General Pharmaceutical Council

# Ulster University, Master of Pharmacy (MPharm) degree and MPharm degree with preparatory year reaccreditation Part 2 event report, March 2025

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| Event summary and conclusions | |
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| **Provider** | Ulster University |
| **Programme/s** | Master of Pharmacy (MPharm) degree<br>Master of Pharmacy (MPharm) degree with preparatory year |
| **Event type** | Reaccreditation (Part 2) |
| **Event date** | 11-12 March 2025 |
| **Approval period** | 2022/23 – 2030/31 |
| **Relevant requirements** | Standards for the initial education and training of pharmacists, January 2021 |
| **Outcome** | Approval<br>Reaccreditation of the MPharm degree and MPharm degree with preparatory year offered by Ulster University was confirmed. There were no conditions.<br>Reaccreditation was confirmed for a period of 6 years, with an interim event in 3 years' time. |
| **Conditions** | There were no conditions. |
| **Standing conditions** | The standing conditions of accreditation can be found **here**. |
| **Recommendations** | No recommendations were made. |
| **Minor amendments** | No minor amendments were made |
| **Registrar[1] decision** | Please see part 1 report. |
| **Key contact (provider)** | Dr Aaron J. Courtenay, Senior Lecturer in Clinical Pharmacy (MPharm Course Director) |
| **Accreditation team** | *Ahmed Aboo (Team leader) Head of School, Leicester School of Pharmacy, De Montfort University<br>Dr James Desborough (team member - academic) Associate Professor in Pharmacy Practice, School of Pharmacy, University of East Anglia<br>Ravi Savania (team member - academic) Associate Professor of Pharmacy Education, School Director of Teaching and Learning, University of Reading |

[1] Registrar or appointed delegate

| | |
|---|---|
| | Professor Luigi Martini (team member - pharmacist) CEO Precision Health Technology Accelerator (PHTA) for University of Birmingham and Birmingham Health Partners<br><br>Dafydd Rizzo (team member - pharmacist newly qualified) Clinical Pharmacist, Cardiff and Vale University and Post-Registration Foundation Pharmacist<br><br>Fiona Barber (team member - lay) Independent Member, Standards Committee, Leicester City Council |
| **GPhC representative** | *Chris McKendrick, Senior Quality Assurance Officer (Education), General Pharmaceutical Council |
| **Rapporteur** | Marcia Fernandes (Rapporteur) Managing Director at the Association for Accredited Learning |
| **Observer** | *Emer Hopkins, Head of Regulation Strategy and Education, Pharmaceutical Society of Northern Ireland (PSNI representative) |

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

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' (accreditation and recognitional panel members) 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.

GPhC education and training standards are published jointly with the pharmacy regulator in Northern Ireland, the Pharmaceutical Society of NI (PSNI) and the GPhC undertakes accreditation of pharmacy education in Northern Ireland on behalf of the PSNI. This accreditation process was undertaken by a GPhC accreditation team on behalf of the Pharmaceutical Society of NI. The event was overseen by a representative from each of the respective pharmacy regulators.

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

## Background

This event was conducted as the second part (Part 2) of a two-part reaccreditation process as described in the '**Adapted methodology for reaccreditation of MPharm degrees to 2021 standards'.** Full background details on the provider and MPharm provision can be found in the Part 1 report which can be **found here**.

**MPharm degree and MPharm degree with preparatory year**

The Part 1 event took place on 7-9 March 2023 onsite. The programme was approved with two conditions and no recommendations. The conditions and responses are outlined below and are now met.

Condition 1: The provider must develop an appropriate data collection process with reference to relevant protected characteristics in relation to overall student admissions and subsequent performance on the programme, analysing and reporting on these annually. This must be done in line with relevant legislation, namely Section 75 of the Northern Ireland Act 1998. This is because the team could not see recent evidence of how admissions and performance data is used to inform the programme. This was to meet criteria 1.2 and 2.4.

The provider collects anonymous data on protected characteristics from applicants during the admission process, which is analysed to identify potential discrimination in selection outcomes. This data is reviewed annually, alongside anonymised student performance data, to assess progression by protected characteristic. If disparities are identified, action plans are developed, focusing on targeted support or adjustments to teaching methods, and are reviewed by academic committees. The process aligns with relevant legislation, including the Northern Ireland Act 1998 and the Disability Discrimination Act 1995, and reflects the provider's commitment to equality, diversity, and inclusion. This ongoing process is documented, with records from previous academic years demonstrating the actions taken to address any inequalities.

As part of the review of the condition response, the accreditation team agreed that the condition was likely to be met by the Part 2 event.

Condition 2: The provider must review standard-setting processes across all summative assessments and develop a plan for using an evidence-based standard-setting methodology for calculations assessments. This is because although the team could see evidence of a standard-setting process for some assessments, there was no evidence of appropriate standard-setting methods in the calculations assessments. This was to meet criteria 6.4 and 6.7.

The provider developed a robust and evidence-based standard-setting methodology for all assessments in the MPharm programme, including calculations assessments, using a modified-Angoff approach. This involves generating questions for each assessment, sending them to a blinded panel of academic and clinical staff, who assign expected pass rates, and calculating an overall pass mark. The approach ensures transparency and consistency across all year groups. Additionally, the programme includes a comprehensive assessment strategy, with clear criteria and marking rubrics, and thorough training for staff involved in assessment to maintain fairness. The Objective Structured Clinical Examinations (OSCEs) are integrated across all four years, with inclusive design and rigorous evaluation processes. The provider also ensures alignment with professional standards through collaboration with clinical staff and regular reviews, making the assessment process fair, transparent, and consistent with current practice standards.

As part of the review of the condition response, the accreditation team agreed that the condition was likely to be met by the Part 2 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 21 February 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, and was told the learning outcomes that would be sampled.

## The event

The event took place virtually on 11-12 March 2025 and comprised of a series of meetings between the GPhC accreditation team and representatives of the MPharm degree and a meeting with present students.

## Declarations of interest

There were no declarations of interest.

# Schedule

**Day 1: 11 March 2025**

Private meeting of accreditation team

**Progress meeting 1 – management and oversight**

- **Introductions**
- **Introductory presentation (maximum 20 minutes) covering:**
  - Overview of progress, developments and updates since the part 1 event
  - Any other areas requested by accreditation team (if this is needed it will be discussed at pre-event meeting and additional time allocated for presentation if necessary)
- Questions and discussions focusing on standards 1, 2, 3 and 4 as well as aspects of standard 7.

  This session will focus on:

  Standard 1 – Selection and Admissions

Standard 2 – Equality, Diversity and Fairness

Standard 3 – Resources and Capacity

Standard 4 – Managing, developing and evaluating MPharm degrees

Standard 7 – Support and development for […] everyone involved in the delivery of the MPharm degree

- **Private meeting of accreditation team**
- **Meeting with students**

  Private meeting of accreditation team

**Day 2: 12 March 2025**

- **Private meeting of the accreditation team**
- **Progress meeting 2 – curriculum and assessment**

  Questions and discussions focusing on standards 5 and 6 as well as aspects of standards 2 and 7.

  This session will focus on:

  Standard 5 – Curriculum design and delivery

  Standard 6 – Assessment

  Standard 2 – Equality, Diversity and Fairness

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

  Exploration of any 'likely to be met' learning outcomes
- **Private meeting of the accreditation team**
- **Meeting with experiential learning partners and placement supervisors**
- **Private meeting of the accreditation team**
- **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 Paul McCarron | Head of School |

| | |
|---|---|
| *Dr Deborah Lowry | Associate Head of School & Academic Lead for Education, Senior Lecturer in Pharmaceutics |
| *Dr Aaron Courtenay | MPharm Course Director & Senior Lecturer in Clinical Pharmacy |
| Dr Heather Nesbitt | Lecturer in Pharmaceutical Sciences, Interactive component admissions lead |
| Dr Heather Coleman | Lecturer in Pharmaceutical Chemistry, MPharm Admissions Tutor & EDI lead |
| Martin Smith | Admissions Campus Manager |
| Lisa Smith | Postgraduate Pharmacy Dean, Northern Ireland Centre for Pharmacy Learning and Development (NICPLD) |
| Professor Carol Curran | Pro-Vice Chancellor & Executive Dean Faculty of Life and Health Sciences Ulster University |
| Professor Neil Cook | Associate Dean Academic Quality and Student Experience |
| Dr Ahmed Abuelhana | Lecturer in Clinical Pharmacy & Pharmacy Practice |
| Dr Charles Bennah | Lecturer in Clinical Pharmacy |
| Professor John Callan | Norbrook Chair in Pharmaceutical Sciences |
| Professor Bridgeen Callan | Professor in Pharmaceutics |
| Professor Nigel Irwin | Professor of Diabetes Research |
| Iain Jack | Lecturer in Clinical Pharmacy |
| Dr Ruoyin Luo | Lecturer in Pharmacy Practice |
| Dr Kingston Rajiah | Lecturer in Clinical Pharmacy & Pharmacy Practice |
| Dr Mohamed Elnaem | Lecturer in Clinical Pharmacy |
| Dr Peter McPherson | Lecturer in Pharmaceutical Sciences |
| Dr Jessica Moore | Lecturer in Pharmaceutics |
| Dr Aaron Hutton | Lecturer in Pharmaceutics |
| Dr Sherif Hamdallah | Lecturer in Pharmaceutical Sciences |
| Dr Mateus Webba Da Silva | Reader in Pharmaceutical Chemistry |
| Liz Lees | Course Director International Foundation Year |
| Ciara Thompson | Student Wellbeing Manager |
| Helen Hirst | EL Lead Community Pharmacy NICPLD |
| Bronagh White | EL Lead GP Practice NICPLD |
| Professor Roisin O'Hare | Lead Clinical Education Pharmacist, SHSCT |
| Niall O'Boyle | Trust Lead Clinical Education Pharmacist, SEHSCT |

*attended the pre-meeting.

The accreditation team also met a group of MPharm students:

| **Current year of study** | **4-year MPharm route** | **5-year MPharm with preparatory year route** | **Total** |
|---|---|---|---|
| Year 0 (preparatory year) | 0 | 0 | **0** |
| Year 1 | 4 | 0 | **4** |

| | | | |
|---|---|---|---|
| Year 2 | 4 | 0 | **4** |
| Year 3 | 4 | 0 | **4** |
| Year 4 | 8 | 0 | **8** |
| **Total** | **20** | **0** | **20** |

## Key findings - Part 1 Learning outcomes

During the Part 1 reaccreditation process the accreditation team reviewed the provider's proposed teaching and assessment of all 55 learning outcomes relating to the MPharm degree and MPharm degree with preparatory year.

During the Part 2 event, the accreditation team reviewed the provider's proposed teaching and assessment of any learning outcomes that were deemed as 'likely to be met' or had changed/been modified since the Part 1 process.

Having reviewed the learning outcomes at both the Part 1 and Part 2 reaccreditation events, the team agreed that all 55 learning outcomes were met or would be met at the point of delivery.
See the **decision descriptors** for an explanation of the 'Met' and 'not met' decisions available to the accreditation team.

The learning outcomes are detailed within the **Standards for the initial education and training of pharmacists, January 2021**.

### Domain: Person-centred care and collaboration (learning outcomes 1 - 14)

**Learning outcomes met/will be met? Yes ☒ No ☐**

**LO7 Obtain informed consent before providing care and pharmacy services (Does)**.
This learning outcome was likely to be met at the Part 1 event and has now been met at the Part 2 event.

The MPharm course has been updated to enhance students' competence in obtaining informed consent through both simulated and real-world experiences. From level 4, students practice consent in professional practice modules, and this is reinforced through clinical placements in hospitals, community settings, and General Practice, guided by the NICPLD and NICEP. The course includes eight newly appointed Federation Experiential Leads to support General Practice placements, and students must complete Entrustable Professional Activities (EPAs) that require demonstrating consent. OSCEs also assess students' ability to gain consent in realistic scenarios, with all assessments aligned to professional requirements. Continuous feedback from placement supervisors and ongoing evaluation of placement provision ensure that students are well-supported in learning and applying the legal and ethical aspects of consent. Students also receive comprehensive pre-placement training and workshops, further strengthening their competence in this area throughout their studies.

**LO10 Demonstrate effective consultation skills, and in partnership with the person, decide the most appropriate course of action (Does).**
This learning outcome was likely to be met at the Part 1 event and has now been met at the Part 2 event.

Starting in Level 4, students begin developing foundational consultation skills through various modules that emphasize patient-centred communication and decision-making, with a focus on the Pharmacy First scheme. These skills are further enhanced through professional practice modules in Levels 5-7, where students refine their consultation techniques in diverse scenarios. Experiential learning placements, lasting up to 12 weeks across hospital, community, and General Practice

settings, provide students with real-world exposure to patient consultations under the supervision of experienced mentors. During these placements, students complete Entrustable Professional Activities (EPAs) mapped to LO10, which ensures effective consultation is a key component of their progression. The EPA portfolio, introduced in the 2023-2024 academic year, is continuously reviewed for effectiveness in collaboration with the Northern Ireland Centre for Pharmacy Learning and Development (NICPLD). Additionally, Objective Structured Clinical Examinations (OSCEs) are used to assess students' consultation skills, with increasing complexity throughout the course, ensuring alignment between simulated practice, experiential learning, and formal assessment.

The accreditation team agreed that all learning outcomes within this domain are met.

## Domain: Professional practice (learning outcomes 15 – 44)

**Learning outcomes met? Yes ☒ No ☐**

**LO16. Apply professional judgement in all circumstances, taking legal and ethical reasoning into account (Does).**
This learning outcome was likely to be met at the Part 1 event and has now been met at the Part 2 event.

Experiential placements at Ulster University total up to 12 weeks across levels 5-7, offering students hands-on experience in community, hospital, and General Practice environments. These placements are designed to help students apply learning outcomes at the “does” level, with supervision from trained placement supervisors. The process is supported by Northern Ireland Centre for Pharmacy Learning and Development (NICPLD) and facilitated by the Northern Ireland Clinical Education Pharmacists (NICEP) and newly appointed Federation Experiential Leads. EPAs are used to monitor performance, providing feedback and assessing competencies related to tasks like patient consultations, medication reviews, and professional judgement. This is supplemented by formative feedback and e-portfolio tracking to ensure competency in consultation skills and shared decision-making across various pharmacy settings. The EPA portfolio, introduced in the academic year 2023-2024, is continually reviewed alongside feedback from students and placement providers.

The accreditation team asked how LO16 is assessed. It was explained that the learning outcome is mapped to both EPA and OSCEs, with at least two instances of mapping in each, covering Years 2 and 3.

**LO17. Recognise and work within the limits of their knowledge and skills, and get support and refer to others when they need to (Does).**
This learning outcome was likely to be met at the Part 1 event and has now been met at the Part 2 event.

Students in the MPharm programme are required to demonstrate professional behaviour in real-life placements and simulation classes throughout all four years, in line with the PSNI and GPhC Code of Conduct. Professionalism is assessed in various modules, where students must pass assessments on their professional conduct to progress. In OSCEs, students address ethical dilemmas while acknowledging their limitations and referring to other healthcare professionals when needed. Students also complete Entrustable Professional Activities (EPAs) mapped to LO17, which ensures they recognise and work within their limits of knowledge and skills. These EPAs, covering tasks like patient counselling, prescription checks, and medication recommendations, must be successfully

completed to progress through the programme. LO17 is further assessed during OSCEs, including physical examinations and medicine reconciliations.

**LO18 Take responsibility for all aspects of pharmacy services, and make sure that the care and services provided are safe and accurate (Does).**
This learning outcome was likely to be met at the Part 1 event and has now been met at the Part 2 event.

Students' communication skills are assessed by placement supervisors and through formative feedback during clinical and pharmacy practice classes. In OSCE assessments, students are expected to provide evidence-based medicine information and pharmacotherapeutic advice, utilizing available resources. Experiential placement activities are evaluated through Entrustable Professional Activities (EPAs), with feedback provided by trained placement supervisors. Students must complete an e-portfolio with specific learning outcomes for each EPA, which is a mandatory part of their professional practice modules. EPAs assess responsibility in pharmacy services, including patient-specific calculations and medication recommendations, ensuring that progression through the programme depends on successful completion of these assessments. LO18 is also assessed in OSCEs, including tasks like responding to symptoms and prescribing.

**LO35 Anticipate and recognise adverse drug reactions, and recognise the need to apply the principles of pharmacovigilance (does).**
This learning outcome was likely to be met at the Part 1 event and has now been met at the Part 2 event.

Integrated OSCEs from levels 4 to 7 assess students' ability to respond to scenarios involving adverse drug reactions, side effects, and pharmacovigilance. A Medicines Adherence workshop, led by a consultant pharmacist for older people, is delivered to level 6 students, focusing on pharmacovigilance principles. Experiential placements are assessed through Entrustable Professional Activities (EPAs), with feedback provided by trained placement supervisors. Students must complete an e-portfolio, which is a compulsory part of the professional practice modules in levels 5, 6, and 7. EPAs, including prescription checks, assess students' ability to anticipate and recognize adverse drug reactions, ensuring progression through the programme. LO35 is also assessed during OSCEs, covering medication information and dispensing.

The accreditation team agreed that all learning outcomes within this domain are met.

## Domain: Leadership and management (learning outcomes 45 - 52)

**Learning outcomes met? Yes ☒ No ☐**

All learning outcomes were met during the Part 1 event.

Following the Part 1 event, changes were made to enhance the programme. The Medicines Adherence workshop, previously delivered by the Medicines Optimisation in Older People (MOOP) Medicines Safety Team, is now collaboratively offered with the IPL faculty committee to provide interdisciplinary training on adherence and medication safety. This aims to broaden students' understanding of patient care and safety. Additionally, there is a strengthened emphasis on students' direct engagement with multidisciplinary care teams during placements. This change ensures that

students are more actively involved in collaborative healthcare delivery, working alongside medical practitioners, nurses, and allied health specialists, which enhances their interprofessional skills and patient-centred care. Furthermore, at Level 7, students are now required to complete an in-depth case report where they select a patient case, present a comprehensive summary, and critically analyse clinical decisions. This assignment fosters leadership, clinical reasoning, and interprofessional collaboration, ensuring students gain a more holistic approach to patient care.

The accreditation team agreed that all learning outcomes within this domain are met.

### Domain: Education and research (learning outcomes 53 - 55)

**Learning outcomes met? Yes ☒ No ☐**

All learning outcomes were met during the Part 1 event.

Following the Part 1 event, improvements were made to enhance the programme. A structured approach to Continuous Professional Development (CPD) and Personal Development Planning (PDP) was introduced across levels 4-7, encouraging students to engage in reflective practice from the outset. This includes reflective processes after completing Entrustable Professional Activities (EPAs), allowing students to assess their performance and identify areas for improvement. To track progress, the NICPLD developed an experiential placement "tracker," enabling students and supervisors to monitor EPA completion and address learning gaps early. Additionally, a formal near-peer teaching initiative was piloted in 2023-2024 between Level 5 and Level 7 students, which proved successful and is now implemented for the 2024-2025 academic year. This initiative fosters collaborative learning, mentorship, and leadership skills, with students engaging in activities like Medication History and interprofessional learning with nursing students. The program is supported by a structured framework and dedicated training for mentors to ensure consistency and effectiveness in peer-led learning.

The accreditation team agreed that all learning outcomes within this domain are met.

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

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

### Standard 1: Selection and admission

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

**Standard met? Yes ☒ No ☐**

**The accreditation team agreed that all criteria in Standard 1 were met or would be met at the point of delivery.**

The MPharm programme at Ulster University collects applicant Equality, Diversity, and Inclusion (EDI) data through an interview process, where candidates are asked to complete a questionnaire that includes EDI questions. The process has a 60% uptake, providing a reasonable demographic capture.

However, many applicants choose the "prefer not to say" option, which is believed to be influenced by cultural factors.

Regarding protected characteristics, the programme predominantly attracts female students of school age, which aligns with expectations for the region. As the data collection is still in its early stages, no significant trends have emerged and therefore, no specific follow-up actions have been taken at this point.

The accreditation team questioned how they make applicants aware that securing a training place in Northern Ireland (NI) after graduation is not guaranteed. The provider explained that the programme is clear from the outset. Information is provided in marketing materials, on the website, and during open day talks, where it is explicitly stated that there are limited Foundation Training Year (FTY) placements in NI. Students are also reminded of this once they are enrolled.

It was noted that discussions with the Northern Ireland Centre for Pharmacy Learning and Development (NICPLD) about increasing student numbers and the impact on MPharm and FTY placements have been ongoing. Monthly meetings with NICPLD ensure that everyone is aware of developments within universities and placement capacity across Northern Ireland. For the 2025/26 academic year, there is a cap on places, however, the FTY has remained within capacity. It is anticipated that the number of available placements may change for 2026/27, as this is part of ongoing UK-wide discussions about workforce needs. The programme offers up to 12 weeks of experiential learning, and student numbers at Ulster have increased, although they remain within the predicted figures for 2022. Additionally, a Dean of Equality, Diversity and Inclusion (EDI) has been appointed to oversee this area, although they sit outside the school.

The collection and analysis of EDI data are still a work in progress, and the team plans to review it in future assessments.

## 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**

**Standard met? Yes ☒ No ☐**

**The accreditation team agreed that all criteria in Standard 2 were met or would be met at the point of delivery.**

The documentation outlines that each year, the School of Pharmacy and Pharmaceutical Sciences collects anonymised student data from the university's Student Banner system, including performance indicators broken down by protected characteristics such as gender, ethnicity, disability, and age. This data is analysed by the Course Director to identify any disparities in student progression. If significant differences are found, an action plan is developed, which may include targeted interventions like additional support, revised teaching strategies, or extra resources. The plan is reviewed by the School's Subject and Learning and Teaching Committees, with ongoing implementation overseen by the Course Director and Academic Lead for Education. Since the Part 1 accreditation visit in March 2023, analyses and action plans for academic years 2022-23 and 2023-24 have been provided, reflecting the school's commitment to promoting equality, diversity, and inclusion within the MPharm programme.

The accreditation team reviewed the University's process for managing student performance, which involves centralised data capture and independent oversight. After each exam board, progression and award data are reviewed, with initial analysis shared with EDI leads. This is considered at the course level before being presented at the School Committees each semester.

In response to identified disparities related to disability, ethnicity, and religion, targeted interventions are planned. Some measures, such as inclusive OSCEs and allocated wellbeing sessions for students requiring reasonable adjustments, have already been implemented. The redesign of OSCEs 18 months ago has improved inclusivity for students needing adjustments. Additionally, learning materials and assessments have been adjusted to support students with specific needs. The school-level plan has led to further actions at the faculty level, with the document remaining live and subject to ongoing reviews and updates.

## Standard 3: Resources and capacity

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

**Standard met? Yes ☒ No ☐**

**The accreditation team agreed that all criteria in Standard 13 were met or would be met at the point of delivery.**

The accreditation team noted that the MPharm programme has seen an increase in student numbers from around 100 at the Part 1 event, to approximately 140-150. The provider explained that this increase is part of a long-term strategy, with current numbers considered sustainable and in line with other pharmacy schools. The staffing-to-student ratio (SSR) is regularly reviewed, and additional staff will be recruited if necessary. The university is committed to a balanced distribution of students across its campuses and does not anticipate further increases. Plans are in place to address potential challenges, such as the impact of growing student numbers on experiential learning, including options like adjusting the duration of placements if numbers rise.

To accommodate the increase in student numbers, the MPharm programme has invested in teaching spaces and resources. This includes the opening of the Lindsay Gracey Clinical Teaching Suite, which is equipped for clinical skills classes, and the expansion of the simulation Pharmacy space to accommodate larger class sizes. Additional teaching spaces in other campus blocks and a refurbished science laboratory ensure that practical teaching continues to meet the needs of the increased student population. Staffing has been expanded with new academic appointments to support clinical and scientific teaching. The course director, with support from year group leads, manages the administrative workload, including attendance tracking, extenuating circumstances, and course administration. External teams, such as NICPLD, NICEP, and Federation Experiential Leads (FELs), also contribute to supporting the programme.

The accreditation team enquired as to how the risk management process is managed. The provider explained that the risk register is reviewed regularly by the school's executive, with some risks being assessed every 6 to 12 months. Concerns regarding space due to increasing admissions are addressed through strategies to manage resources effectively. Any increase in preparatory students may affect the number of MPharm students, and the school plans to review and adapt learning provisions as needed.

It was noted that newly appointed staff undergo an induction process, which includes support for obtaining teaching qualifications where required. Staff are active researchers and given research time

to ensure teaching is informed by current research. Performance is reviewed over a three-year probation period, with set objectives and access to professional development resources through a learning management system (LMS). The staffing strategy, in light of increasing student numbers, is reviewed regularly at the school executive level to ensure adequate resources are in place to maintain the quality of the programme.

## Standard 4: Managing, developing and evaluating MPharm degrees

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

**Standard met? Yes ☒ No ☐**

**The accreditation team agreed that all criteria in Standard 4 were met or would be met at the point of delivery.**

The accreditation team noted that the School has established and comprehensive systems to support the MPharm programme, particularly in experiential and interprofessional learning (IPL). Collaborating with the Northern Ireland Centre for Pharmacy Learning and Development (NICPLD), the school ensures that placements across hospital, community, and General Practice settings align with course requirements and provide authentic learning experiences. Placement leads are appointed for each year to manage and coordinate placements, addressing any issues with behaviour or attendance in line with established procedures.

The accreditation team noted that the school has clear processes for managing absences during placements, ensuring that missed time is recorded and managed appropriately. A structured system is in place to address any concerns during placements, with an escalation pathway to resolve issues promptly. The Short Life Working Group regularly reviews and improves the placement system. The agreements and procedures related to placements, along with EPAs, are outlined in the experiential learning handbook.

The accreditation team questioned how IPL is managed at School and MPharm level. The provider explained that within IPL, the school coordinates activities at both the school and faculty levels. The school participates in faculty-level IPL committees, which organise interprofessional learning opportunities across various health-related programmes. An IPL event, scheduled for April 2025, will allow students to collaborate with peers from different healthcare disciplines. The All-Ireland Interprofessional Healthcare Challenge (AIPEC) is also part of the school's commitment to IPL, providing students with case-based learning opportunities that enhance their skills in communication, teamwork, and problem-solving.

The provider also gave an update on the delivery of the Interprofessional Learning (IPL) strategy. Engagement with stakeholders has been challenging, but progress is being made. Each school now has an IPL lead, and committees are working to develop a more cohesive approach. The strategy is still in initial stages, with plans for in-situ IPL activities involving pharmacy, nursing, and potentially medical students.

As part of the accreditation teams questions, the provider clarified that NICPLD manages the placement process, with constant communication between placement leads and NICPLD. The university is responsible for signing off on EPAs alongside students and placement supervisors. NICPLD provides training for placement supervisors, while placements and the university collaborate to create

EPAs. The student handbook clearly outlines accountability lines for students. The expanded geographic spread of placements has allowed for fair distribution, with positive student feedback on their EPA progress. Formal quality assurance is conducted through semesterly analyses from both students and placement supervisors.

## 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**

**Standard met? Yes ☒ No ☐**

**The accreditation team agreed that all criteria in Standard 5 were met or would be met at the point of delivery.**

The accreditation team questioned how continued stakeholder engagement was being managed. The provider explained that the school works closely with institutions such as Queen's University Belfast, NICPLD, the Department of Health, and various health service providers to develop and deliver experiential placements across hospital, community pharmacy, and General Practice settings. Ulster University and Queen's University collaborate on EPAs and the broader educational strategy. The School also participates in the Education Reform Implementation Group and the Pharmacy Workforce Review Steering Group to support legislative reforms and workforce development, ensuring alignment with the evolving roles of pharmacists. Additionally, the MPharm programme aligns with Advanced Pharmacy Practice provisions, in collaboration with NICPLD and clinical experts, to prepare students for advanced practice. This integrated approach ensures the MPharm programme meets the evolving needs of the pharmacy profession in Northern Ireland.

The accreditation team discussed the collaboration between organisations in delivering experiential placements across hospital, community pharmacy, and General Practice settings. This collaboration is supported by a working group that includes representatives from both the university and sector partners, meeting regularly to develop EPAs. These meetings involve evaluating the placements and aligning them with the learning objectives of each student. There is a process for reviewing placements after completion, with input from module leaders and feedback mechanisms to ensure continuous improvement. The working group reports to an advisory board that addresses both operational and strategic issues, ensuring the placements meet the required standards.

Regarding the progression of students' practical experience, the provider explained that students are exposed to a variety of patients across different placements, with the complexity of cases increasing over time to match students' abilities. Supervisors are encouraged to increase the complexity of cases based on students' progress in their EPAs. The process also considers not only the medical aspects of the cases but also communication and the learning environment. The course aims to reflect the diversity of patients that students may encounter in practice, incorporating scenarios with varied skin tones, learning needs, and backgrounds. Patient involvement groups, including carers and translators, provide feedback to improve the learning experience.

In terms of collaboration between NICPLD and placement year leads, the provider outlined a multi-dimensional approach, with all stakeholders involved in ensuring that students' learning experiences

progressively increase in complexity. EPAs are clearly mapped to ensure they are achievable and realistic, with a structured process in place for students who do not meet the required learning outcomes. If students fail to meet expectations, additional support is provided, and they may be required to retake modules. Failure to meet these requirements prevents progression to the next academic year.

## Standard 6: Assessment

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

**Standard met? Yes ☒ No ☐**

**The accreditation team agreed that all criteria in Standard 6 were met or would be met at the point of delivery.**

The accreditation team asked how the EPA tracker is used by NICPLD, students, and academic staff on a day-to-day basis, with a follow-up question on the total number of EPAs a student must complete. The provider explained that students are required to complete five core EPAs, which are broken down into 30 professional activities. There are both mandatory and additional EPAs, with a framework that identifies milestone EPAs to build student confidence. The number of EPAs varies by year and placement type. For example, in community pharmacy, students complete five EPAs over a week, while in Year 2 hospital placements, three EPAs are required. Students are informed of the required EPAs in advance, and they are not formally marked but undergo an audit to check if all necessary forms are signed and if the entrustment level is appropriate. In the event that a student does not meet the requirements during their placement, supplementary opportunities are offered to help them meet the necessary skills.

The provider was also asked about the impact of a red flag during an OSCE. They clarified that red flags are managed on a case-by-case basis, but any issues related to patient safety or illegality result in an automatic failure for that OSCE station. Students must pass all stations to progress to the next year, and those who fail a station must retake it in June or August.

When asked about the training of placement supervisors to assess students, the provider confirmed that they ensure supervisors are well-prepared to assess students' performance. Quality assurance processes are in place to maintain consistent placement assessments.

The accreditation team addressed how they have responded to concerns raised by the external examiner. They hold discussions as a course team to review issues and provide formal responses to the examiner's reports. For example, concerns about working in silos led to a revision of case studies, and a review of credit weighting regulations addressed feedback that previous credit assessments were too harsh. The provider acknowledged feedback regarding feedback on scripts, noting that improvements had been made but some areas still needed attention. In response to concerns about increased student numbers, the provider stated they are not planning to increase student numbers, and they have started using computers for invigilated assessments. Following restructuring, average

marks have slightly decreased, but the provider pointed out this change was part of their ongoing improvement.

## 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**

**Standard met? Yes ☒ No ☐**

**The accreditation team agreed that all criteria in Standard 7 were met or would be met at the point of delivery.**

It was noted that Ulster University provides comprehensive training for staff delivering the MPharm programme, including induction programmes, Technology-Enhanced Learning (TEL) training, and the mandatory Post Graduate Certificate in Higher Education Practice (PGCHEP) for new academic staff. Part-time tutors complete the First Steps to Teaching and Learning in HE programme for Associate Fellow status. External examiners are selected to ensure academic standards, and placement supervisors receive training through NICPLD and Queen's University Belfast.

Staff are supported through mentoring, Peer Supported Review (PSR), and professional development opportunities, including CPD and research seminars. Workload is managed through annual Developmental Appraisal Reviews, and staff are encouraged to engage in ongoing professional learning to meet the evolving needs of the MPharm programme.

The accreditation team asked how students are supported in selecting FTY placements on both NI and GB systems. The response highlighted a variety of activities, including advertising recruitment information, stakeholder engagement, and inviting speakers for NI FTY placements. For Scotland, materials are provided to help with advertising. In the third year, the Oriel application process is supported, and the student employability team is also involved. The provider reassured students about the Oriel process during the meeting.

Students are assigned an academic and personal tutor by the end of Week 1, with efforts made to maintain consistency across all four years where possible. Tutor details are sent via email and made available on Blackboard. Specific tutor sessions are scheduled for Weeks 3 and 8, although students can contact staff at any time. If a student misses a tutor session, they are offered an alternative meeting, though attendance remains voluntary. Additional engagement checkpoints are scheduled throughout the term.

Year 1 students articulated that they had not yet met their personal tutors. Upon triangulation with the provider, it was confirmed that tutor details were available on Blackboard and that allocations should have been made at the start of the programme.

## Teach out and transfer arrangements

**Teach out of programme to 2011 standards**

Ulster University has maintained a structured approach to supporting students enrolled in the MPharm programme under the 2011 standards, with no significant changes to the management plans for students who began their studies in 2020/21 or earlier. This ensures that students are given the necessary support to complete their studies on time while meeting current regulatory requirements. The university has developed regulations for undergraduate and integrated Masters degrees, with some approved departures to ensure continued alignment with GPhC standards. For students who need to repeat elements of Level 7 or take time off, the university follows standard resit policies, offering repeat attempts in line with university regulations to ensure all students can meet the required learning outcomes. The university's retake policies also ensure that students complete their degree within a seven-year timeframe, in line with NICPLD's requirement for students to start their Foundation Training Year (FTY) no later than two years after completing the MPharm degree. Communication with NICPLD and the Department of Health ensures that students affected by extenuating circumstances or repeats are treated fairly, with a case-by-case approach agreed upon to address these issues. Students nearing the completion of their MPharm degree are also provided with additional training to prepare them for the competitive FTY application process. Placement supervisors for students under the 2011 standards are reminded of the different expectations regarding prescribing competencies and provide tailored support to ensure alignment with both 2011 and 2021 learning outcomes. Overall, the programme continues to ensure fair access to career opportunities while maintaining support and monitoring for students on the 2011 standards.

**Transfer and upskilling of students who started between 2021/22 - 2023/24 academic year to the 2021 standards**

Ulster University has effectively managed the transition of students who started between the 2021/22 and 2023/24 academic years to the updated 2021 MPharm standards. The programme has ensured that these students meet the 2021 learning outcomes, progressing through the curriculum with increasing complexity. Students have received upskill training, particularly those transitioning from Level 6 in 2023/24 to Level 7, preparing them for the Foundation Training Year (FTY) with the required clinical, professional, and prescribing competencies. For students who needed to repeat elements of the course or took time out due to extenuating circumstances, the programme provided a transitional route incorporating both the 2011 and 2021 standards where applicable. Students under the 2011 standards, who are not eligible for independent prescribing, are still supported and given equal opportunities for FTY placements, particularly through 12-month community placements. The Course Director has maintained clear communication with both students and NICPLD to ensure fair treatment and support in applying for placements. Additionally, the Course Director updates regulatory bodies, such as the GPhC and PSNI, to ensure students are processed correctly for their professional development and FTY placements. Through consistent communication and collaboration, the programme has ensured all students, regardless of their progression status, are provided with the necessary support to succeed and enter the pharmacy workforce.

## Collaboration with the statutory education body and others

Since the Part 1 event, the MPharm programme at Ulster University has continued to work closely with statutory education bodies such as NICPLD and the Department of Health to deliver experiential learning (EL) and prepare students for the Foundation Training Year (FTY). The collaborative approach to EL has remained unchanged, with the MPharm Course Director and Placement Year Leads working

with NICPLD to ensure quality placements across community pharmacy, hospital pharmacy, and General Practice. The programme has also maintained its focus on reasonable adjustments, ensuring all students have access to appropriate training opportunities. The University has been actively involved in shaping the FTY application process, with Ulster students successfully participating in the NICPLD-run FTY application and interview process in 2024. A total of 189 students were placed in Northern Ireland for FTY, ensuring they receive comprehensive training in both community and hospital pharmacy settings. The University continues to work with NICPLD to streamline the transition between Level 7 MPharm and FTY, focusing on refining deferral policies to ensure fairness for students facing personal circumstances. Ongoing feedback from NICPLD is used to continuously improve the experiential learning programme, and NICPLD representatives also contribute to the Scientific and Advisory Board for the School of Pharmacy. This collaborative approach ensures the MPharm programme remains aligned with the healthcare sector's needs, providing students with the necessary skills for professional practice. The successful placement of 189 students in 2024 demonstrates the effectiveness of these ongoing efforts.

## 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). |
| **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 without remedial measures (condition/s). |

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