General Pharmaceutical Council

University of Birmingham independent prescribing course reaccreditation event report, December 2021

Contents

Event summary and conclusions	
Provider	University of Birmingham
Course	Independent prescribing course
Event type	Reaccreditation
Event date	3 December 2021
Approval period	February 2022 - February 2025
Relevant standards	GPhC education and training standards for pharmacist independent prescribers, January 2019
Outcome	Approval The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that pharmacist independent prescribing course provided by the University of Birmingham 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	• Application form p.1 states Designated Medical Practitioner (DMP) and again p.18 refers to Designated Medical Practitioner. This should be changed to reflect Designated Prescribing Practitioners. • Application form, Section 3. p.6 states 'Do you have at least 2 years or equivalent patient focused post qualification experience?' GPhC does not state 'equivalent' and should be removed. • Application form does not appear to allow for registration with more than one healthcare regulator. This should be added. • Appendix 14, p.77 Final verification of outcomes and competency only provides an option for a DPP to list "GMC number". This should be amended to include non-medical DPPs. • Appendices 4, 5 & 6: Form for proposing or modifying modules, refers to General Pharmaceutical Society instead of Council. However, Appendix 3 (approval form) does state Council.
Registrar decision	Following the event, the Registrar of the GPhC accepted the accreditation team's recommendation and approved the reaccreditation of the programme for a further period of three years.

Maximum number of all students per cohort	25
Number of pharmacist students per cohort	20
Number of cohorts per academic year	3
Approved to use non-medical DPPs	Yes
Key contact (provider)	Parbir Jagpal, Director of Postgraduate Studies, School of Pharmacy
Provider representatives	Professor John Marriott, Head of School of Pharmacy Parbir Jagpal, Director of Postgraduate Studies, School of Pharmacy Dr Anthony Cox, Head of Education, School of Pharmacy Sarah Baig, Programme Director, Practice Certificate in Independent Prescribing, School of Pharmacy Jonathan Ward: Senior Teaching Fellow in Clinical Communication Louise Beesley, Programme Director MSc Advanced Clinical Practice, NMC route lead Independent prescribing Course, School of Nursing Jason Pritchard, Deputy Lead MSc Advanced Clinical Practice, NMC route lead Independent prescribing Course, School of Nursing Megan Atterbury, Deputy Head of Quality Assurance, College of Medical and Dental Sciences
Accreditation team	Susan Bradford (event Chair), Adjudicator, Social Work England Dr Brian Addison, Academic Strategic Lead in Clinical Practice & MPharm Course Leader, Robert Gordon University Dr Fran Lloyd, Associate Postgraduate Pharmacy Dean, NICPLD, Queen's University Belfast
GPhC representative	Alex Dourish, Quality Assurance Officer, GPhC
Rapporteur	Chris McKendrick, Quality Assurance Officer, GPhC

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.

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/uksi/2010/231/contents/made

Background

The University of Birmingham was first accredited by the GPhC in December 2015 to provide a course to train pharmacist independent prescribers, for a period of three years. Accreditation was subject to validation by the University, which was subsequently achieved, and to one condition. This was that the University must ensure that, in any assessment, a failure to identify a serious problem or the production of an answer which would cause the patient harm, will result in an overall failure of the programme and that this is communicated clearly to pharmacists and DMPs in all course documentation. The University provided satisfactory evidence to the GPhC that this condition had been met. The first year of accreditation of an independent prescribing programme is provisional and subject to a satisfactory monitoring event after completion of the first cohort of students. A monitoring event therefore took place in December 2016 at which accreditation was confirmed. There were no conditions or recommendations arising from the monitoring event.

A reaccreditation event was scheduled on 31 October 2018 to review the programme's suitability for reaccreditation. This was achieved with no conditions or recommendations.

In line with the GPhC's process for reaccreditation of independent prescribing courses, an event was scheduled for 3 December 2021 which is the basis of this report.

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 3 December 2021 and comprised of two meetings between the GPhC accreditation team and representatives of the University of

Birmingham 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
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

As part of the reaccreditation process, the team reviewed all 32 learning outcomes relating to the independent prescribing course. To gain additional assurance the team also tested a sample of **5** learning outcomes during a separate meeting with the provider and was satisfied that **all 32 learning outcomes will be met** to a level as required by the GPhC standards.
The following learning outcomes were tested at the event: **2, 13, 17, 18 and 23**

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 will be met.

As part of the submission documentation, it was noted that initially, applicants apply via the University of Birmingham (UoB) admissions portal and are sent a supplementary application form if initial screening indicates a suitable application. Registration status is checked when reviewing applications to ensure registration with the General Pharmaceutical Council (GPhC) or the Pharmaceutical Society of Northern Ireland (PSNI), to ensure that applicants are in good standing with the GPhC or PSNI. The accreditation team questioned the process if applicants have restrictions on practice imposed by their regulator. The course team confirmed that if there are any restrictions on practice, they wouldn't be permitted onto the course and that all checks must be passed before acceptance onto the course. Any applicant rejected for the course would be followed up by the course team with a clear explanation as to why.

Upon review of the supplementary application form, applicants are contacted for a telephone interview to discuss their application and the course team complete an application checklist as part of this process. This includes confirmation of the required two years' appropriate patient-orientated experience since registration in the UK, the applicant's date of registration, work history, and clinical experience.

The supplementary application form includes the initial nomination of a Designated Prescribing Practitioner (DPP) who must confirm that they meet the requirement of the role of the DPP using the Royal Pharmaceutical Society Designated Prescribing Practitioner Competency Framework as guidance. The registration and good standing status of the DPP is checked with their professional regulator. The suitability to supervise the applicant is assessed via a telephone discussion (interview) using the Designated Prescribing Practitioner Admissions Checklist. If they are deemed suitable, they will be invited to an introductory training session and provided with access to DPP resources via a workbook in Pebblepad, the Practice Supervision and Assessment Handbook, and Portfolio Handbook. All applications are reviewed and screened by the programme lead and deputy programme lead.

Pharmacist applicants are advised that they require a minimum of 2 years post-registration patient orientated experience in the UK, in an identified area of clinical practice in which they intend to prescribe post qualification. Additionally, they are required to complete a health declaration form, immunisation form, and provide evidence of a satisfactory Disclosure and Barring Service (DBS) check.

The accreditation team questioned if there had been any applicant rejections to date. The course team elaborated that there had been no formal rejections to date, however a recent pharmacist application had made some declarations in relation to their DBS check. This was followed up by the course team, in consultation with the admissions team, and the decision was that the applicant could

be admitted. A further example was provided, although not a rejection, there was one applicant where the DPP was related, and their application was suspended to the next cohort until a new DPP could be sourced. This was highlighted as part of the admission checks as the home address, references, and places of work were the same. There are formal processes in place should there be any rejections and feedback would be given to the applicant.

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 will be met. X

As part of the submission documentation, it was noted that the principles of equality and diversity are embedded in, and promoted throughout, course design and delivery. This includes diverse case studies with a range of patient, ethical and communications scenarios inclusive of religious and cultural differences, disability, mental capacity, challenging behaviour, poor engagement, and drug-seeking behaviour. Assessment material, questions and OSCE stations take account of diversity during development.

Student equality and diversity data is collected on registration and reviewed to inform design and delivery of the course in terms of diversity of teaching, learning and assessment material. The university uses 'Tableau' software to collate and analyse student performance and progression. This provides some information around disability, ethnicity, gender, religion & belief, sexual orientation of students which enables some course review. The course is recorded as a 'pass', 'fail' so TABLEAU does not record performance or attainment gaps. Student performance and progression is reviewed at course level to identify and address any issues.

The accreditation team questioned how the course team have analysed and used equality and diversity data in designing the course and the overall learning experience. The course team explained that UoB as an institution collects and processes the data. However, at a course level and as a team, progress is tracked against EDI characteristics allowing a snapshot of any trends or issues to be identified. This has allowed the course team to pick up on low scores and consequently have been able to provide support to students as appropriate. Religious groups, ethnicity and sex characteristics are embedded in case studies along with other EDI characteristics and IP course representation is embedded as part of the university wide EDI group.

It was noted by the accreditation team that UoB policies and procedures including reasonable adjustments, extenuating circumstances and leave of absence are also reviewed at course level to ensure students are not disadvantaged and are treated fairly. Reasonable adjustments during assessments can include sitting in a separate quiet space, use of different font sizes and colours of text or paper, and additional reading time or note-taking time for OSCE stations. Regular meetings with the course personal tutors and DPPs, including mandatory tripartite meetings, provide an opportunity for all parties to work together to support implementation of reasonable adjustments to meet the specific needs of individual pharmacists during teaching and supervised time in practice.

The accreditation team questioned how pharmacists on the course understand their legal obligations in relation to equality and human rights. The course team explained that this is included throughout the course in taught materials and case studies, problem-based learning in clinical decision making,

including ethical dilemmas, so the right clinical decision can be made in practice. This is assessed in module 1 case presentations, module 2 OSCEs and significant event analysis within clinical management plans and in the structured reflective portfolio. Students are observed and assessed by their DPP for at least one case in practice which is included in the portfolio. It was noted that the course team have restructured the course so that some theory-based elements that were traditionally delivered by face-to-face teaching will now be delivered online. In light of the Covid-19 pandemic and changes to the course structure, the course team believe that with theory elements now delivered online, the taught sessions can include more case studies, and these enable students to develop in a more holistic way. It was noted that with transferring assessments to online during the Covid-19 pandemic, the course team have opted to continue with online exams as part of this reaccreditation event. The course team explained that this model of exams is helpful for marking and has improved accessibility for students. Online assessments are screened for plagiarism and cheating automatically in line with UoB regulations.

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 will be met.

As part of the submission documentation, it was noted that the course is led by the Programme Director who has overall responsibility for all aspects of the course. They are supported by the Director of Postgraduate Studies (also the Deputy Programme Director), the Head of Education and the Head of the School of Pharmacy. The majority of course tutors are practising independent prescribers so are appropriately qualified and experienced professionals. The course currently has a total FTE of 2.7 with a staff:student ratio of 1:18 (50 students annually). Staff from other professions including nurses and physiotherapy input to the course in addition to visiting lecturers delivering sessions (e.g. ophthalmologist, advanced clinical practitioners, medical doctors and physician associates). The accreditation team noted that the course is accredited for 3 cohorts at 25 students per academic year, comprising of up to 20 pharmacists per cohort. However, since the last re-accreditation event in October 28 to date, the course has delivered 2 x 25 cohorts per academic year (September and March). The course team explained that there is potential for a third cohort in January pending commissioning approval. The accreditation team questioned if the resource and facilities would be sufficient for an extra cohort per year, proposed for January 2022. The course team explained that the cohort will be complemented by an increase in staffing numbers and that 4 new members of staff, who are employed on the MPharm programme, are qualified independent prescribers who will also support the course. Regular meetings are held to discuss the course in addition to formal annual programme management committee meetings. Staff discuss resource and workload issues together with any training and support needs which are reviewed and addressed.

The accreditation team noted in terms of course management, that the Programme Management Committee meets at least annually with feedback provided to the Pharmacy Executive. The course team have a varied range of clinical expertise in education and clinical practice across sectors to support delivery of the course. The accreditation team were satisfied with the clear management plan for the course. The accreditation team enquired as to the role of the formal annual programme management committee meeting in the delivery of the course. The course team explained that the committee looks at quality assurance elements and processes as part of an ongoing review in a

holistic way, across all multi-disciplinary areas, this includes patients and public, students, DPPs and wider stakeholders. It is a chance to have a strategic and operational look at where the course is currently and what can be reviewed. The committee reviews staff student liaison minutes, reviews DPP feedback, and final end of course evaluations.

As part of the submission documentation, it was noted that learning agreements are in place with the pharmacist independent prescriber in training and the DPP. Both DPP and student review and agree a learning contract at the beginning of the course and this is included in the student's portfolio in Pebblepad. Students must meet with their personal tutors regularly and attend two formal tripartite meetings with the DPP and academic tutor. The submission documentation stated that the UoB has insurance to cover course activity. Both applicants and DPPs must also confirm that they have professional indemnity insurance in place as part of the application process.

As part of the submission documentation, it was noted that each pharmacist independent prescriber in training is supported by a dedicated personal tutor who will meet with them regularly to discuss their progress and development. They are also offered pastoral support and signposting to other services e.g. well-being, and student services which is introduced on the induction day and referred to in the student handbook. There are two mandatory tripartite meetings between the student, personal academic tutor and DPP in module one and module two. These provide an opportunity to discuss progression and development during the supervised learning time in practice. The accreditation team questioned how the course team support DPPs to identify and report back where students may be struggling or not progressing in line with expectations. The course team explained that as well as the two mandatory tripartite meetings, the course team try and maintain good communication with DPPs and students to be proactive and not reactive. Where issues, such as low engagement, are identified a member of the team can go out onsite to the placement to discuss issues with the DPPs. The Covid-19 pandemic has allowed for arranging meetings via online forums, and it is believed by the course team that this has enhanced relationships with the DPPs.

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 will be met.

As part of the submission documentation, it was noted that the course has quality assurance processes to monitor, review and evaluate education provision. In terms of the process for modification of modules or programmes, minor modifications are considered by Chair's action of the College Quality Assurance and Approval Committee (CQAAC) to ensure an agile response. More substantial changes to a module or programme are considered by the Committee in depth, by a panel of curriculum approval experts. Two members of the School of Pharmacy are members of CQAAC, the Head of Education and the Director of Postgraduate Studies. The Nursing and Midwifery Council (NMC) re-accredited the course in December 2020 and a full review was undertaken prior to this to consider developments and enhancements. Approval was confirmed by the NMC and a change request was made to GPhC in January 2021, which was approved. The overview of the approved changes are noted below:

Current course structure/modules	New course structure/modules proposed for implementation for nurses/midwifes from March 2021 cohort
2 modules with portfolio included in both modules	3 modules **Module 3 is an overarching module that now includes the Minimum 90 hours supervised learning in practice (must pass), portfolio (must pass) and additional 3 optional tutorial days**
Module 1 (20 credits): Scientific Principles & Practice 3 study days Assessment: portfolio (must pass) case presentation (50% pass mark, 30% of module) written assessment (50% pass mark, 70% of module) Calculations examination (100%, must pass, to meet NMC requirements)	Module 1 (20 credits): Scientific Principles & Practice 4 study days (to provide additional support in pharmacology, therapeutic area, introduction to clinical skills) Assessment: case presentation (50% pass mark, 40% of module) written assessment (80% pass mark, 60% of module) (to reflect NMC requirement for pharmacology assessment Calculations examination (100%, must pass, to meet NMC requirements)
Module 2: Safe and effective practice – 5 study days Assessment: portfolio (must pass) Satisfactory completion of minimum 90 hours supervised learning in practice Three station OSCE examination (50% pass mark) (70% of module total) One hour Extended Matching MCQ examination + short answer examination (20 questions of which 5 are candidate prescribing context area specific, 2 short answer questions of which one is prescribing context area specific – individualised papers will be constructed for each speciality) (80% pass mark) (30% of module total)	Module 2: Safe and effective practice – 5 study days Assessment: Three station OSCE examination (50% pass mark) (60% of module total) Significant event analysis with clinical management plan (1500 words) (50% pass mark) (40% of module total)
	Module 3 (non-credit bearing): Prescribing: Structured Reflective Portfolio Overarching module (similar to module used in Advanced Clinical Practice) includes: Induction day 3 optional tutorial days (support any elements of the programme) portfolio (must pass)

	Satisfactory completion of minimum 90 hours supervised learning in practice

It was noted that the external examiners are appointed for a period of 4 years. They review assessments in advance with comments, provide general support and quality assure the assessment process at exam board level. The course team meet regularly to discuss operational delivery, feedback from students and DPPs. Annual module and programme review, external examiner comments, review of student progression, student and DPP feedback informs discussions at programme management committee meetings and at the quarterly School of Pharmacy Quality Committee. The Academic Lead for Quality (Pharmacy), who chairs the Quality Committee, is an academic member of pharmacy staff who provides profession specific oversight of quality assurance arrangements. The accreditation team enquired as to the feedback that was received which led to the recent changes to the course, including from students, and how this was reviewed. The course team explained as part of the reaccreditation to the NMC standards, and in preparation for the GPhC reaccreditation, a full course review was undertaken based on student and external examiner feedback. This involved streamlining assessment processes while making sure assessments still met the requirements for all regulatory bodies. This included removing 'over assessment' such as from the portfolio, mandating 20 reflections maximum which focused on the learning outcomes more. Each of the reflections now require at least two examples for each learning outcome, generally meaning higher quality examples. In terms of marking of portfolios there is a set proforma to enable consistency in marking which is then moderated.

It was noted that some key course developments during the last year have included digital access to patients, use of remote consultations, and the significance of accurate documentation and good communication to support safe and effective patient care. Course content has been enhanced to support this and includes additional sessions on remote prescribing, effective clinical decision-making and role play scenarios. It was further noted that students provide feedback on study days via EvaSys and Staff Student Liaison meetings. Regular meetings with personal tutors and tripartite meetings with DPPs provide further opportunities for the course team to gain feedback on the course and the supervised learning time in practice. There is a student representative on the programme management committee. The accreditation team note that the UoB has validated the course and holds overall responsibility for its quality management.

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 will be met.

The course comprises of at least 26 days of structured learning activities. This includes 9 on-campus teaching days (4 in module one, 5 in module two). The Practice Certificate in Independent Prescribing is a 40-credit module with 400 hours of indicative student effort. As part of the submission documentation, it was noted that the course's teaching and learning strategy supports applicants to build on their background knowledge and experience and acquire competence in prescribing. Student development is supported by a blended teaching and learning approach comprising of distance learning, campus-based teaching days, individual tutorials, supervised learning time in practice and personal tutor support. Supervised learning in practice time is facilitated by the DPP in a clinical

setting with direct access to patients. Further, students have unrestricted opportunities to use an extensive array of UoB student Study Skills and Support initiatives that can be accessed via either self or tutor referral. Help is offered in a range of areas including help with academic work, plagiarism and referencing, time management, Dyslexia study support, Postgraduate students and researchers, English for international students, computers, and IT.

It was noted that Pharmacists are invited to attend 3 optional study days to support areas of learning including calculations, pharmacology and clinical skills. These are attended by the majority, and students benefit from peer learning in a multi-professional group. It was further noted that student profiles and experiences are reviewed with sessions tailored to be inclusive to meet the needs of the cohort as expertise may vary across sectors of practice and levels of experience. The accreditation team questioned how sessions are tailored to meet the needs of the cohort. The course team explained that at application the course team review stated clinical background and sectors of practice, then allocate groups of similar practice to support peer to peer learning. This allows for core principles plus own areas of practice to develop as areas progress and change in placement practice. From a multi-disciplinary point of view this also allows student led facilitation and perspective to understand different aspects of multi professional practice. Students appear to benefit from peer learning sessions as they are less academic, and more peer led.

Other stakeholders and commissioners, such as the University Hospitals Birmingham and community pharmacy chain representatives are invited periodically to support development and enhancement of the course. There is also student representation on the course. The accreditation team questioned how the patient and public group is involved in supporting teaching sessions from the patient perspective and how their contribution has influenced the course. The course team explained that the patient and public group is a college wide group and includes carers perspective of services across a wide range of sectors including primary and secondary care. The patient and public group are also involved in the patient satisfaction survey as part of the portfolio and were actively involved in the recent NMC validation via a steering group.

It was noted as part of the submission documentation that DPPs are responsible for the learning and supervision of pharmacist independent prescribers in training. The course recommends that at least 50% of the supervised learning time in practice is spent with the DPP who makes a professional judgement on the competence of the pharmacist. The accreditation team questioned if there had been any recent issues with 'over-delegation' by DPPs to other professionals. The course team explained that there had been no situations of this to date, but it would be picked up on, and managed by the use of tripartite meetings. It was further explained that a DPP should understand at application and induction their responsibilities to the student. If needed, the course team, when reviewing the portfolios, can make recommendations for extra time to allow for LOs to be fully covered.

The accreditation team questioned how the course categorises and reviews cases of potential harm (unsafe practice). The course team explained that any concerns would be picked up on as part of assessments and they would initially be discussed as part of the course team. The handbook also includes details of policies such as plagiarism, grievance and appeals. If the threshold of potential harm is met, the student will be subject to Fitness to Practise processes. There is an academic integrity module (moral and ethical) and as these students are registrants, they should also be aware of their professional responsibilities. Harm to patients is also assessed in OSCEs, and if identified, mandates automatic failure.

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 will be met.

It was noted as part of the submission documentation that requirements of the placement learning in practice is detailed to pharmacists and DPPs at the admissions stage, during induction for both pharmacists and DPPs and throughout the course, including in the student handbook, practice supervision and assessment handbook, and portfolio handbook. During the supervised learning in practice, pharmacist independent prescribers in training can make prescribing decisions under the supervision of a DPP but must not independently prescribe until successful achievement of the course and annotation with the regulatory body.

Standard 7: Assessment

Standard met/will be met? Yes ☒ No ☐

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

It was noted as part of the submission documentation that the underpinning UoB policy on assessment criteria is included in the Code of Practice on Taught programme and module assessment and in the UoB Regulations. The choice of appropriate assessments, their weighting, timing and provision of subsequent feedback is critically devised through multi-disciplinary processes. The course has been developed in a sequential manner to achieve a 'knows how/shows how/does' position for learning outcomes. The assessment philosophy includes the use of synoptic assessment to demonstrate the student's capability to apply knowledge, skills and understanding. The Programme Director is responsible for the development and quality assurance of all assessments. These are developed in conjunction with the course team and draws on their expertise. They are discussed and drafted within the team and sent to the external examiner for review and comment before finalising.

The accreditation team questioned how synoptic assessment is utilised within the course. The course team explained that it is utilised within two exams using an ethical scenario-based approach. They are all quite holistic assessments, using different areas of practice and real-life practice examples. In development the course team use the Zubin Austin model as part of developing OSCE assessments and utilised extended matching questions as synoptic assessment. The course team have regular debriefs to ensure consistency.

It was further noted that all assessments are double marked and moderated to verify marks and assessment decisions. Debriefs after assessment delivery and marking review the suitability of assessments and consider enhancements and improvements. At exam board the external examiner reviews a sample of assessments to include a range of lower, middle and upper marked assessments and referrals as part of the quality assurance process. Regular formative feedback is provided throughout the course to support students to prepare for summative assessments. In any assessment, a failure to identify a serious problem or an answer which would cause the patient harm will result in overall failure of the course. Failure of any component of the module will require reassessment. The final result will be capped at 50% for the module as a whole (not including the portfolio, pharmacology-based assessment and the calculations examination). Failure of any OSCE station/s will result in a re-sit of the whole OSCE examination. Failure in the period of learning in practice cannot be

compensated by performance in other assessments. Compensation of individual components is not available.

The accreditation team questioned how the course assessment strategy ensures trainees are practising safely, including in the use of summative assessment, OSCE and DPP assessment. The course team explained that the course content is reviewed regularly and learning and the link to course material and script modules is assessed as part of this. There are 24 mandatory Script modules which are used as a safety net, linking to all aspects of the course to ensure safe practice. Module one focuses on problem-based learning, including testing drug interactions; these are scenario based with new drugs introduced, and are linked to practice. Clinical skills are assessed by DPP and OSCE, all summative assessments are checked by the course team. Clinical skills assessed in practice are assessed in portfolio then quality assured by the course team. The accreditation team questioned how the course assures that all DPP assessments of students are consistent. The course team explained that all DPP assessments are quality assured and checked by the course team as part of review of portfolio. This is subsequently checked by the UoB quality assurance process via the exam board to ensure that all aspects of assessment decisions are checked and ratified.

It was noted that Pharmacists who successfully complete the course are awarded a 'Practice Certificate in Independent Prescribing'. All assessments must be passed, and outcomes achieved by the end of the course to an objective standard. The GPhC standards supersede those of the University with regards to patient safety.

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 will be met.

It was noted as part of the submission documentation that the induction day provides students with orientation to the course and supervised time in practice, together with signposting to well-being and student services available through the UoB central services. Students are assigned a personal tutor who they meet with regularly throughout the course. Students have access to a variety of resources on the virtual learning environment on CANVAS, and separately on campus. The accreditation team questioned how the role of the personal and academic tutors is made clear. The course team explained that the roles are clearly outlined in the student handbook. During the Covid-19 pandemic the number of tutorial offerings increased to support students on the course.

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 will be met.

It was noted as part of the submission documentation that DPPs are provided with a Practice Supervision and Assessment Handbook, attend an induction event, and have resources in the DPP workbook on Pebblepad. Guidance is provided on their role, including assessment of the pharmacist independent prescriber in training, providing feedback, support and raising concerns. DPPs must confirm that they have reviewed the resources provided. The Programme Director is the first point of

contact for DPPs, delegating to the wider course team as required. There is also a DPP on the programme management committee who provides support to the team and DPPs. The accreditation team questioned how DPP suitability is assessed by the course team in relation to criterion 9.2. The course team explained that the assessment of suitability begins during the application stage where the DPP completes a section confirming the points of the criterion. This is cross referenced and triangulated with the DPP's CV and then followed up at the interview stage against the Prescribing Practitioner Admissions Checklist, which completed by a member of the course team.

It was noted as part of the submission documentation that the two mandatory tripartite meetings provide an opportunity for the personal tutor, student and DPP to discuss the course and provide feedback to each other. Students are asked to provide feedback on their DPP via a survey included in their portfolio on Pebblepad at the end of the course. This is collated and key general points are communicated to all DPPs. Individual feedback may be considered upon request. The student handbook details the process for raising concerns regarding the DPP or supervised learning time in practice and would be investigated by the course team with timely feedback provided to all concerned.

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