other members of the pharmacy team, peers and patients.
7.1	There must be a range of systems in place during the foundation training year to identify the support needed by trainees, and to support them to achieve the outcomes in part 1 of these standards. They must be based on a trainee's prior achievement and be tailored to them. Systems must include:  a. induction  b. effective supervision  c. an appropriate and realistic workload  d. personal support  e. time to learn  f. access to resources, and g. remediation, if necessary.
8.1	There must be 52 weeks of practical training designated as 'the foundation training year'. During these, trainees must complete at least 90 hours of supervised practice directly related to independent prescribing (period of learning in practice).
8.3	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.
9	Trainee pharmacists must be supervised by a designated supervisor and a designated prescribing practitioner <sup>20</sup> during the foundation training year to help them meet the learning outcomes.

 $^{20}$  The designated supervisor and the designated prescribing practitioner referred to in the standard can be the same person.

Standard number	Description
9.1	There must be agreed systems, used by everyone involved, for co-ordinating trainees' supervision, overseeing their progress and signing them off as being fit to practise at the end of the final period of the foundation training year.
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. <sup>21</sup>
9.4	Trainee pharmacists may be supervised by a range of healthcare professionals, other than their designated supervisor and designated prescribing practitioner, in a variety of settings. There must be agreed systems for supervision in place in all practice environments to make sure safe, person-centred care is delivered at all times.
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.
9.8	If there are concerns that a trainee pharmacist may be failing to meet the learning outcomes for the foundation training year, an action plan must be put in place.
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 coordinating 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.

<sup>&</sup>lt;sup>21</sup> Designated prescribing practitioners must be fit to carry out that role and must have appropriate training and experience in line with the independent prescribing standards for registered pharmacists.

Table 6a above should be considered in conjunction with the full set of <u>standards for the initial education</u> <u>and training of pharmacists (2021) and associated guidance</u> by everyone involved. Course providers approved to deliver an MPharm degree or foundation training programme are listed on the GPhC <u>website</u>.

<u>Standards for the education and training of pharmacist independent prescribers (2022)</u> included in table 6b are also necessary in order to meet Standard 9.3 of GPhC standards for the initial education and training of pharmacists (2021) and, therefore, should be regarded by everyone involved. Guidance associated to these standards can be found <u>here</u>.

Table 6b: additional GPhC standards relevant to DPP supervising learners on foundation training and/or integrated/sandwich MPharm (from the standards for the education and training of pharmacist independent prescribers, 2022)

Standard number	Description
9	Designated prescribing practitioners must be fit to undertake that role and must have appropriate training and experience.
9.1	Course providers must have appropriate mechanisms for ensuring that designated prescribing practitioners are fit to be the supervisors of pharmacist independent prescribers in training.
9.2	<ul> <li>Prospective designated prescribing practitioners must have:</li> <li>active prescribing competence applicable to the areas in which they will be supervising</li> <li>appropriate patient-facing clinical and diagnostic skills</li> <li>supported or supervised other healthcare professionals, and</li> <li>the ability to assess patient-facing clinical and diagnostic skills.</li> </ul>
9.3	<ul> <li>Course providers must provide training for designated prescribing practitioners on:</li> <li>the pharmacist independent prescribing role</li> <li>the course for pharmacist independent prescribers in training on which they will be working, including its learning outcomes</li> <li>the role of designated prescribing practitioners in the course</li> <li>assessing the performance of pharmacist independent prescribers in training</li> <li>giving feedback to pharmacist independent prescribers in training</li> <li>supporting pharmacist independent prescribers in training, and</li> <li>raising concerns.</li> </ul>
9.4	Course providers must support designated prescribing practitioners when they are acting in that role.
9.5	Course providers must provide designated prescribing practitioners with feedback about their performance as prescribing supervisors and arrange extra training, support and development as necessary.

## 4.4 Designated Prescribing Practitioner (DPP) for learners enrolled on a pharmacist independent prescribing programme

**Table 7: key information for Designated Prescribing Practitioners (DPP)** 

Primary supervisor (≥90 hours)	Criteria for primary supervisor	Who is responsible for supervising the learner in practice?	Who is responsible for assessing the learner in practice?	Who is responsible for signing off the learner in practice?
DPP	Authorised to prescribe independently by a UK regulator.	The DPP has overall practice supervision responsibility. <sup>22</sup>	The course provider has overall assessment responsibility. <sup>23</sup>	The DPP has overall responsibility of signing off the learner in practice by the end of the period of supervised independent prescribing practice. <sup>24</sup>

The DPP is a registered healthcare professional with an annotation or automatic right to prescribe independently – for example, they could be a medical independent prescriber (i.e., doctor or dentist) or a non-medical independent prescriber (e.g., pharmacist, nurse, physiotherapist or paramedic). They have experience and training that is appropriate for the supervision of pharmacist learners training to become independent prescribers. This includes:

- active prescribing competence applicable to the areas in which they will be supervising
- appropriate patient-facing clinical and diagnostic skills
- supported or supervised other healthcare professionals
- the ability to assess patient-facing clinical and diagnostic skills.

Registered pharmacists enrolled on an independent prescribing course are learners and, therefore, must follow a learning agreement that covers all learning, teaching and practice environments outlining roles and responsibilities and lines of accountability during their course of education and training. The learning agreement must have a clear purpose to enable learners to meet the relevant GPhC learning outcomes during the period of learning in practice of at least 90 hours.

The learner will require one DPP who will assume the primary responsibility for their supervision. If more than one person is involved in supervising a pharmacist independent prescriber in training, one (independent prescriber) must assume primary responsibility for their supervision. That person will be the designated prescribing practitioner for the pharmacist independent prescriber in training.

<sup>&</sup>lt;sup>22</sup> The DPP, in agreement with the course provider, may delegate supervision activities to other healthcare professionals where appropriate.

<sup>&</sup>lt;sup>23</sup> The DPP, in agreement with the course provider, may take on assessment activities. Likewise, the DPP may delegate assessment activities to other healthcare professionals where appropriate.

<sup>&</sup>lt;sup>24</sup> During the period of independent prescribing training, the DPP, in agreement with the course provider, may delegate sign-off responsibilities to other healthcare professionals involved in the supervision and/or assessment of the learner in practice.

Although the GPhC does not approve DPPs directly, we have the authority to approve the processes that course providers have put in place for the period of independent prescribing training if these meet the relevant standards. For this reason, the GPhC-approved course providers must ensure that agreed systems for supervision are put in place in all practice environments so that safe, person-centred care is delivered at all times.

Key parties involved in pharmacist independent prescribing education and training are shown in figure 5.

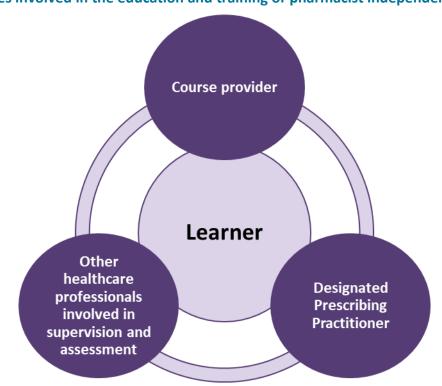


Figure 5: key parties involved in the education and training of pharmacist independent prescribers

## The responsibility of the DPP

A DPP has responsibility for supervising learners in practice for at least 90 hours. A DPP would also be expected to assess their learners in practice and carry out and submit sign-offs for their learners to the relevant course provider. The responsibility of the role includes providing learners with regular and timely feedback and encouraging reflective practice.

Pharmacy professionals are required to work within multi-disciplinary teams, so it is important that learners have access to a range of role models. As the DPP, you will be expected to work collaboratively with colleagues and highlight to your learners that other people may be involved in their supervision, such as medical and non-medical prescribers with varied backgrounds in healthcare.

It is important that the DPP has regular developmental and documented meetings with their learners. The regularity of these meetings must be agreed together with the learner and course provider, and as agreed in the management plan. Everyone involved in supervision must understand the diversity of their learners' circumstances and experiences, and the implications these will have for learners' support and development. This can mean that the regularity to which the developmental meetings are carried out may

differ from learner to learner. For example, the regularity of these meetings may change, such as for learners who may struggle with certain elements of their training and, therefore, may need additional support.

#### **Conflict of interest**

In order to meet the GPhC standards, course providers must ensure that the independent prescriber acting as DPP for a learner is suitable to carry out this supervisory role for them. During the course of education and training, the DPP would need to assess their learners' performance in practice and make a professional judgement as to whether they are competent to prescribe. For this reason, it is unlikely that a course provider would accept, for example, a close family member of a learner as their DPP - as this could present a conflict of interest.

Impartiality is an important factor that must be taken in consideration by course providers when approving an independent prescriber for the role of DPP. This is reflected in the **GPhC guidance to support the implementation of the standards for the education and training of pharmacist independent prescribers**, by standard 9.1 which suggests: *Does the provider ensure that a DPP can act impartially in their role in confirming that a pharmacist is competent as a prescriber for the period of learning in practice?* 

Furthermore, the Chief Executives of statutory regulators of health and care – including the GPhC – published a **joint statement** on conflict of interest. The statement makes clear that health and social care professionals are expected to "put the interests of people in their care before their own interests, or those of any colleague, business, organisation, close family member or friend".

Therefore, the DPP should work closely with the course provider and the learner as soon as the application to act as DPP is submitted in order to aid the course provider determine whether there is any risk for conflict of interest, and whether this can be managed.

### Sign-off

Other healthcare professionals involved in co-ordinating learners' supervision, overseeing their progress or in supervising them can also be involved in sign-off, however, the DPP will be primarily responsible for providing formal confirmation (i.e., sign-off) to the course provider that a learner has met the relevant GPhC learning outcomes during a minimum period of 90 hours of supervised prescribing practice. This sign-off means that the DPP is satisfied of their learner's competence in prescribing.

Sign-off does not mean that the learner will automatically complete the independent prescribing course; sign-off is part of the process leading to the completion of the course. Learners will need to satisfy all requirements set by the course provider in order to complete the course and be awarded a Practice Certificate in Independent Prescribing. For example, Universities delivering pharmacist independent prescribing courses would be expected, after ratifying the sign-offs, to confirm to the GPhC that their learners achieved successful completion of the course to the **2022 independent prescribing standards** with no outstanding fitness to practise concerns.

Table 4 below provides some relevant GPhC standards, such as in relation to supervision, assessment and sign-off.

Table 4: GPhC standards relevant to DPP supervising learners on an independent prescribing programme (from the standards for the education and training of pharmacist independent prescribers, 2022)

Standard number	Description
1.1(e)	Applicants must have a designated prescribing practitioner who has agreed to supervise their learning in practice. The applicant's designated prescribing practitioner must be a registered healthcare professional in Great Britain or Northern Ireland with legal independent prescribing rights, who is suitably experienced and qualified to carry out this supervisory role, and who has demonstrated CPD or revalidation relevant to this role. Although an applicant may be supervised by more than one person, only one prescriber must be the designated prescribing practitioner. The designated prescribing practitioner is the person who will certify that successful pharmacists are competent to practise as independent prescribers.
5.6	Pharmacist independent prescribers in training must only undertake tasks in which they are competent, or are learning under supervision to be competent, so that patient safety is not compromised.
5.7	Pharmacist independent prescribers in training must be supervised using agreed mechanisms in all clinical practice environments to ensure safe, person-centred care is delivered at all times.
5.10	Causes for concern about a pharmacist independent prescriber in training, a designated prescribing practitioner or the learning environment must be addressed as soon as possible and in such a way that the cause for concern is dealt with.
6	Courses must enable the pharmacist independent prescriber in training to develop the behaviours and the required skills, knowledge and understanding to meet the outcomes in Part 1 of these standards in learning in practice settings.
6.1	Part of the course for pharmacist independent prescribers in training must take place in clinical settings with direct access to patients – these are 'learning in practice' settings.
6.2	In the learning in practice settings identified in 6.1, pharmacist independent prescribers in training will prescribe under the supervision of a designated prescribing practitioner.
6.3	If more than one person is involved in supervising a pharmacist independent prescriber in training, one independent prescriber must assume primary responsibility for their supervision. That person will be the designated prescribing practitioner for the pharmacist independent prescriber in training.
6.4	Course providers must approve the designated prescribing practitioner and agree that they have the core competencies to carry out the role effectively.
7.8	Pharmacist independent prescribers in training must receive regular, appropriate and timely feedback on their performance to support their development as learners.

Standard number	Description
8.1	A range of mechanisms must be in place to support trainees to achieve the learning outcomes in Part 1 of these standards, including:  induction  effective supervision  an appropriate and realistic workload  personal and academic support, and  access to resources.
8.2	There must be mechanisms in place for pharmacist independent prescribers in training to meet regularly with their designated prescribing practitioner and others to discuss and document their progress as learners.
8.4 <sup>25</sup>	Everyone supporting pharmacist independent prescribers in training must take into account the GPhC's guidance on tutoring for pharmacists and pharmacy technicians in their work as appropriate.
9	Designated prescribing practitioners must be fit to undertake that role and must have appropriate training and experience.
9.1	Course providers must have appropriate mechanisms for ensuring that designated prescribing practitioners are fit to be the supervisors of pharmacist independent prescribers in training.
9.2	<ul> <li>Prospective designated prescribing practitioners must have:</li> <li>active prescribing competence applicable to the areas in which they will be supervising</li> <li>appropriate patient-facing clinical and diagnostic skills</li> <li>supported or supervised other healthcare professionals, and</li> <li>the ability to assess patient-facing clinical and diagnostic skills.</li> </ul>
9.3	<ul> <li>Course providers must provide training for designated prescribing practitioners on:</li> <li>the pharmacist independent prescribing role</li> <li>the course for pharmacist independent prescribers in training on which they will be working, including its learning outcomes</li> <li>the role of designated prescribing practitioners in the course</li> <li>assessing the performance of pharmacist independent prescribers in training</li> <li>giving feedback to pharmacist independent prescribers in training</li> <li>supporting pharmacist independent prescribers in training, and</li> <li>raising concerns.</li> </ul>
9.4	Course providers must support designated prescribing practitioners when they are acting in that role.

<sup>25</sup> 'GPhC's guidance on tutoring for pharmacists and pharmacy technicians' mentioned in this standard is an older iteration of this guidance.

Standard number	Description
9.5	Course providers must provide designated prescribing practitioners with feedback about their performance as prescribing supervisors and arrange extra training, support and development as necessary.

Table 4 above should be considered in conjunction with the full set of <u>standards for the education and</u> <u>training of pharmacist independent prescribers (2022) and associated guidance</u> by everyone involved. Course providers approved to deliver an independent prescribing course are listed on the GPhC <u>website</u>.

## 5. Useful resources

## **GPhC publications**

- Standards for the initial education and training of pharmacists (2021)
- <u>Initial education and training of pharmacists Guidance to support the implementation of the standards (2022)</u>
- <u>Standards for the education and training of non-EEA pharmacists wanting to register in Great</u>
  Britain (2011)
- Standards for the education and training of pharmacist independent prescribers (2022)
- Guidance to support the implementation of the standards for the education and training of pharmacist independent prescribers (2022)
- Standards for the initial education and training of pharmacy technicians (2017)
- Initial education and training of pharmacy technicians: evidence framework (2018)
- Education and training framework for pharmacists and pharmacy technicians in Great Britain
- Guidance on managing fitness to practise concerns in education and training (2020)
- Standards for pharmacy professionals (2017)
- Revalidation framework (2018)

## Other publications and resources

- A toolkit to support the use of Entrustable Professional Activities (EPAs) in MPharm degrees in England
- RPS A Competency Framework for Designated Prescribing Practitioners (2019)
- Association of Pharmacy Technicians UK
- NHSE Prescribing Supervision and Assessment in the Foundation Trainee Pharmacist Programme from 2025/26
- NES Foundation training year
- HEIW Foundation pharmacists
- NICPLD Foundation training year
- PSNI The Code, Standards and Guidance

## 6. More information

For copies of this document in other formats or in Welsh language, please contact GPhC's Communications team via **communications@pharmacyregulation.org** 

If you have questions or comments about the content of this guidance, please contact GPhC's

Education team via education@pharmacyregulation.org