

**Glyndwr University independent
prescribing course reaccreditation event
report, December 2021**



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Event summary and conclusions

Provider	Glyndwr University
Course	Independent prescribing course
Event type	Reaccreditation
Event date	10 December 2021
Approval period	March 2022 – March 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 the pharmacist independent prescribing course provided by the Glyndwr University should be reaccredited for a further period of three years, subject to no conditions.
Conditions	There were no conditions.
Standing conditions	The standing conditions of accreditation can be found here .
Recommendations	No recommendations were made.
Minor amendments	No minor amendments were required.
Registrar decision	Following the event, the Registrar of the GPhC accepted the accreditation team's recommendation and approved the reaccreditation of the course for a further period of three years.
Maximum number of all students per cohort	60
Number of pharmacist students per cohort	16
Number of cohorts per academic year	1
Approved to use non-medical DPPs	Yes
Key contact (provider)	Eleri Mills, Programme Leader NMP, Wrexham Glyndwr University

Provider representatives	Dr Joanne Pike, Professional Lead – Nursing (Post Registration), Wrexham Glyndwr University Karen Pritchard, Patient Safety Lead Pharmacist East, BCUHB
Accreditation team	Professor Chris Langley (event Chair), Deputy Dean (External) of the College of Health and Life Sciences and Head of Aston Pharmacy School. Lyn Hanning, Director of Practice Based Learning and Head of Pharmacy Practice, University of Bath Liz Harlaar, Independent Business Consultant
GPhC representative	Damian Day, Head of Education, General Pharmaceutical Council
Rapporteur	Alex Dourish, GPhC Quality Assurance Officer (Accreditation)

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/ukxi/2010/231/contents/made>

Purpose of this event

The purpose of the reaccreditation event is to review the performance of the course against the education and training standards with the current cohorts of pharmacists, and to ensure that delivery is consistent with the GPhC accreditation criteria. The reaccreditation event utilises student feedback and evaluation together with a review of documentation and a meeting with course representatives. The reaccreditation period is confirmed after a satisfactory reaccreditation event has taken place.

Background

Glyndwr University were accredited by the GPhC in 2015 to provide a course to train pharmacist independent prescribers, for a period of 3 years. In line with the standards for the education and training of pharmacist independent prescribers January 2019, an event was scheduled on 10 December 2021 to review the course's current suitability for reaccreditation. There were no conditions or recommendations set at the previous reaccreditation event in 2018.

Glyndwr University offer the GPhC-accredited 'Independent Prescribing for Pharmacists' course. The course is led by the nursing profession. There is currently one cohort offering per academic year including fifty students per cohort with twenty-six course-led face-to-face (contact) days. Glyndwr University are seeking GPhC approval to continue to offer a total of one cohort per academic year (with a total number of sixty students per cohort) as part of this 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

Due to the Covid-19 pandemic, the GPhC modified the structure of the event so that it could be held remotely. The event was held via Zoom between Glyndwr University and GPhC on 10 December 2021 and comprised of meetings between the GPhC reaccreditation team and representatives of the Glyndwr 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. A total of six students provided qualitative feedback (one of whom are currently on the course) and their views have been considered to inform the outcomes detailed within this report.

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

During the event the team reviewed all 32 learning outcomes relating to the independent prescribing course. To gain additional assurance the team also tested a sample of 4 learning outcomes during a separate meeting with the provider and 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: **LO10, LO19, LO23 and LO27**.

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.

The accreditation team asked the provider to outline the steps taken when an applicant has been unsuccessful in their application for the course and the reason(s) for the decision. The provider gave the example of an unsuccessful applicant in 2018 who was self-employed and did not have the required experience of support in practice. The provider discussed the team's vast experience of interviewing students and how the established selection and interview process enables the opportunity to probe and enquire about the support available from the employer. In some instances, applicants are not always fully aware of the entry requirements for the course. The provider confirmed that the current selection and entry requirements ensure that support is put in place from the outset so that applicants are not set up to fail.

The accreditation team enquired how applicants are selected and prioritised in the event of the course becoming over-subscribed. The provider confirmed that all applicants apply through Health Education and Improvement Wales (HEIW) who supply names and numbers of registered healthcare professionals whom they recruit. The provider confirmed that the number of pharmacy applicants for the course remains low. There is a robust screening process in place.

The accreditation team requested an example of where an applicant's clinical or therapeutic experience was provided from outside the HEIW route and how this was assessed. The provider explained the pre-selection process undertaken by HEIW which is further enhanced by the provider's interview process which also screens an applicant's suitability for the course.

Standard 2: Equality, diversity and inclusion

Standard met/will be met? Yes No

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

The accreditation team asked the provider to share an example of where programme design or delivery was directly influenced by the review of equality and diversity data. The provider explained how principles of equality, diversity and inclusion are embedded within the ethos and practices of the university. The provider cited the programme development review system which has a specific focus on EDI and widening participation. EDI is also intrinsically linked to the student experience via the Student Union, the student voice forum, evaluation of programmes and various other student feedback mechanisms. Students are given the option to feedback anonymously online. Student needs and reasonable adjustments are catered for by the course team and the wider university. The course team works in close liaison with the inclusion services team and library services to ensure that specific needs are accommodated. If there are any accessibility issues for students, such as being unable to attend sessions, these can be revisited at a later time. The provider discussed the universities' active learning framework and how this fosters a flexible approach to learning and teaching. The provider

gave the example of accommodating cultural needs, such as supporting Muslim learners by adjusting the scheduling of the course and examination assessment, where appropriate. It was emphasised that the Glyndwr University is by and large a local university catering to a local rural population.

The accreditation team requested an example of how the university uses EDI data to inform the development of the Non-Medical Prescribing (NMP) programme. The provider explained the yearly programme review process where strengths and areas for development are identified and evaluated. There are subject specific representatives involved in the review process. EDI data are produced and reviewed on a regular basis. The provider highlighted the working group dedicated to the BAME experience. The provider also flagged significant Polish representation in the Wrexham campus area.

The accreditation team asked the provider for an example of where a reasonable adjustment had been made to the course. The provider explained how the programme handbook clearly outlines the reasonable adjustment process for students. The provider also referred to the previous example where adjustments were made in relation to the scheduling of examinations for Muslim learners. The generally low number of requests from students for reasonable adjustments were noted.

The accreditation team asked for an example of where a reasonable adjustment could not be implemented where this would have altered the level to which the learning outcome was being assessed. The provider gave the example of the Objective Structured Clinical Examinations (OCSEs) and stated that these exams are mandatory and must be passed by students irrespective of any reasonable adjustment request. The provider clarified that all reasonable adjustments are accommodated where any request is made although these requests remain low in number.

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.

The accreditation team enquired about the ease and difficulty in recruiting new professionals to the programme team. The provider outlined the challenges for a small university serving a large and diverse health board, and conversely, the value in working alongside partners such as Bangor University (i.e. - the course team currently includes a lecturer from Bangor University). The provider highlighted the importance of staff planning and regular review of continuity of staff resources (to ensure that growth of the course team and expertise aligns with new nursing standards as these are implemented). The provider explained how recruitment to the course team is also focused on ensuring alignment with the career trajectory of individual employees while also factoring in succession planning in anticipation of future needs. The team's strong relationship with HEIW and the multi-disciplinary pool of visiting speakers and professionals were cited as advantageous.

The accreditation team enquired about the management plan and the amount of time each staff member contributes to delivery of the programme. The provider confirmed that each member of the team contributes variable days to the course, with the pharmacologist spending approximately 27.5 hours to support delivery. The programme is also vastly supported by visiting professionals and specialist pharmacists who deliver on unlicensed medicines and antimicrobial prescribing. The course team were recently successful in their HEIW tender for the nursing programme thus creating greater investment in the undergraduate nursing programme. The external speakers course covers primary care and community pharmacy, clinical skills such as remote consulting, and how to navigate the

British National Formulary (BNF). The provider mentioned the growing increase in prescribers supplied by HEIW, and in the event of a future need to increase cohorts, direct contact with GPhC will be made to request formal approval.

The accreditation team asked how teaching and learning support extends to visiting staff and sessional lecturers and how support is provided in terms of delivery. The provider confirmed that visiting staff and sessional lecturers have the option to undertake the PGCE qualification and are provided with a university email address and password, in addition to access to library resources. Feedback is requested from students regarding visiting staff and sessional lecturers to ensure quality and consistency of provision. The programme lead attends all initial sessions in order to provide support and aid development.

The accreditation team requested an example of when a tripartite meeting took place between the student, the DPP and the personal tutor and where any issues were resolved. The provider confirmed that tripartite meetings often take place to explore and discuss clarification on assessment, clinical skills, changes to workload and release time. Issues are often identified and flagged as and when these arise thus prompting the tripartite meeting. In some instances, students have deferred or paused their studies as a result of the meeting. The tripartite meetings are viewed as useful intervention tools which allow students to discuss any challenges and review progress.

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.

The accreditation team enquired how the provider ensures an external examiner from a non-pharmacist background is sufficiently aware of the requirements for pharmacist independent prescribers. The course lead explained the external examiner for the programme must be a V300 prescriber as a requirement. External examiners are provided with a programme handbook and receive both a programme induction and a university induction. The course lead mentioned recent updates to the Royal Pharmaceutical Society (RPS) framework which were shared with the external examiner. In some cases, the external examiner may not have a pharmacist background however they will have experience of running multidisciplinary and related programmes.

The accreditation team enquired about the quality management structure and an example of the cycle of action taken when an issue was raised. The course team, in relation to another module not associated with the pharmacist prescribing course, gave the example of evidence-based practice where an issue was raised by students about the module during mid-modular review. In response, the team introduced additional tutorial support and assessments whilst the programme was still in progress. The proactive response of the course team resulted in favourable feedback from students who were satisfied that improvements were made while the programme was running. The provider clarified that a programme report and action plan is shared with HEIW with whom three meetings occur every year where continuous improvements and remedial actions are discussed. There is also a stakeholder meeting for the prescriber programme every autumn.

The accreditation team asked how the course team monitor and evaluate the standard of teaching, learning and assessment within the practice environment. The provider discussed how the Designated Prescribing Practitioners (DPPs) are required to attend a preparation session regarding the OSCEs and

utilisation of the ninety-hour requirement. Students on the course are often mature students who take responsibility for autonomous learning. Practice evaluations are completed by students and DPPs provide feedback accordingly. This allows a dialogue to occur at the point of evaluation.

The accreditation team asked the provider to outline a situation where the programme design, delivery or assessment was modified based on student feedback. The provider gave the example of the clinical management plan where an assessment was changed. As a result of student feedback on the practice portfolio, the course team introduced an additional session to talk through the practice portfolio to provide greater clarification. The provider confirmed that changes were communicated to students (nurses and pharmacists) to let them know about changing assessment requirements and to align with professional practice.

The accreditation team enquired about comments made by the external examiner and any actions taken in response to these. The provider explained the external examiner comments included as part of the submission were generic. The course team provided further examples of external examiner feedback including aligning course outcomes with NMC and other regulatory bodies which were addressed prior to the submission shared with GPhC. Changes in light of feedback from the external examiner have been made to the course and have been approved by the university.

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 accreditation team asked about the application process and ability to meet student's prospective area of practice. The course team clarified that to date the course has always been able to accommodate any potential applicants proposed area of practice. If there were an applicant with an out-of-scope practice area, the provider would interview them to assess their ability and experience, perhaps suggesting for things related to the chosen practice area to be put in place.

In terms of the application process, there is strict criteria for DPP eligibility. If any issues are identified the provider would go back to the applicant and ask them to re-apply to a later cohort.

The accreditation team asked how course delivery was managed during the pandemic. The course team clarified that clinical skills sessions were delivered at the university and students put into bubbles for social distancing purposes and were provided with appropriate PPE. In addition, risk assessment was undertaken, and all learners stayed within their respective bubbles. If one student in the bubble tested positive, the rest of the bubble was notified. Clinical skills were operated in the same way, with the first session involving general use of stethoscope, communication, consent, taking manual blood pressure, etc.

The accreditation team asked how the provider facilitates patient and public engagement from demographic groups that are often under-represented, such as from minority ethnic groups and people with learning disabilities. The course team clarified that the course is involved in an award-winning stakeholder group called 'Outside In', there is representation from Polish, traveller, people with learning needs and health needs, as well as LGBT+ and gender transitioning communities, as an example. This stakeholder group has been involved from the beginning of writing the curriculum as well as student involvement. Additionally, the provider has a policy to ensure they have good representation from under-represented groups.

The accreditation team asked about the providers process of the identification of a suspected serious problem or an issue that could cause patient harm. The course team elaborated that they had one pharmacist where they answered a numeracy question incorrectly. Consequently, they were terminated from the course because there was the possibility of serious patient harm given their answer. They were allowed to return to a later cohort and the provider explained clearly to the learner why they had failed the exam. The provider confirmed that they have a suitability to practice and a placement policy and would speak to the local health board about any serious issues.

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.

The accreditation team were satisfied that all criteria relating to this standard were met at the point of review of the provider's submission documentation.

Standard 7: Assessment

Standard met/will be met? Yes No

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

The accreditation team noted that due to Covid-19 the provider had moved to a more blended learning approach utilising a HEI created 'Active Learning Framework', which is monitored by the provider through various self-directed study activities. The course team elaborated that the framework came about pre Covid-19, but it meant that they were able to continue a lot of teaching throughout the Covid-19 pandemic. The course team explained that by further utilising technology such as Moodle, teaching and learning have been just as effective. An example given was of utilising Moodle quizzes, asking students to complete quizzes/feedback so that the course is evaluated continuously which engages the students far more than a summative assessment at the end. The programme lead monitors student engagement with Moodle.

The accreditation team asked about the moderation and sampling activity, including assessments undertaken by the DPP. The course team explained that all examination assessments are double marked to ensure all standards and outcomes are met. In terms of the DPPs, they will sign off proficiencies/outcomes which are then screened by the course team and triangulated with OSCEs. There is 100% engagement with DPPs.

Standard 8: Support and the learning experience

Standard met/will be met? Yes No

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

The accreditation team noted that the University has guidance on Escalation of Concerns and enquired as to how DPPs are supported in the use of the guidance. The course team explained that DPPs are made aware of the policy in the handbook and as part of their induction training. Anybody involved in assessment of students in practice are made aware of the guidance on Escalation of

Concerns. The guidance was reviewed recently and has clear stages of escalation, including referral to the GPhC.

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.

The accreditation team asked about the process if DPPs do not attend the training event (in-person or virtually). The course team explained that DPPs must complete the training and then complete a short evaluation at the end. Due to Covid-19 the training has now been moved online, and according to the provider this has meant better engagement.

The accreditation team asked about the feedback provided to DPPs specific to their student(s). The course team clarified that there is an end of practice evaluation and the course team collates feedback to identify themes raised. The course team then share feedback from students to DPPs, in a generic way, about what the students find useful/not so useful. DPPs will only get feedback from specific students if an issue was raised.

