

Aston University independent prescribing course reaccreditation report, April 2023



Contents

Event summary and conclusions	1
Introduction	4
Role of the GPhC.....	4
Background.....	4
Documentation.....	4
The event.....	4
Declarations of interest	4
Schedule	4
Key findings - Part 1 - Learning outcomes	5
Domain: Person centred care (outcomes 1-6)	5
Domain: Professionalism (outcomes 7-15).....	5
Domain: Professional knowledge and skills (outcomes 16-26)	5
Domain: Collaboration (outcomes 27-32)	5
Key findings - Part 2 - Standards for pharmacist independent prescribing course providers	6
Standard 1: Selection and entry requirements	6
Standard 2: Equality, diversity and inclusion.....	7
Standard 3: Management, resources and capacity.....	8
Standard 4: Monitoring, review and evaluation	9
Standard 5: Course design and delivery	10
Standard 6: Learning in practice.....	11
Standard 7: Assessment.....	12
Standard 8: Support and the learning experience	13
Standard 9: Designated prescribing practitioners.....	14

Event summary and conclusions

Provider	Aston University
Course	Independent prescribing course
Event type	Reaccreditation
Event date	21 April 2023
Approval period	July 2023 - July 2026
Relevant standards	<u>Standards for pharmacist independent prescribers, January 2019, updated October 2022</u>
Outcome	The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that pharmacist independent prescribing course provided by Aston University should be reaccredited for a further period of three years.
Conditions	There were no conditions.
Standing conditions	The standing conditions of accreditation can be found here .
Recommendations	No recommendations were made.
Minor amendments	<ul style="list-style-type: none"> • The Application form does not ask if the applicant is registered (or in good standing) with any other healthcare regulators. The form should be amended to include this. • The Module specification states applicants must complete 12 days in-practice training. This should be amended to 90 hours. There are several references (handbooks, DPP information, website) to 12 days, but this should be amended to 90 hours. • The Module specification also still states that two years' experience is required before entry. This should be removed to reflect the updated standards. • Update the student handbook with information on student support and reasonable adjustments as described in the submission document commentary for criterion 2.4
Registrar decision	The Registrar is satisfied that Aston University has met the requirement of continued approval in accordance with Part 5 article 42 paragraph 4(a)(b) of the Pharmacy Order 2010, in line with the Standards for the education and training of pharmacist independent prescribers, January 2019, updated October 2022.

	The Registrar confirms that Aston University is approved to continue to offer the Independent prescribing course. The Registrar notes that there were no conditions associated with this event.
Maximum number of all students per cohort	50
Number of pharmacist students per cohort	50
Number of cohorts per academic year	2
Approved to use non-medical DPPs	Yes
Key contact (provider)	Moortooza Puttaroo, Senior Teaching Fellow and Programme Director Pharmacist Independent Prescribing programme
Provider representatives	<p>Joe Bush, Senior Lecturer and Head of Pharmacy</p> <p>Gagandeep Degun, Senior Teaching Fellow and Associate Head of Pharmacy (Education),</p> <p>Moortooza Puttaroo, Senior Teaching Fellow and Programme Director Pharmacist Independent Prescribing programme</p> <p>Debbie Kemp, Teaching Fellow and module coordinator Pharmacist Independent Prescribing Programme</p> <p>Jaime Miks, Teacher Practitioner and DPP lead Pharmacist Independent Prescribing Programme</p> <p>Ramandeep Sandhu, Lecturer in Clinical Pharmacy</p> <p>Mangalpreet Singh, Teaching Fellow</p>
Accreditation team	<p>Lyn Hanning (event Chair), Director of Practice Based Learning and Head of Pharmacy Practice, University of Bath</p> <p>Dr Fran Lloyd (team member - academic), Associate Postgraduate Pharmacy Dean, NICPLD, Queen's University Belfast</p> <p>Katie Carter (team member - lay), Consultant in Healthcare Regulation and Education</p>
GPhC representative	Alex Ralston, Quality Assurance Officer (Education), General Pharmaceutical Council
Rapporteur	Rakesh Bhundia, Quality Assurance Officer (Education), General Pharmaceutical Council

Observer

Kelly Veasey (Observer) Policy Officer (Education), General Pharmaceutical Council

Introduction

Role of the GPhC

The General Pharmaceutical Council (GPhC) is the statutory regulator for pharmacists and pharmacy technicians and is the accrediting body for pharmacy education in Great Britain. The accreditation process is based on the GPhC's standards for the education and training of pharmacist independent prescribers, January 2019, updated October 2022.

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

The powers and obligations of the GPhC in relation to the accreditation of pharmacy education are legislated in the Pharmacy Order 2010. For more information, visit:

<http://www.legislation.gov.uk/ukxi/2010/231/contents/made>

Background

Aston University ('the provider') was initially accredited by the GPhC in 2014 to provide a course to train pharmacist independent prescribers, for a period of 3 years, and was then reaccredited in 2017. At the last reaccreditation event in 2020, the course was reaccredited for a further three years. There were no conditions or recommendations. In line with the standards for the education and training of pharmacist independent prescribers January 2019, updated October 2022, an event was scheduled on 21 April 2023 to review the course's suitability for reaccreditation.

Documentation

Prior to the event, the provider submitted documentation to the GPhC in line with the agreed timescales. The documentation was reviewed by the accreditation team, and it was deemed to be satisfactory to provide a basis for discussion.

The event

The reaccreditation event was held remotely by videoconference on 21 April 2023 and comprised of several meetings between the GPhC accreditation team and representatives of Aston University prescribing course. Students who were currently undertaking the course, or who had completed it in the last three years, contributed to the event by completing a qualitative survey, responses to which were reviewed by the GPhC accreditation team.

Declarations of interest

There were no declarations of interest.

Schedule

Meeting	Time
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Private meeting of accreditation team and GPhC representatives, including break	09:30 - 11:00
Meeting with course provider representatives	11:00 - 13:00
Lunch	13:00 - 14:00
Learning outcomes testing session	14:00 - 14:30
Private meeting of the accreditation team and GPhC representatives	14:30 - 15:30
Deliver outcome to the provider	15:30 - 15:45

Key findings - Part 1 - Learning outcomes

The team reviewed all 32 learning outcomes relating to the independent prescribing course. To gain additional assurance the team also tested a sample of **six** learning outcomes during the event was satisfied that **all 32 learning outcomes continue to be met** to a level as required by the GPhC standards.

The following learning outcomes were tested at the event: **5, 10, 19, 22, 23, 28.**

Domain: Person centred care (outcomes 1-6)

Learning outcomes met/will be met? Yes No

Domain: Professionalism (outcomes 7-15)

Learning outcomes met/will be met? Yes No

Domain: Professional knowledge and skills (outcomes 16-26)

Learning outcomes met/will be met? Yes No

Domain: Collaboration (outcomes 27-32)

Learning outcomes met/will be met? Yes No

Key findings - Part 2 - Standards for pharmacist independent prescribing course providers

Standard 1: Selection and entry requirements

Standard met/will be met? Yes No

The team was satisfied that all six criteria relating to the selection and entry requirements continue to be met.

The Aston University website provides an overview of the Independent Prescribing (IP) course for Pharmacists. The overview contains detailed information such as the General Pharmaceutical Council (GPhC) and Aston University eligibility criteria that potential applicants must consider before making an informed decision before application. It was noted that the guidance regarding eligibility criteria has been updated to reflect the recent changes made by the GPhC to the standards for the education and training of Independent Prescribers in October 2022.

All pharmacists who are applying to Aston University for the Independent Prescribing Module are required to complete two forms: the online Aston University postgraduate application form for all Students and the Independent Pharmacist Prescribing Trainee Application Form. The accreditation team ('the team') noted that the application form does not ask if the applicant is registered (or in good standing) with any other healthcare regulators. The form should be amended to include this. The team also noted that there were a number of references in the documentation that needed to be updated, such as reflecting that applicants must complete 90 hours of in practice training and removing the requirement for applicants to have two years' experience before entry; the provider was asked to amend and update the relevant documentation.

All applicants' details are forwarded by the dedicated postgraduate admissions team to the Programme Director for consideration. Application details are checked by the Programme Director and/or Module Co-ordinator/Associate Head of Pharmacy (Education) to ensure that the applicant meets all the criteria listed above. The applicant's suitability for the programme is considered in a fair and transparent manner and all University processes are adhered to in line with legislation on equality and human rights.

Offers will be made by the Programme Director if deemed suitable and all selection criteria has been met. Any concerns, discrepancies or missing information identified from the written application form will be addressed by one or all the following:

- Telephone/Teams interview by the Programme Director
- Offer of a face-to-face interview
- Referral to the Programme Medical Director
- Rejection of application.

Accurate records are maintained by the Postgraduate Admissions Team and all information on the University MAP (My Aston Portal) system. Any interviews conducted are recorded on the MAP system by the Programme Director, detailing additional information given by the candidate. All decisions are recorded on MAP and rationale given for the acceptance or rejection.

As part of the submission document, it was noted that places are offered on a first come, first served basis. The team asked for clarification around specific places for Health Education England (HEE) funded places, employer funded places and self-funded places, as this was not clear on the website. The provider advised that essentially, they run a parallel process to keep the HEE, employer funded, and self-funded places separate. 30 places are ring-fenced for HEE funded places and 20 places are ring-fenced for either employer funded or self-funded placements per cohort. The provider confirmed that the size of the cohort does not exceed 50 students in total and confirmed that the website will be updated to reflect this.

Standard 2: Equality, diversity and inclusion

Standard met/will be met? Yes No

The team was satisfied that all five criteria relating to the equality, diversity and inclusion continue to be met.

As part of the submission document, it was noted that Equality and Diversity Policies and Procedures are embedded within every aspect of the Independent Prescribing course delivery and design including the admissions process, reasonable adjustments for trainees with disabilities, facilitating trainees due to religious observances and accommodating trainees with carer roles. It was noted that the provider aims to ensure through its admissions policies for students and its recruitment and selection processes for staff, that it encourages applications from all groups represented in the wider community at a local, national, and international level. In addition, it has a programme of equality and diversity training including unconscious bias which all University staff are required to complete. This is delivered online, and completion is monitored at school level. Furthermore, all new staff are required to complete the University induction program which includes equality and diversity training and unconscious bias. Staff engagement is confirmed during the annual performance review cycle to ensure all staff are appropriately trained.

It was noted that Aston University received an Institutional Athena Swan Silver Award in 2018 and is working towards achieving Gold in 2024. The College of Health and Life Sciences holds a departmental Athena Swan Bronze Award and is currently pursuing for a Silver Award.

The provider advised that the current Prescribing Programme has input from a diverse range of staff and students through formal planning sessions, staff-student consultative committees, programme approval systems (both in the Pharmacy School and wider University oversight) and equality and diversity is considered in programme redesign, design and delivery. This input and ethos will be continued throughout each iteration of the programme.

The team asked the provider for further information regarding processes for reasonable adjustments in relation to the University and workplace, the provider explained that they encourage students to be open and honest with them and their DPP to ensure that any reasonable adjustments can be addressed, whilst noting that learning outcomes cannot be modified.

Standard 3: Management, resources and capacity

Standard met/will be met? Yes No

The team was satisfied that all six criteria relating to the management, resources and capacity continue to be met.

The team was satisfied that those involved in managing and delivering the course understand their roles, are suitably qualified and experienced, and are supported to carry out their work effectively including clear lines of accountability. The roles and responsibilities of the key stakeholders in relation to this programme are agreed with all parties prior to commencing the programme and during the programme itself. The roles and responsibilities of the DPP, the module lead and module team and the trainee are defined in the trainee module handbook and the DPP handbook.

As part of the submission document, it was noted in preparation for their first session with their DPP, trainee prescribing students have a facilitated session with their DPP, where they engage in self-assessment of current skills and identification of their learning and development needs. The outcome of this is an action plan in the form a Learning Contract to support planning a learning programme which will provide the opportunity for the trainee prescribing student to meet their learning objectives and gain competency in prescribing. This must be completed within four weeks of commencing the programme and be signed by the DPP. This forms part of the tripartite agreement between the student, Personal Academic Tutor (PAT) and DPP supporting pharmacists to meet the learning outcomes and establish lines of responsibility, which is consistent with the Teaching, Learning Strategy and Assessment Strategy for the Independent Prescribing Programme. The Learning contract and self-assessment audit are held within the PebblePad reflective portfolio and reviewed at the midway point and any supplementary interviews with their DPP and PAT to ensure adequate progression is being made. The PAT will contact both the DPP and trainee at points throughout the programme for update on progress and the learning contract utilised as an active document to measure development.

As part of the submitted document, it was noted that resources are sufficient to deliver two cohorts per academic year of up to a maximum of 50 pharmacist students per cohort. The team was told that there was a matrix staffing approach in the school of Pharmacy and that there was an expectation that staff would teach across the various courses. The provider highlighted that there were currently 13 members of the school who were IP prescribers and that funding had been agreed to support a further 10 members of staff to qualify as IPs. The provider emphasised that the College Dean was very supportive of Pharmacy, especially independent prescribing. It was also noted that there was sufficient administrative support for the course at both school and college level.

Physical resources within Aston Pharmacy School and in the wider university are sufficient to accommodate the planned number of students with the exclusive use of the clinical facilities within the Wilson Pharmacy Suite. This modern clinical simulation suite houses all the diagnostic equipment required for teaching and assessing clinical and diagnostic skills and has enough additional equipment to loan to students for the duration of the programme. State-of-the-art bedded areas, consultation rooms and simulation mannequins are utilised in teaching and assessment. Access to all University learning resources are available to all prescribing students. The team asked about how risks associated with the programme are managed. The provider explained that there were School and College level risk registers, as well as a committee structure in place for all programmes. The IP course reports to a

Programme Committee that reports to a School level committee. All risks are reported at school level, and then raised to college level.

Prescribing students are supported by an Information Specialist who is based within the Pharmacy Information Services Team within Library Services who provides an induction during the Fundamentals of Prescribing online component as well as a session on Academic referencing and writing in a face-to-face session. A wealth of support is available both onsite and online and including access to e-journals, e-books, British Pharmacopoeia Online and the full Medicines Complete online package, including BNF, Martindale: The Complete Drug Reference, Pharmaceutical Excipients and Stockley's Drug Interactions.

The Learning Development Centre (LDC) in the library offers Study Skills workshops including a series specifically for international students, study guides, a Maths Centre, Student Writing Mentors, various other learning resources, email-based tutorial support and support for members of staff which prescribing students may access. It was noted that all Aston staff have access to support, personal and professional development. Organisational Development at Aston University is a planned, systematic approach to improving organisational effectiveness and health – one that aligns strategy, people, and processes. Support for staff also includes access to taught programmes leading to Fellowship and higher of the Higher Educational Academy, CPD sessions for individuals and teams of staff to enhance the quality of learning and teaching practice, and a supportive community that encourages research into learning and teaching practice.

Standard 4: Monitoring, review and evaluation

Standard met/will be met? Yes No

The team was satisfied that all six criteria relating to the monitoring, review and evaluation continue to be met.

As part of the documentation, it was noted that the University Annual Review and Monitoring procedures require academic and support staff to consider the effectiveness of modules and programmes on an ongoing basis and to report the outcomes annually. The Programme Director is responsible for completing an action plan at each review point in consultation with the programme delivery team, students, and other stakeholders. The Programme Director is also responsible for compiling the annual programme monitoring report which includes feedback from students via formal and informal communication channels and requires analysis of external examiners' feedback. The resulting report and action plan are submitted to the Associate Deans who then reports outcomes to the University Learning and Teaching Committee for scrutiny.

In addition to the University wide student's evaluation, for each cohort, students are invited to complete a module evaluation feedback form anonymously online via the Virtual Learning Environment (VLE), Blackboard. The data is also available to the External Examiner. Quantitative and qualitative data from students' evaluations for the last two cohorts are presented in the Module Evaluation. This is then reviewed by the Programme Director and any adjustments required are implemented in the course delivery. The performance of students in the assessment for each cohort is analysed and compared with previous cohorts and an action plan produced. This is also fed back into the annual programme monitoring activity. The Prescribing Programme Core and Management Team conduct monthly meetings to review and evaluate any issues identified within the delivery of the programme, PAT

arrangements, DPP arrangements, student progress, practice environments, assessment planning, programme annual review and reaccreditation considerations.

The Student-Staff Committee (SSC) is another formal programme-level committee that provides an official and recognised forum for the consideration of student feedback from student representatives. The team was told that student representatives to the SSC are nominated at the beginning of the course and that they hold one meeting for each cohort and that feedback from these meetings also feed into changes to the course at programme and school level.

The External Examiner for the Pharmacist Independent Prescribing Programme is asked to look at each assignment and ensure that it is set at the right level. The External Examiner also reviews all marks and consider the fairness of the marking and moderation and provides quality assurance that assessment processes have been conducted according to university requirements. As part of their role, the External Examiner also reviews OSCE plus scenarios and mark schemes prior to the assessment. External Examiner feedback about the assessment is considered by the Programme Director and any changes made as necessary, prior to roll out with the students. The External Examiner is required to comment on trainee performance within the module examination board report, the report written by the Programme Director which accompanies the marksheets considered by the Module Assessment Board.

It was noted that current advances in practice are reflected in the Pharmacist Independent Prescribing programme development through the use of practising prescribers on the programme team, who are involved in updating programme materials, writing assignments and OSCE plus scenarios for both formative and summative assessments. As an example, COVID-19 related teaching materials have been introduced to the Public Health online component and in Consultation Skills with regards to the development of remote consulting since the pandemic.

The team noted that assessment changes submitted to the College Quality Subcommittee have now been approved.

Standard 5: Course design and delivery

Standard met/will be met? Yes No

The team was satisfied that all ten criteria relating to the course design and delivery continue to be met.

The team was satisfied that the course design and delivery was appropriate and would support pharmacists to achieve the learning outcomes. There are opportunities for stakeholders to feedback and feed into the continuous development of the course. Engagement activity with several stakeholders was undertaken in the redesign of the programme to meet the new standards. The use of patients, carers and service users is central to the approach to postgraduate teaching and assessment for Pharmacy students. Throughout the programme students will encounter service users in both University and during in-practice learning.

As part of the submission document, it was noted that the provider has a Teaching and Learning strategy that is clear and achievable and details the principles of adult learning for Independent Prescribing students. Students' background knowledge and experience will be established via their own reflective self-audit as demonstrated in their Personal Development Plan and Learning Contract. This helps them to map where they currently feel they are in relation to the GPhC learning outcomes for the programme

and helps them develop a plan for learning. This acknowledges pre-existing knowledge, skills and practice and instigates a plan to build upon to meet the competence as a prescriber. The team was satisfied that the provider will ensure the reflective self-audit is reviewed and acted upon in conjunction with PATs and DPPs.

It was noted that the Module Co-ordinator and members of the Core Prescribing Team are experienced Pharmacy professionals and Pharmacist Independent Prescribers. It was also noted that some members of staff who are involved in the delivery of the programme on an occasional basis are also annotated Pharmacist Independent Prescribers. Experts from Aston Pharmacy School also contribute to the programme in their area of Pharmacy practice.

In 2020, there was input from stakeholders requesting more online distance learning and a reduction in contact days, in line with other programmes nationally. This was drafted and designed and reviewed by stakeholders who positively recommended the modifications of this proposed programme to meet the new standards. In line with the changes to the standards of initial education and training of pharmacists, and feedback from stakeholders, this iteration of the Independent Prescribing programme will include:

Further clinical skills teaching to include:

- Abdominal examination
- Cranial nerves examination
- Musculoskeletal (MSK) examination

It was also noted that a competency assessment, the Oral Clinical Examination (OCE), has been added which enables students to demonstrate the clinical skills taught on course. The assessment will be weighted as pass/fail and students will be asked to conduct a range of clinical skills on a simulated patient under time restrictions. To facilitate the above, there will be an increase in face-to-face study days from 5 study days to 6 study days. The OCE will be sat by students on study day 6. Current study day 4 is conducted online synchronously, where the sessions will be arranged as live webinars in the evenings for students to engage with remotely. This will allow the use of study day 4 for more practice clinical skills teaching.

The provider confirmed that Fitness to Practise (FtP) regulations apply to the stand-alone 45 credit Pharmacist Independent Prescribing module and 60 credit PG Certificate in Clinically Enhanced Independent Prescribing.

Standard 6: Learning in practice

Standard met/will be met? Yes No

The team was satisfied that all five criteria relating to the learning in practice continue to be met.

As part of the submission document, it was noted that students must complete 90 hours of in-practice learning with a suitably qualified Designated Prescribing Practitioner (DPP). The students should spend 45 hours with the DPP, with the remaining 45 hours spent with other prescribers to pass the programme. In signing the application form, the applicants, DPPs, line managers and Non-Medical

Prescribing (NMP) leads agree to the terms and conditions laid out that in-practice learning time must be permitted and supervision is guaranteed for the 90 hours of in-practice learning requirement. The team asked the provider how this works in practice and how this will be monitored. The provider assured the team that they wanted students to get a variety of experience and work with other suitable practitioners and that this is monitored through a log sheet which details both the hours and who the student has worked with. The log is submitted at formal checkpoints and the PAT will check progress, the PebblePad portfolio, hours completed towards the in-practice learning and address any concerns and answer any queries.

The DPP's work status, clinical experience, teaching and supervision experience, scope of practice, and professional registration are checked by the Programme Director. The DPP's registration is checked with the appropriate regulatory body via online registration facilities to check their date of registration, prescribing status (if relevant) and for any restrictions on practice which may affect their appropriateness in supervising a prescribing student. Eligibility will be checked in accordance with GPhC Standard 9 and with the RPS Competency Framework for Designated Prescribing Practitioners (RPS, 2019) of applicants' characteristics/skills/teaching experience, the ability to deliver the role and the learning environment and related governance.

The Programme Director will liaise with the Programme Medical Director if there are any issues regarding the status of a DPP or the nominated placement setting. Checks will ensure that the clinical setting is appropriate and relevant for the potential student, with access to patients and adequate supervision. The Programme Director may contact the DPP for further clarification or information if required. Upon additional questioning, the team was assured that the provider assesses the additional written information provided by the DPPs in their application form and that the provider follows up with DPPs when further information is required.

Standard 7: Assessment

Standard met/will be met? Yes No

The team was satisfied all eleven criteria relating to the assessment continue to be met.

As part of the submission document, it was noted that the Aston Prescribing Team have devised an assessment strategy which sets out the methods that will be utilised to assess both the GPhC Learning Outcomes and the Programme Outcomes. The Assessment Strategy is used by the prescribing team as the teaching providers, as well as the DPPs in the in-practice learning environment. The assessment strategy is aligned with the University regulations, Aston University Assessment policies, regulatory body requirements and the national qualifications framework.

There is a robust quality assurance of the assessments for the programme through teamwide design, review and validation, marking, internal moderation and external moderation from the External Examiner.

The team asked the provider to comment on their rationale for the introduction of the OCE and how this differs from the OSCE+. The provider explained that the OCE assessment was brought in because there has been limited opportunity in the last few years to assess students' physical ability to perform skills. The provider explained that they have used the OCE in the enhanced clinical course and that this has been received well by pharmacist independent prescribers in training; it also allows the provider to check a larger number of skills in a small, contained environment. Assessors are all trained and working in practice.

It was noted that the assessment strategy illustrates how each assessment (both formative and summative assessments) are aligned to Miller's Triangle of clinical competence. The Programme Team have devised the assessment components in the programme by using a mix of formative and summative assessments to achieve the required Miller's level for the learning outcomes. The authenticity of the assessments assisting in the development of the safe, competent, effective Independent Prescribers is demonstrated in all assessments, ensuring the students link practice with learning. This is especially demonstrated in the OSCE+, Case-based Discussion (CBD) and PebblePad reflective portfolio components. The assessment criteria for all assessments note that there is an automatic fail where something that indicated unsafe practice would then result in patient harm. This is clearly specified in all student and DPP documentation and reiterated at the induction and DPP training respectively.

Continuous feedback on how the trainee can improve their performance is provided by the DPP via observation of practice, discussions about patient cases and achievement of competencies throughout the period of learning in practice. The Learning Agreement and Midway Progress Reviews provide the DPP with a formal mechanism to provide trainees with ongoing feedback. These comments are also reviewed by the module lead. The final sign-off, which includes comments from the DPP, also provide a mechanism for feedback on the overall performance of the trainee during the period of supervised practice.

Standard 8: Support and the learning experience

Standard met/will be met? Yes No

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

As part of the submission document, it was noted that the induction for students is held on face-to-face day 1 of the programme. This will cover meeting the staff, a short campus tour, viewing the clinical suite, an overview of the programme, the requirements of the assessment, the portfolio, the services available as a student at Aston, library induction, the regulations, equipment loan. Students will meet all the Core and Management Prescribing Team and be allocated their PAT. All members of the Prescribing Management and Core Team are required to act in the role of the PAT for prescribing students to provide pastoral and academic support during the programme.

It was noted that the PAT will ensure effective supervision in practice is being carried out with the DPP and that progression towards the competencies made. At the initial, midway and final review point the PAT contacts both DPP and student. Review of the PebblePad portfolio is carried out at these points and additionally at the submission of the Clinical Management Plans (CMP) and CBD formative work, which are quality assured by the PAT. The PAT will visit practice environments as required for support

and assistance with supervision for both student and DPP and is contactable via telephone, email, video calling or in person. The team were told that these visits are rare but can be arranged if required.

Standard 9: Designated prescribing practitioners

Standard met/will be met? Yes No

The team was satisfied that all five criteria relating to the designated prescribing practitioners continue to be met.

As part of the submission document, it was noted that the DPP declaration form requires the DPP to self-declare that they meet the necessary criteria to act as a DPP. The provider disseminates information on the criteria for a DPP and their roles and responsibilities. The team asked how the provider assures that the DPP is competent to assess patient-facing clinic and diagnostic skills. The provider explained that the application form for DPPs requires the DPP to demonstrate that they possess each of the required attributes to act as DPP. Applications are forwarded by postgraduate admissions to the Programme Director for consideration. The DPP arrangements are checked by the Programme Director and/or Module Coordinator to ensure that the DPP's work status, clinical experience, teaching and supervision experience, scope of practice, and professional registration meets the minimum criteria.

It was noted that the Programme Director will liaise with the programme Medical Director if there are any issues regarding the status of a DPP or the nominated placement setting. Checks will ensure that the clinical setting is appropriate and relevant for the potential student, with access to patients and adequate supervision. The Programme Director may contact the DPP for further clarification or information if required.

The DPP Handbook details all the information DPPs will require for the assuming the role of the DPP. This is sent to DPPs electronically once a Trainee Prescribing Student's application has been accepted. Access to online resources is given to DPPs and they are made aware of the forthcoming welcome training and update sessions available to them. DPPs are required to confirm their agreement to attending one training session per year and complete the equality and diversity training on online.

It was noted that the provider is in the process of organising some additional training for current and prospective DPPs with a particular focus on supervision in practice and teaching and learning.

Feedback on training is gained from DPPs informally throughout the programme, after training events and formally via the 'DPP Feedback Form' at the end of each cohort and reviewed and adaptations made if necessary for the next cohort. Feedback is given by the PAT throughout the programme, students also provide feedback at the end of the programme to evaluate their supervision experience. The provider advised that feedback is provided at cohort level to all DPPs and individually as appropriate.

