General Pharmaceutical Council

Boots UK pharmacy support staff courses reaccreditation event report, March2022

Contents

Event summary and conclusions	
Provider/Awarding organisation	Boots UK
Course	Support staff courses
Names of courses	Boots Pharmacy Advisor Programme Boots Dispensing Programme Boots Healthcare Advisor Programme Boots Dispensing Support Pharmacy Operative Programme
Event type	Reaccreditation
Event date	29 March 2022
Approval period	June 2022 - June 2025
Relevant requirements	Requirements for the education and training of pharmacy support staff, October 2020
Framework used	National Occupational Standards
Outcome	Approval The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the support staff courses provided by Boots should be reaccredited for a period of three years.
Conditions	There were no conditions.
Standing conditions	A link to the standing conditions can be **found here**.
Recommendations	No recommendations were made.
Registrar decision	Following the event, the Registrar of the GPhC accepted the team's recommendation and approved the reaccreditation of pharmacy support staff courses (listed above) for a period of three years.
Key contact (provider)	Kirti Solanki, Pharmacy Learning & Development Manager
Provider representatives	Kirti Solanki, Pharmacy L&D Manager* Richard Dunne, Senior Pharmacy L&D Manager* Samuel Richardson, Pharmacy L&D Designer* James Rimmer, Pharmacy L&D Designer* Jawaad Qayum, Pharmacy L&D Designer*

Accreditation team	Leonie Milliner (team leader - Lay) Chief Executive Registrar, General Optical Council*
	Leanne Bartholomew (team member - pharmacy technician) Senior Medicines Management Pharmacy Technician at West Suffolk CCG
	Laura McEwen-Smith (team member - pharmacy technician) National Programme Lead; Primary and Community Integrated Care
	Shahzad Ahmad (team member - pharmacist) Clinical Safety Officer and Pharmacy Consultant, McKensson UK
GPhC representative	Chris McKendrick, Senior Quality Assurance Officer, General Pharmaceutical Council*
Rapporteur	Ian Marshall (Rapporteur) Emeritus Professor of Pharmacology, University of Strathclyde

* Attended pre-event meeting on 17 March 2022

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 approval process is based on the Requirements for the education and training of pharmacy support staff, October 2020.

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

Boots UK was accredited initially by the previous regulator, the Royal Pharmaceutical Society (RPSGB), to provide dispensing assistant training. The programme was reaccredited by the GPhC for a period of three years in December 2013. There were no conditions or recommendations and three areas of strength were identified. Extensions to this reaccreditation were subsequently granted until January 2019. An event took place on 9 November 2018 to review the programme's suitability for further reaccreditation. The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the support staff programmes provided by Boots should be reaccredited for a period of three years. There were no conditions or recommendations. At the start of the COVID-19 pandemic all trainees were provided with an extension of 6 months to their programme timelines and their protected learning time continued to be funded. The team learned that Healthcare and Pharmacy Advisor roles are store-based and patient-facing, while the Dispensing Support Pharmacy (DSP) operative role is non-store-based. The team was told that that the provider had aimed to introduce the new GPhC requirements for support staff in a seamless manner to accommodate trainees on the previous iterations of the programmes.

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.

Pre-event

In advance of the main event, a pre-event meeting took place by videoconference on 17 March 2022. 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 event

The event began with a private meeting of the accreditation team and GPhC representatives on 28 March 2022. The remainder of the event took place by video conference on 29 March 2022 and comprised a series of meetings with the provider staff involved in the design of the courses.

Declarations of interest

There were no declarations of interest.

Schedule

Meeting	Time
Day 1 – 28 March 2022	14:00 – 15:45
Private meeting of accreditation/recognition team and GPhC representatives	
Day 2 – 29 March 2022	
Private meeting of accreditation/recognition team and GPhC representatives	09:00 – 09:10
Accreditation/recognition team and GPhC representatives meet with the course provider/awarding organisation representatives	09:10 – 11:00
Meeting to discuss the learning outcomes/meeting with stakeholders	11:30 – 12:15
Private meeting of accreditation team and GPhC representatives	13:30 – 14:20
Deliver outcome to provider	14:20 – 14:30

Key findings - Part 1 - Outcomes for all support staff

During the event the accreditation team reviewed the provision against all 19 outcomes required for all pharmacy support staff roles. To gain additional assurance, the accreditation team also explored a sample of **four** learning outcomes during a separate meeting with the provider and was satisfied that **all 19 learning outcomes will be met** to the level required by the GPhC requirements.

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

Criteria 1: Equality, diversity and inclusion

Criteria met/will be met? Yes ☒ No ☐

The team was satisfied that all three criteria relating to equality, diversity and inclusion are met

The team learned that the Pharmacy learning and Development (L&D) team works closely with the Boots Diversity, Equity and Inclusion teams to ensure that the Boots Diversity, Equity and Inclusion vision is followed. This has been supported recently by equality and diversity data capture for the programmes, equality of access to assessment, Diversity, Equality & Inclusion content design principles, and embedding Boots Diversity, Equity and Inclusion principles when delivering patient-centred care. The team heard that this includes guidance on the use of colour, language, subtitles and interaction in course materials. The team was pleased to hear that Boots had been named as Company of the Year in the British Diversity Awards. At registration, all trainees and/or designated supervisors (DSs) are asked to declare if a reasonable adjustment is needed. All requests for reasonable adjustments are considered on a case-by-case basis. The Pharmacy L&D Designer will contact and support the trainee and/or DS to determine the relevant support needed; the outcome is communicated to the trainee personally or by email. The Programme is designed and delivered in a way which meets a range of learning and individual preferences, cultural diversity and approaches. All Pharmacy Support colleagues must complete specific training to support their understanding of DE&I and show how it impacts the delivery of pharmacy services.

The team was told that equality, diversity and inclusion issues are embedded in the programmes. Thus, unconscious bias and sensitivity issues and their application in the pharmacy setting are covered, along with privacy, gender and religious issues.

Criteria 2: Course curriculum

Criteria met/will be met? Yes ☒ No ☐

The team was satisfied that all six criteria relating to course curriculum are met

All four training programmes are based in the workplace and require a dedicated DS for each trainee. The programmes are designed to be delivered in the trainee's practice setting. For the Pharmacy Advisor, Healthcare Advisor and Dispensing Programmes this will be in store, and for the Dispensing Support Pharmacy Operative Programme (DSPOP) it will be at the Dispensing Support Pharmacy, a dispensing robot facility in Preston.

The Pharmacy Advisor Programme, Healthcare Advisor Programme and Dispensing Programme all share the same programme content based on three modules. The relevant modules will be assigned depending on the programme on which the trainee is registered. The programmes have been developed to support the delivery of the GPhC learning outcomes for all trainees along with role-specific outcomes mapped to the relevant National Occupational Standards (NOS) units covered at RQF level 2 / SCQF level 5. The role profile for each role has been used to identify key tasks performed in the role and to reflect current best practice. Both the trainee and DS are provided with a Programme Overview package (for the Pharmacy Advisor, Healthcare Advisor and Dispensing Programmes) and a Trainee Designated Supervisor guide (for the DSPOP). These include a learning

contract, how the programme supports development in role, roles and responsibilities during the programme, and the programme regulations. The trainees are encouraged to track their progress against their learning outcomes and performance standards using the performance standards and a learning outcome tracker.

Programme content and assessment questions have been developed, written and reviewed by a panel of pharmacists within the Boots Pharmacy L&D team and reviewed by NVQ Level 2 Assessor(s) to ensure that the programme meets the Level 2 standard. The learning outcomes for the programmes are mapped against the role, GPhC learning outcomes and the relevant Pharmacy NOSs; these in turn are mapped to the company Standard Operating Procedures to create the performance standards for the programmes.

Criteria 3: Assessment

Criteria met/will be met? Yes ☒ No ☐

The team was satisfied that all four criteria relating to assessment are met

Each programme will be successfully completed and a certificate for the qualification issued, when the trainee has met the Performance Standards, passed a module eTest, spent a minimum time on the programme and been signed off with a Final Declaration by the DS. The minimum time spent varies, according to the role-specific programme; 4 months for the Pharmacy Advisor Programme, 3 months for the Healthcare Advisor Programme, and 2 months for the Dispensing Programme and DSPOP. The Performance Standards follow the company SOP sign-off procedure and are reviewed and governed by the Boots Chief Pharmacist's Office. The trainee will be observed in accordance with company Standard Operating Procedures to ensure they can consistently transfer their learning to the workplace, attaining the requisite level of competence to ensure patient safety at the "Shows how" level of Miller's Triangle scale. The team was told that there is no set number of times a trainee's competence can be assessed unless there is an issue of patient safety. A subsequent eTest at the "Knows how" level will be delivered by the programme digital platform. This also provides governance of the process, with. detailed reporting on time taken, question trends and if any technical issues occurred. The eTest is automated with a trainee being locked out after each second failed attempt at an eTest and being unable to progress further without an in-person intervention by the central Pharmacy L&D team. Failures related to safety are considered by the Pharmacy Safety Quality Management group and the DS who will attempt to identify the root cause of any problem. The final declaration where the trainee is declared to be competent in their role at the "Does" level is completed by the DS in their capacity as a pharmacy professional and a registrant of the GPhC/PSNI. Trainees will receive feedback throughout their programme. Trainees and DSs are encouraged to meet regularly to review trainee progress.

Criteria 4: Management, resources and capacity

Criteria met/will be met? Yes ☒ No ☐

The team was satisfied that all eight criteria relating to management, resources and capacity are met

There is a funded staffing model which identifies where trainees are needed and ensures a role post qualification. The model includes the relevant training time allocation, ensuring that trainees are

supported adequately for the duration of their time on the programme. The digital platforms used can be accessed at any time and all stores have access to training facilities and equipment, including Wi-Fi, PCs and iPads. Where stores do not have dedicated training rooms, consultation rooms and other store facilities may be utilised.

Each trainee will be assigned a DS in their workplace, who is responsible, in conjunction with line managers, for ensuring that their learners are registered for the relevant programme as soon as they start work within the pharmacy area. The DS must be a GPhC/PSNI registered pharmacist or pharmacy technician. The line manager is responsible in conjunction with the designated supervisor for ensuring that their learners are registered for the relevant programme. They will support the trainee to complete the programme within the recommended timescales, ensure that the trainee and DS spend regular time together to review and complete assessments as required, and provide a suitable environment required to support the trainee complete their programme. Each programme will have formal learning contracts in place between the trainee, DS and line manager describing the roles and responsibilities of each. Any questions or concerns should be raised informally with the DS and/or line manager to resolve the issue locally, or if more appropriate with another member of the management team. The trainee and the DS are encouraged to discuss any concerns or potential malpractice issues and to consult the Help Desk where the issue will be triaged and escalated if necessary to the Pharmacy Support Manager, Healthcare Academy trainer or Human Resources.

The certificate will clearly state which qualification trainees have received and list the specific Pharmacy National Occupational Standards units covered at RQF level 2 / SCQF level 5 or equivalent. The certificate will only be issued to individuals who complete the full programme.

Criteria 5: Quality management

Criteria met/will be met?   Yes ☒ No ☐

The team was satisfied that all four criteria relating to quality management are met

The Quality Assurance Strategy will be reviewed annually, along with all Quality Assurance documentation to ensure that it is efficient and effective and reflects current best practice. All agreed changes to the Quality Assurance strategy and process will be ratified by the Senior Pharmacy L&D Manager before full implementation. Each programme will be reviewed on quarterly basis for any changes, but all urgent changes such as Standard Operating Procedures updates, regulatory, guidance or legal changes will be implemented as soon as possible outside the quarterly review. As indicated in the commentary to Criteria 3, programme content and assessments have been written by pharmacists and reviewed by an NVQ Level 2 Assessor to ensure compliance with the Level 2 standard. The learning outcomes for the programmes are mapped against the role, GPhC learning outcomes and the relevant Pharmacy NOS, and mapped to the company Standard Operating Procedures to create the performance standards for the programmes.

Trainees and DSs will complete feedback on the programme at the end of each module and after the final declaration. The team was told that DSs undertake a training programme that includes feedback coaching methods including the provision of advice after any second fail of the eTest. Using this feedback, the Pharmacy L&D team will evaluate the programme and any appropriate amendments to benefit future trainees and designated supervisors. A detailed programme evaluation will take place annually where feedback on content, trainee and DS experience will be reviewed along with customer and patient insights. The team learned that feedback on the DSPOP indicated that DSP operative

trainees considered that store-based content led to confusion, that the testing of knowledge and practical skills should be more related to the job role, and that there should be more emphasis on the assessment of competence. This has led to a focus on job standards and capability, with SOPs being introduced. Store-based trainees felt that there was too much separation between e-learning and practical activities, and that communication on the final declaration and certification could be improved. Module content has been updated and reformatted, and separate activity packs and videos provided.

The digital platforms will provide programme reporting to track trainee progress. There will be a regular progress report based on module feedback issued to line managers and field teams to track trainee progress. The team was told that consistency of the assessment of competences by the DS in different settings and pharmacies is assured by the use of the company SOP for signing-off. For the DSPOP there are eight tutors who have weekly group meetings and quarterly reviews. The company field team undertakes spot checks on consistency during store visits and can access data on excessively slow or fast completion rates.

Criteria 6: Supporting learners and the learning experience

Criteria met/will be met? Yes ☒ No ☐

The team was satisfied that all five criteria relating to supporting learners and the learning experience are met

A module including an overview of the programme, including process, roles and responsibilities, programme regulations, and how to escalate queries and concerns must be completed prior to accessing any learning content. The DS must work sufficient time, that is at least the equivalent of one working day of a minimum of 5.5 hours each week, alongside the trainee in order to be able to support them through the programme. The line manager is responsible for ensuring that the 5.5 hours' time is provided but the central team will offer support in the case of problems. Line managers are provided with a leader guide with an overview of the programme and what to expect to help them support the trainee and DSs in store/at the Preston site. The team learned that the number of trainees assigned to each DS is not specified but is normally not more than two or three.

Trainees will be given protected training time in their workplace each week to allow them to undertake their studies. This will be one hour for the Pharmacy Advisor, Healthcare Advisor and Dispensing Programmes, and four hours for the DSPOP. DSs are encouraged to use the experienced pharmacy team around them to support the trainee as they progress through the programme and use them as buddies and mentors. The team was told that there are a number of company support resources available to trainees, including a help desk facility with one phone number access.

In terms of the measure of success in the company assuring itself that trainees have a positive learning experience, the provider stressed that it need to know that its pharmacy support staff was competent and pointed to the mobility of its workforce and good succession rate.

Key findings - Part 3 - Role-specific learning outcomes

Please see the part 3 report for the individual courses for commentary.