

# 2016

General Pharmaceutical Council  
Survey of 2014-2015 Pre-Registration  
Pharmacist Tutors

# General Pharmaceutical Council Survey of 2014-15 Pre-registration Tutors

June 2016

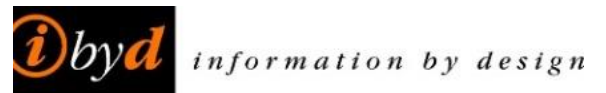
Our thanks are given to:

James Beckles, Damian Day and Paul Stern at the GPhC

All the pre-registration tutors who completed the survey.

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## EXECUTIVE SUMMARY

This report presents the findings of the second annual national survey of pre-registration tutors commissioned by the General Pharmaceutical Council (GPhC). The survey was conducted by the University of Bradford (UoB) and Information by Design (IbyD), working closely with GPhC, and covered the period 2014-15. The survey objectives were:

- to describe the tutor profile,
- to better understand how well tutors feel supported in their role,
- to identify any barriers which might impact on the quality of training they are able to offer,
- to identify where tutors may need further support, and
- to compare findings with last year's survey.

Fieldwork took place between October 2015 and February 2016 and a total of 811 complete responses were received from tutors, compared with 675 in last year's survey. The profile of the respondents was similar to that of the total population of tutors for all characteristics for which the GPhC holds records. The response rate was 22%.

The findings presented in this report are grouped in 'clusters' relating to domains influencing the tutor experience during 2014-15:

- Support available to tutors;
- Tutor training and development needs;
- Support available to trainees;
- Quality of training and support provided, and
- Barriers impacting on training quality.

The report identifies statistically significant differences and associations with key variables (for example, pharmacy sector) and discusses the issues that have emerged.

Overall, the findings are very similar to those of last year's survey and are predominantly positive, with a consistent, although small proportion of tutors reporting that the support available to them was less than adequate, impacting in turn on the quality of the trainee experience.

In the summary of findings that follows, the relationships between tutors' reported experiences and a set of demographic variables are investigated to identify possible explanatory factors.

### **Profile of tutors**

#### *Respondent demography*

The majority of respondents were from England with 12% from Scotland and Wales. Most (72%) worked in community pharmacy and 27% in hospitals. Within community pharmacy one-third worked in large organisations (national chain of pharmacies), one-quarter worked in medium organisations (non-national chain of pharmacies) and the remainder (42%) in independent community pharmacies (not part of a chain of five or more pharmacies).

Respondents' mean age was 42.3 years and 70% had been qualified for 11 years or longer. Fifty-two percent of respondents were female, 48% were male and one respondent was transgender. Overall 55% of respondents were White, 33% Asian or Asian British, 6% Black or Black British and 3% 'Other'<sup>1</sup>, a similar profile to last year's survey. The majority of respondents (84%) worked 35 hours or more each week.

#### *Experience as a tutor and trainees tutored in 2014-15*

Most tutors (61%) had been a pre-registration tutor for 5 years or less, with 22% for 6-10 years and 17% for 11 years or longer. Tutors who had been a tutor for 6 years or longer were less likely to work in independent community pharmacy organisations. Two-thirds of tutors had tutored up to five trainees since becoming a pre-registration tutor. Overall this profile of tutoring experience is very similar to that in last year's survey.

Most respondents (91%) were responsible for a single trainee, the majority of training sites (59%) had a single pre-registration tutor and two-thirds of training sites had a single trainee. Overall 75% of tutors had supervised the same trainee for the full 12-month period, compared with 78% last year. One in ten respondents reported that they were a joint tutor in 2014-15. Again this profile is very similar to that in last year's survey.

#### *Unplanned changes during the training programme*

The negative impact on trainee satisfaction of unplanned changes during their training programme was clearly shown in the GPhC's two national surveys of pre-registration trainees for 2012-13 and 2013-14. Therefore, last year's and this year's tutor surveys also explored this in some detail. In the majority (86%) of cases there were no unplanned changes, but tutors in 2014-15 were more likely to report an unplanned change in tutoring than tutors in the previous year's survey. As in last year's survey, tutors working for national organisation community pharmacies were more likely to report an unplanned change in tutoring arrangement.

#### **Support available to tutors**

Almost all tutors reported having a range of support available to them. The majority of tutors (92%) reported that they had access to a pre-registration pharmacist training scheme or programme in 2014-15 provided by the NHS (35%), their community pharmacy employing organisation (32%) or an external provider (33%). Those tutors without such access were more likely to have been a pre-registration tutor for five years or less and were less likely to have been from an Asian ethnic group. As in last year's survey tutors who had access to a pre-registration training programme from any source were more likely to agree or strongly agree with the statement '*as a tutor I had access to sufficient support in 2014-15*'.

Access to other forms of support was comprehensive, reported by 98%. Forty-six per cent had access to a pre-registration manager in their employing organisation, significantly higher than in 2013-14. Such access was more likely in hospitals and in

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<sup>1</sup> 'Other' ethnic groups includes the following categories: Mixed/Multiple ethnic groups: White and black Caribbean, Mixed/Multiple ethnic groups: White and Black African, Mixed/Multiple ethnic groups: White and Asian, Any other Mixed/Multiple ethnic background, Other ethnic group: Arab and Any other ethnic group

national organisation community pharmacies. Nearly three-quarters of tutors said they had access to support from another tutor, and access to off-site tutor training opportunities was reported by one-half. These results were not significantly different from last year.

Reported awareness of the forthcoming 2016 changes to the Registration Assessment was high (84%, 681). Over half (57%, 465) of those tutors who said they were aware of the changes said that they had used the GPhC website to check for information about the changes. Of those tutors who had used the GPhC website for this purpose, 91% (425) said that they found it fairly or very useful.

### **Tutor training & development needs**

Ninety-five per cent of tutors said they felt confident in '*Assessing how a trainee is performing as a professional*'; those who had been a tutor for 5 or fewer years and those from Wales were significantly less likely to agree. When asked about '*Providing effective feedback following assessment*', 93% said they felt confident in doing so; those who worked in the hospital sector were significantly more likely to disagree.

When tutors were asked how interested they would be in training on a range of topics the highest rated (more than 50% of respondents '*Very interested*') were: '*Identification and management of a trainee who is in difficulty*' (53%), '*Giving effective feedback*' (52%), and '*Coaching & mentoring*' (52%). Tutors who had been tutoring for five or fewer years, those who had been a joint tutor and those from non-White ethnic groups were more likely to state that they were '*very interested*' in all three topics. The topic with the lowest level of interest (25% of respondents '*Very interested*') was '*Dealing with diversity and providing equality of opportunity*'. These findings confirm the priorities identified by tutors in last year's survey.

### **Support available to trainees**

Tutors reported a comprehensive range of additional training and support available for trainees. Off-site training opportunities were reported by over 90% and over three-quarters said that online learning modules were available. Support from a network of trainees was reported by 74%, and peer support from another trainee 60%. These findings are very similar to the previous survey.

### **Perceived quality of training and support provided**

Most tutors (88%) rated the quality of support their organisation provided as either '*Very Good*', or '*Good*'. Only 11% said it was '*Neither good nor poor*', '*Poor*' or '*Very poor*' and these tutors were more likely to have had an unplanned change in their tutoring, to be at a training site where there was only one trainee at the same time, to work in the community pharmacy sector and to work for a medium organisation (non-national chain of pharmacies) community pharmacy.

When asked how they thought their trainee/s would have rated the support they received, 91% of tutors' ratings were '*Good*' or '*Very good*', with 9% '*Neither good nor poor*' and only 2% '*Poor*' or '*Very poor*'. Those who had been a tutor for six years or longer were more likely to think that trainees would rate the quality of support received as good or very good.

When asked how they thought their trainee/s would have rated the quality of their pre-registration training experience, 90% of tutors' ratings were '*Good*' or '*Very*

Good', with the remainder neutral, 'Poor', 'Very Poor' or unsure. There were no significant differences by any of the variables tested.

When asked how they thought their trainee/s would have rated the educational supervision they received, 91% of tutors' ratings were 'Good' or 'Very Good', with 7% 'Neither good nor poor', and only 2% 'Poor', 'Very Poor' or 'Not sure'. There were no significant differences by any of the variables tested.

The majority of tutors (93%) agreed or strongly agreed that the GPhC's pre-registration performance standards were fully covered, with 92% agreeing or strongly agreeing that the training had prepared the trainee adequately for their role as a pharmacist. Slightly fewer (88%) agreed or strongly agreed that their trainee experienced a range of professional practice to meet their developmental needs, and fewer again (85%) that the training fully covered the GPhC assessment syllabus.

### **Barriers impacting on training quality**

Most tutors reported that there were sufficient staff resources for the trainee to have time to learn as well as work with 72% agreeing or strongly agreeing compared with 78% last year, a significant difference. Tutors who worked in an independent community pharmacy and tutors from Scotland were more likely to agree. Over half of tutors (57%) agreed or strongly agreed that their workload allowed time for appropriate supervision of their trainee, with 20% disagreeing or strongly disagreeing. Tutors from Asian or ethnic groups other than White and those working in independent community pharmacies were more likely to agree.

Most tutors reported that they had access to sufficient support as a tutor in 2014-15 with 74% agreeing or strongly agreeing. Tutors who disagreed or strongly disagreed were more likely to work in the community pharmacy sector, not have been a tutor for the full 12 months, to have been the only tutor at the training site, and to have had an unplanned change in their tutoring in 2014-15.

Two-thirds of tutors agreed or strongly agreed (67%) that their employing organisation gave them sufficient support to supervise their trainees, with 13% disagreeing or strongly disagreeing. As in last year's survey, those from Asian and other non-white ethnic groups and those who worked for an independent community pharmacy were more likely to agree.

### **Conclusions and issues for consideration**

The survey findings confirm many of the key results of last year's survey of pre-registration tutors and extend understanding of the factors that impact on tutor experiences and, in turn, the experiences of their trainees. The profile of pre-registration tutors in England, Scotland and Wales in 2014-15 with regard to their previous experience of tutoring, their reports of the support available both to them and to their trainees, their perceptions of training quality, and their training and development needs is broadly similar to that of the 2013-14 cohort. The tutor cohort encompasses extensive experience of pharmacy practice and many tutors also have substantial experience of tutoring trainees. There continues to be a substantial number of tutors who have more limited but growing experience of both tutoring and of pharmacy practice, whose support needs are higher, and who were under-represented in both last year's and this year's surveys.

The majority of tutors rate the quality of the training and support provided to trainees by their organisation very highly. Lower ratings of the support provided to trainees



were more likely to be given by less experienced tutors. In comparison to the ratings of quality given by pre-registration pharmacist trainees in previous GPhC surveys, the tutors' ratings were again consistently higher. The gaps were widest regarding perceived quality of educational supervision, perceived coverage of the GPhC assessment syllabus during the pre-registration period and perceived quality of support.

Although most tutors reported that staff resources, their workload and access to support allowed both their trainee and themselves to have an appropriate training experience, this was not so in a substantial minority of cases and the results were less positive than in the 2013-14 survey. Tutors who did not agree that they had access to sufficient support were more likely to work in the community pharmacy sector, not to have been a tutor for the full 12 months, have been the only tutor at their training site and to have had an unplanned change in their tutoring in 2014-15.

Encouragingly, more than half of respondents expressed interest in further training and development in identification/management of a trainee in difficulty, giving effective feedback, and in coaching/mentoring.

Overall the findings of the GPhC's first two annual surveys of pre-registration tutor experiences indicate that in the early years of the tutor role access to additional support and development are needed. There is also some evidence that tutors who were a joint tutor or who tutored for less than the full 12 months may also have additional support and development needs. There is a group of tutors who report not having access to peer support from another tutor, contributing to professional isolation. The survey data confirms that unplanned changes in tutoring during the pre-registration period can have an adverse effect on tutor access to support. The incidence of such unplanned changes was significantly higher in the 2014-15 survey, with 14% of tutors reporting an unplanned change, and was higher among tutors working in national level community pharmacy organisations in both years of the survey. Consideration can be given to possible ways of ameliorating the effects of unplanned changes and their potential to negatively impact on trainees.

The survey results can be used by the GPhC and others to discuss and explore these issues further as part of the continuing programme of work on quality of pre-registration training.

## 1. BACKGROUND

In 2014 the General Pharmaceutical Council (GPhC) commissioned a national survey of pre-registration pharmacist tutors who had tutored a trainee in 2013-14. The survey was repeated in 2015 with pre-registration tutors who had tutored a trainee in 2014-15. The work was undertaken by the University of Bradford (UoB) and Information by Design (IbyD). This survey is part of the GPhC's survey programme (which also includes surveys of pre-registration trainee experience) and which aims to obtain pharmacists' assessment of different aspects of the training environment.

The objectives of the survey of tutors were, for the 2014-15 pre-registration year, to:

- Understand and describe the profile of the tutors;
- Better understand how well tutors feel supported in their role;
- Identify any barriers which might impact on the quality of training they are able to offer;
- Identify where tutors may need further support;
- Explore any differences and associations with tutor factors (previous tutor experience, ethnicity), geographical area (London/ rest of England/Scotland/Wales), and pharmacy sector factors (e.g. type of employing organisation)
- Where relevant, to compare the findings with those from the surveys of trainees

Specific questions relating to these objectives are:

### **How well do tutors feel supported in their role?**

- How well do they feel supported by their employer? For small independent community pharmacies, what external support/networks are utilised?
- How well do they feel supported by the GPhC through tutor guidance and the pre-registration manual?

### **Which barriers impact on the quality of training provided?**

- What is the impact of staff resources and workload?

### **Where might tutors need further support and development?**

- Do tutors feel confident in assessing trainee performance, providing feedback, being a professional role model, and identifying/managing problem trainees?
- What development/training would help them in their tutor role?

This report summarises the key results from the tutor survey, identifies where there are statistically significant differences between some of the key groups of tutors and discusses the issues that have emerged. The report also identifies where there are statistically significant differences between the 2014-15 tutors and the 2013-14 tutors. There was not a survey of pre-registration trainees covering the 2014-15 training period. However, although direct comparisons of experience are not possible, where relevant, results are compared with those from the 2013-2014 survey of pre-registration trainees to illustrate key principles.

## Overview of the Pre-registration Pharmacist Tutor Role

Requirements for pre-registration pharmacist tutors are specified by the GPhC in their Pre-registration training – tutor suitability policy<sup>2</sup>. In order to apply to be a pre-registration tutor, the policy states that the candidate must:

- be a registered pharmacist in Great Britain
- have been practicing in the sector in which they would like to tutor for three years or more
- satisfy the assessment criteria if under investigation by the GPhC.

Pre-registration trainee pharmacists training in Great Britain have a designated tutor. If their training is split between different sectors of practice or split between training sites in the same sector, a trainee will have more than one designated tutor. During training, trainees may be supervised by more than one person but their designated tutor or tutors have overall responsibility for supervising them.

The tutor is responsible for supervising the trainee's training and signing them off as competent at specified points during the training year. In doing so the tutor assesses their trainee against a set of performance standards throughout the training year and assesses whether a trainee is sufficiently competent in order to be eligible to sit the registration assessment. The tutor also signs the final declaration to confirm that the trainee is competent to be a registered pharmacist.

Currently most pre-registration trainee pharmacists will spend their full 12 months with the same tutor and in the same premises. A small percentage of trainees choose different training options including, for example, two 6-months' placements, which could be in different pharmacy sectors, or in different settings within the same sector. The GPhC survey of pre-registration pharmacist trainees has provided a profile of the uptake of these different models. Joint tutoring arrangements operate in some pre-registration training programmes, with a 'lead' and a 'support' tutor. Such arrangements have to be submitted to, and approved by, the GPhC.

There is no formal training or assessment required in order to become a tutor, however it is advised by the GPhC that new and existing tutors undertake training and CPD in this area. In 2014, the GPhC published guidance on tutoring for pharmacists and pharmacy professionals<sup>[1]</sup>. The guidance outlines the GPhC's expectations of someone in a tutoring role.

### Pre-registration training programmes

Submission of a written training programme is required in order for any pharmacy premises to be accredited by the GPhC for the purposes of pre-registration training. In large community pharmacy organisations these programmes are usually submitted as part of a "multiple site application" by company pre-registration managers, training managers or superintendents rather than the individual tutors themselves. The GPhC requires all applications to be updated on a three-yearly basis.

There are some national (Scotland; Wales) and regional (England) NHS pre-registration pharmacist training schemes organised through the hospital sector. The

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<sup>2</sup> Pre-registration training – tutor suitability [http://pharmacyregulation.org/sites/default/files/pre-registration\\_tutor\\_suitability\\_july\\_2014.pdf](http://pharmacyregulation.org/sites/default/files/pre-registration_tutor_suitability_july_2014.pdf)

schemes provide additional support for tutors by offering, for example, a network supported by a regional facilitator, regionally produced support materials and off-site training opportunities for trainees. In community pharmacy, there are company-provided programmes which may include a pre-registration manager, centrally-organised off-site training and company-wide documentation and procedures. Independent community pharmacies may choose to subscribe to a programme from an external provider (for example the National Pharmacy Association) which offers similar support components. All of these programmes reduce the administrative burden on an individual tutor as well as providing a source of advice and, when needed, troubleshooting. Some also offer training and development for tutors.

## 2. DEVELOPING THE SURVEY

A review of the 2013-2014 survey questionnaire was undertaken in 2015 by the UoB team with lbyD and GPhC. Some small changes were made to the questionnaire in response to the findings from the 2013-2014 survey and feedback from respondents and stakeholders. A new question was included to explore tutor awareness of the forthcoming changes to the GPhC Registration Assessment and their use of related information on the GPhC website.

The revised draft questionnaire was then subjected to internal review by the GPhC and lbyD. Some small further changes were made to the survey questions in the light of the comments received.

The survey was conducted from October 2015 to allow time for reflection on the 2014-15 pre-registration tutoring experience. Like the pre-registration trainee survey, the tutor survey was web based; lbyD designed the web version, scripting and routing the questions in consultation with the GPhC and the UoB team.

The electronic survey was field tested internally by the GPhC and UoB staff. Some further small amendments to the survey were made. The electronic survey was then finalised ready for distribution.

The final version of the questionnaire consisted of 33 questions: 10 covering eligibility to complete the survey / area of practice / demographics; and 23 questions relating to respondents' pre-registration tutoring experience / support available to the respondent in their role as tutor / tutor training / quality of support available to trainees / barriers impacting on the quality of training delivered.

### 3. CONDUCTING THE SURVEY

All tutors in the GPhC accredited training premises in England, Scotland and Wales who were assigned a trainee in 2014-15 were sent the survey (n=3630). A filter question at the beginning of the online survey asked whether the respondent had tutored a trainee in 2014-15. Those who said they had not tutored a trainee were then asked not to proceed with the survey. Those who said they had tutored a trainee in 2014-15 were then asked whether they had undertaken a progress review with the trainee and/or signed off a trainee at the end of the training period. Those who said that they had not undertaken a progress review or signed the final declaration were asked not to complete the survey. Additionally, those who had only signed off a trainee who was on a six-month placement because they had failed their registration assessment twice were also asked not to complete the survey. The survey was launched on 14 October 2015 and closed on 10 February 2016.

The survey was actively publicised by the GPhC in several ways. A press release was issued and participants received a pre-survey email from the GPhC to alert them to the forthcoming survey. The GPhC also maintained contact with stakeholders to ensure they were kept informed about the survey and they were encouraged to raise awareness among pharmacists in their organisations and networks.

The GPhC provided lbyD with the names and e-mail addresses for the survey population. Survey participants received an email with a web link to the survey in October. Participants could complete the survey on desktop, tablet or mobile devices and could save and return to their responses. The invitation email stressed that the survey was anonymous and that no individual or training site would be identifiable. Participants were also reminded that if they had any concerns about their training role as a pre-registration tutor they could contact the GPhC directly.

Follow-up emails were sent to non-responders after 8 days and then at 6-26 day intervals. The survey ran for a period of 18 weeks and there were 811 responses after eight reminders compared with 675 for the 2013-14 survey. The table above shows the cumulative number of completed surveys at each reminder.

	Date	Cumulative number of completed surveys
<b>Email reminder 1</b>	22/10/2015	245
<b>Email reminder 2</b>	04/11/2015	352
<b>Email reminder 3</b>	18/11/2015	430
<b>Email reminder 4</b>	25/11/2015	508
<b>Email reminder 5</b>	04/12/2015	560
<b>Email reminder 6</b>	10/12/2015	600
<b>Email reminder 7</b>	17/12/2015	643
<b>Email reminder 8</b>	12/01/2016	680
<b>Survey closed</b>	10/02/2016	811

#### 4. SURVEY ANALYSIS

Analysis of the survey was undertaken in SPSS, and data cleaned and checked for errors prior to producing frequency tables. Cross-tabulations were produced by:

- geographical area (London/ rest of England/Scotland/Wales),
- pharmacy sector,
- employer type,
- ethnicity, and
- years been a pre-registration tutor

Cross-tabulations were also produced comparing the results from the 2014-15 survey to the 2013-14 survey.

In total, 811 responses were obtained from pre-registration tutors. The sample size provides sufficient data for significance tests to be performed in order to examine differences by key variables. The overall sampling error on this survey of 811 respondents is estimated as  $\pm 3.4\%$ . Sampling errors occur because of variation in the number or representativeness of the sample that responds. Strictly speaking, each question will differ, as the sampling error is also dependent on the individual responses to the question. As such, for a 'statistically significant' finding, a difference of approximately 3% may be significant when looking at the full sample. For any differences to be statistically significant in the smaller sub-samples (for example, comparisons at region/country level), larger differences may be required, depending on the number of responses in each cell. Tests were performed on the sub-samples and any significant differences are shown below the relevant chart/table.

To ensure statistical tests were reliable, some scales were 'collapsed' to provide larger cell sizes (this is standard practice in the reporting of surveys). The table below shows an example.

Overall, how would you personally rate the quality of the support your organisation provided for trainee/s?			
Full Scale		Collapsed Scale	
Very Poor	6	Very poor/poor	21
Poor	15		
Neither good nor poor	71	Neither good nor poor	71
Good	321	Very good/Good	713
Very good	392		
Not sure	6	Excluded	-

In order to enable comparisons by country, responses from participants in Scotland (n=73) and Wales (n=23) were analysed separately. The number of respondents was sufficiently large to enable statistical testing to be undertaken for some of the variables.

In the GPhC survey of pharmacist registrants, London is included in the analysis as a separate geographical area. The number of tutors who had tutored trainees in London was sufficiently large for this purpose in the current survey. Therefore results are presented by Region/Country: London / Rest of England / Scotland /

Wales. The same analysis was also undertaken for the 2013-14 tutors' survey and the 2012-13 and 2013-14 trainee surveys.

Representativeness of the tutor respondents was assessed by comparison with the data which GPhC records for the total population of tutors: age, gender, country and year since registration. The GPhC had records of pharmacy sector (community or hospital) and, within the community pharmacy sector, national community pharmacy chain/ other community pharmacy for around half (1861) of the total population of tutors who were assigned a trainee in 2014-15. Therefore, it was not possible to assess representativeness for these fields.



## 5. RESULTS

### 5.1 DEMOGRAPHY OF RESPONDENTS

A total of 3,630 tutors were invited to take part in the survey. A total of 158 (4.4%) responded to the survey but were ineligible to participate: 114 stated that they had not tutored a pre-registration trainee in 2014-15, 28 said they had not signed a final declaration or undertaken at least one progress review in 2014-15 and 16 had only signed off a trainee who was undertaking six months of supervised employment after failing their registration assessment twice.

A total of 811 (22%) individuals completed the survey. Although a higher number of completed responses was achieved than the 675 in the 2013-14 survey, the response rate is lower (22% compared to an estimated response rate of 30-33% from the 1828 eligible to participate in the 2013-14 survey) due to a higher number of tutors eligible to complete the survey in 2014-15.

A further 142 tutors started but did not complete the survey so were excluded from the results. Of these 63% (89) had used their mobile phone. This is higher than for those who completed the survey, where only 32% used their mobile phone. Of the tutors who completed the survey those who used a mobile phone were significantly younger than those who used PCs and tablets. The 142 tutors who started but did not complete the survey were younger than the tutors who completed the survey. 56% of the tutors who started but did not complete the survey were aged forty or under compared to 46% of the tutors who completed the survey.

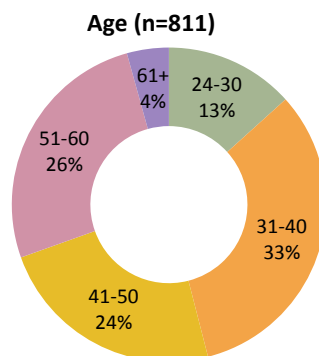
Similarly, in the 2013-14 survey 123 tutors started but did not complete the survey, of whom 53% (65) had used their mobile phone. Of the tutors who completed the survey, 22% used their mobile phone

### GENDER, AGE AND ETHNICITY

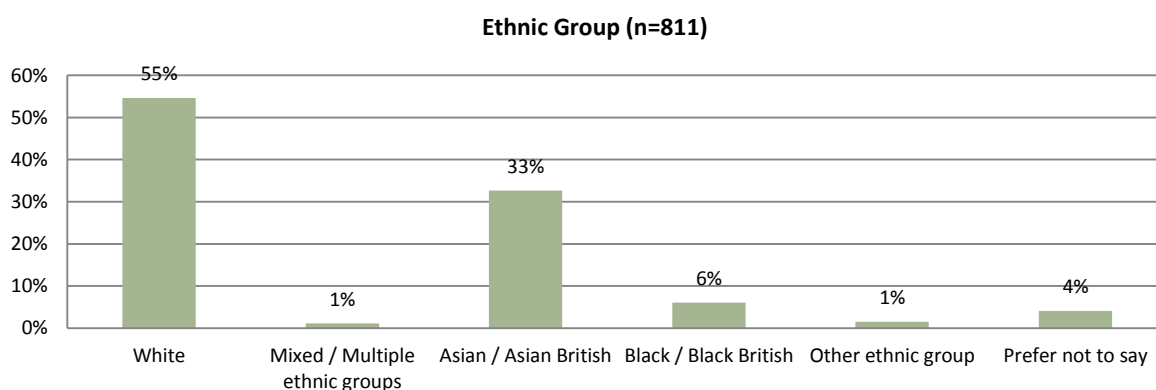
Fifty-two percent (52%, 418) of respondents were female, 48% (387) were male and one respondent was transgender. 1% (5) did not wish to disclose their gender. Females were slightly over-represented among the respondents (52% of respondents vs. 47% from the GPhC data on the total tutor population).

The mean age of respondents was 43.3 and the median age was 42; 13% (108) of respondents were aged between 24 and 30 years. 56% (456) of respondents were aged between 31 and 50 years. 30% (247) of respondents were aged over 50 years.

The profile of the analysable respondents was older than the total tutor population. 54% of respondents and 42% of the total tutor population were aged 41 years or over. The following chart shows the age profile of respondents.



Overall 55% (443) of respondents were White, 33% (265) were Asian or Asian British, 6% (49) were Black or Black British, 1% (9) from mixed or multiple ethnic groups and 1% (12) from other ethnic groups. Four per cent (33) of respondents did not disclose their ethnic group.



## GEOGRAPHY

The majority of survey respondents were from England with 23% (186) from London and 65% (529) from the rest of England. 9% (73) of respondents were from Scotland and 3% (23) were from Wales.

Country/Region	Count	%
<b>Rest of England</b>	529	65%
<b>London</b>	186	23%
<b>Wales</b>	23	3%
<b>Scotland</b>	73	9%
<b>Total</b>	675	100%

Overall the respondents were broadly similar to the total population of tutors. Geographical area was almost the same among the respondents and the total population.

## WORKING HOURS AND LENGTH OF SERVICE

The majority of respondents (84%, 685) worked 35 hours or more each week; 16% (126) worked fewer than 35 hours each week. The mean numbers of hours worked was 40.6 and the median hours worked was 40.

Seventy percent (70%, 569) of respondents had been qualified for 11 years or longer, with only 30% (242) qualified for 10 years or less. Most respondents (61%, 495) had been a pre-registration tutor for 5 years or less, 22% (179) for 6-10 years and 17% (137) for 11 years or longer (range 0-40 years).

## NUMBER OF TRAINEES

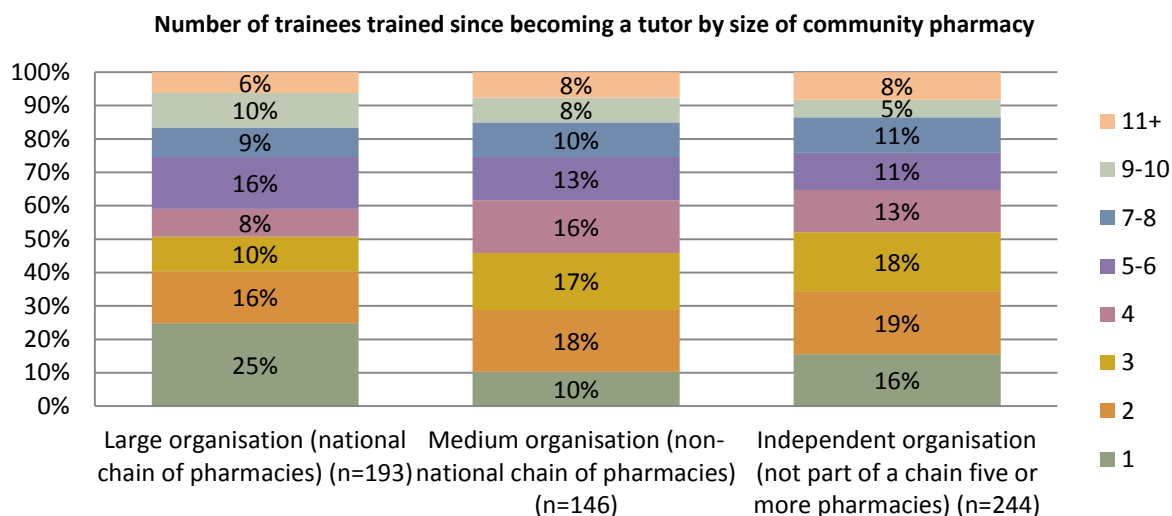
Two thirds of tutors (67%, 546) reported that they had been a tutor for up to five trainees since becoming a tutor. Twenty-one percent (168) of tutors reported having been a tutor for 6 to 10 trainees, 7% (55) for 11 to 15 trainees, 3% (23) for 16 to 20 trainees and 2% (19) for 21 or more trainees.

The chart below shows a scatter plot of the number of trainees that tutors had supervised by the age of the tutor. The chart excludes four tutors who reported having trained over 50 trainees (all of whom were hospital-based and were responsible for multiple trainees over many years). Of these four tutors:

- One has been a tutor for 30 years; there were 3 pre-registration trainees at the training site in 2014-15, of whom the tutor was responsible for one.
- One has been a tutor for 16 years; there were 16 pre-registration trainees at the training site in 2014-15, of whom the tutor was responsible for one.
- One has been a tutor for 15 years; there were 9 pre-registration trainees at the training site in 2014-15, of whom the tutor was responsible for two.
- One has been a tutor for 9 years; there were 12 pre-registration trainees at the training site in 2014-15, of whom the tutor was responsible for one.



The chart below shows the number of pre-registration trainees trained since the respondent became a tutor by community pharmacy organisation type. Those who work for large organisation community pharmacies were more likely to have trained one trainee.



**Significant difference between number of trainees trained since becoming a tutor and Employer Type (p=0.024)**

### PHARMACY SECTOR OF PRE-REGISTRATION TRAINING

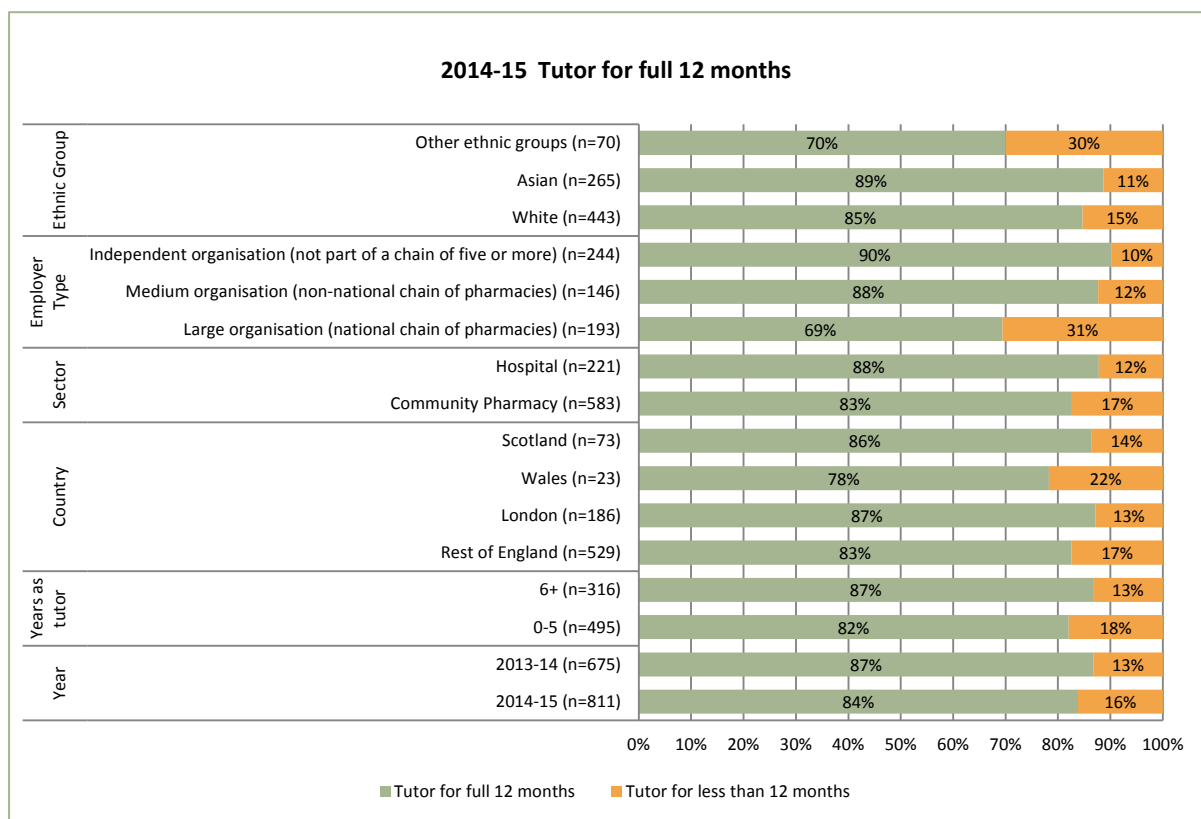
Community pharmacy was the setting for 72% (583) and hospital pharmacy for 27% (221) of tutors, with three respondents from pharmaceutical industry (0.4%) and four (0.5%) from 'Other<sup>3</sup>'. Within the community pharmacy sector over half the respondents (58%, 339) worked in large organisations (national chain pharmacies) (33%, 193) or medium organisations (non-national chain pharmacies) (25%, 146) and 42% (244) in an independent community pharmacy (not part of a chain of five or more pharmacies).

### TRAINEES SUPERVISED IN 2014-15

The majority of respondents, 84% (680), reported having been a tutor for the full 12 months during 2014-15 and 75% (607) of tutors had supervised the same trainee for the full 12 months period. Only 16% (131) of respondents reported having been a tutor for less than 12 months during 2014-15.

<sup>3</sup> Note: does not add up to 100% due to rounding. To one decimal place the figures are: community pharmacy 71.9%, hospital pharmacy for 27.3%, pharmaceutical industry 0.4%, other 0.5%

There is a significant difference in respondents reporting having been a tutor for the full 12 months during 2014-15 according to type of employer and ethnic group. Those working for a large organisation or from an ethnic group other than White or Asian were less likely to have been a tutor for the full 12 months.



Significant difference between tutors for full 12 months and Ethnic Group (p=0.001)

Significant difference between tutors for full 12 months and Employer Type (p=0.000)

Ten per cent (82) of respondents reported having been a joint tutor in 2014-15, with 7% (60) having been a joint tutor for the full 12 months and 3% (22) for less than 12 months. Seven per cent (55) of respondents were a lead joint tutor and 3% (27) were a support joint tutor.

Two per cent (20) of respondents reported having been a Bradford sandwich tutor in 2014-15, with 1% (9) having been tutor for the full 12 months and 1% (11) having been tutors for less than 12 months.

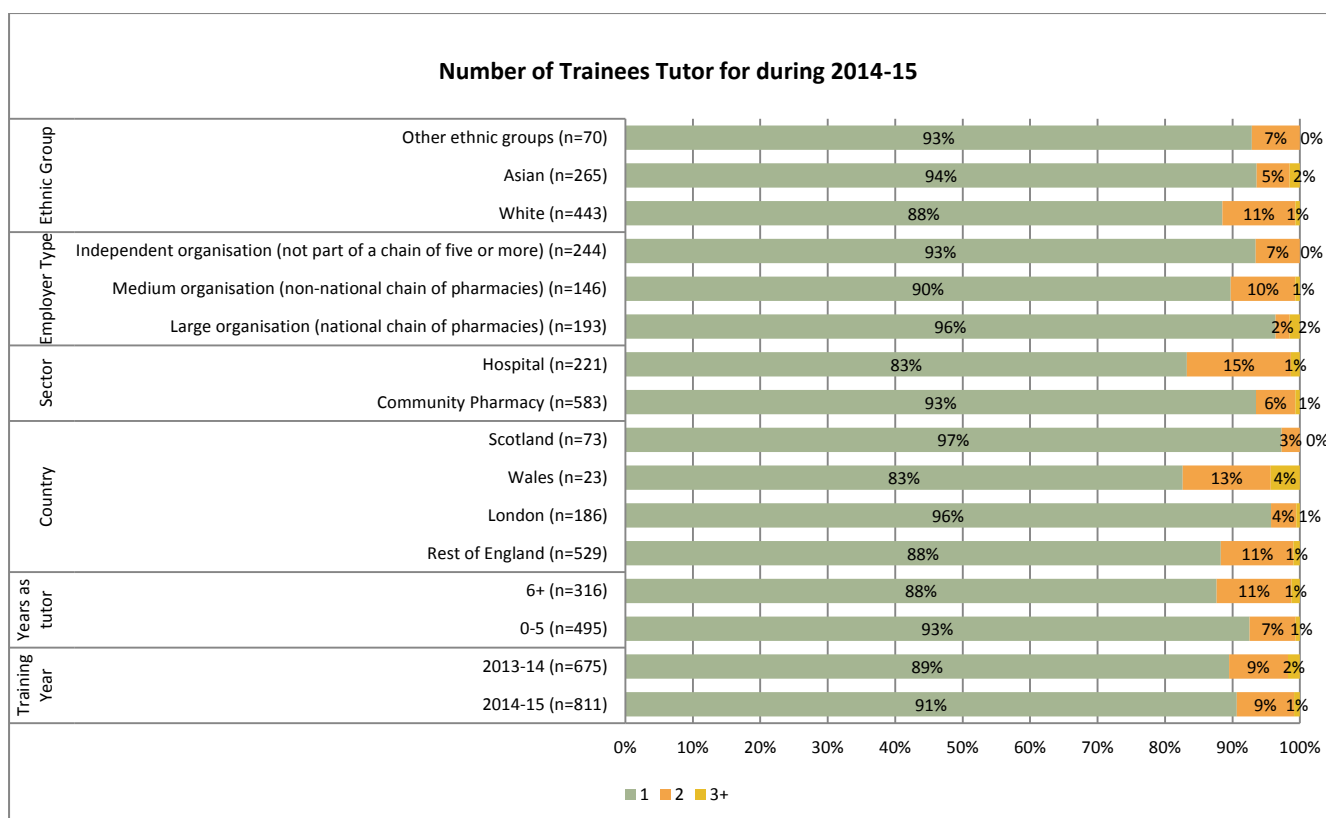
Tutor in 2014-15		
	Count	%
<b>I was a tutor for the full 12 months with the same trainee</b>	607	75%
<b>I was a tutor for the full 12 months with different trainees</b>	27	3%
<b>I was a joint tutor for the full 12 months (lead)</b>	41	5%
<b>I was a joint tutor for the full 12 months (support tutor)</b>	19	2%
<b>I was a Bradford sandwich tutor for the full 12 months</b>	9	1%
<b>Other - for full 12 months</b>	4	0%
<b>I was a tutor for less than 12 months with the same trainee</b>	93	11%
<b>I was a tutor for less than 12 months with different trainees</b>	4	0%
<b>Joint tutor for less than 12 months (lead)</b>	14	2%
<b>Joint tutor for less than 12 months (support tutor)</b>	8	1%
<b>I was a Bradford sandwich tutor for less than 12 months</b>	11	1%

**Other - for less than 12 months**

5 1%

Ninety-one percent of respondents (91%, 735) were responsible for a single trainee during 2014-15. 9% (69) were responsible for two trainees and 1% (7) were responsible for three or more trainees (range 1-17 trainees).

There is a significant difference in the number of trainees for whom a respondent tutored during 2014-15 by ethnic group, pharmacy sector worked in, size of community pharmacy and country. Tutors from White ethnic groups, those who work in a hospital, those who work in a medium organisation community pharmacy and those from Wales were more likely to have been a tutor for more than one trainee.



**Significant difference between number of trainees and ethnic group (p=0.049)**

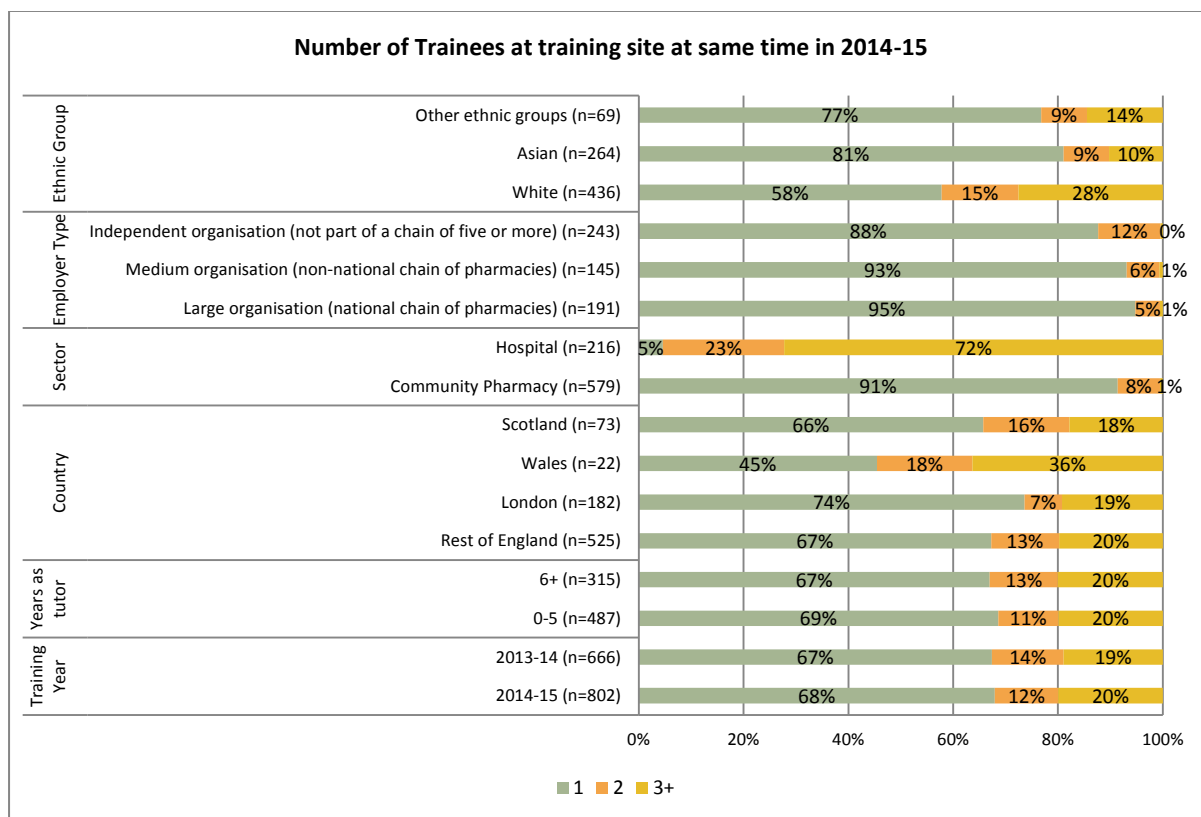
**Significant difference between number of trainees and employer type (p=0.013)**

**Significant difference between number of trainees and sector (p=0.000)**

**Significant difference between number of trainees and country (p=0.009)**

Two-thirds of training sites (67%, 545) had a single pre-registration trainee; 12% (97) had two pre-registration trainees and 20% (160) had three or more. Nine respondents (1%) were unsure of how many pre-registration trainees were at their training site.

There is a significant difference in the numbers of trainees at the training site at the same time during 2014-15 according to the tutor's ethnic group and pharmacy sector worked. Those from Asian ethnic groups and those who work in the community pharmacy sector were more likely to have been a tutor at a site with single pre-registration trainee.



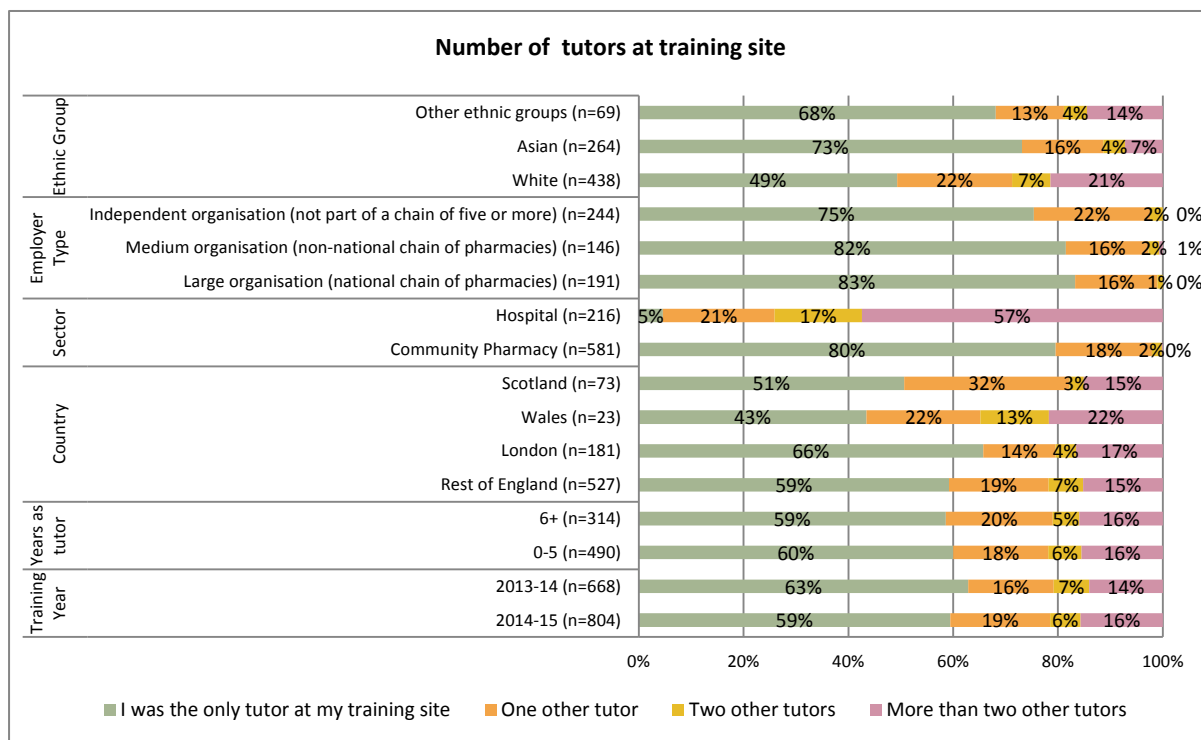
Significant difference between number of trainees at training site and ethnic group (p=0.000)

Significant difference between number of trainees at training site and sector (p=0.000)

'Not sure' excluded

The majority of training sites (59%, 478) had a single pre-registration tutor; a further 19% (153) had two tutors, 6% (47) had three and 16% (126) had more than three. Seven respondents (1%) were unsure of how many other pharmacy pre-registration tutors were at their training site.

There is a significant difference in the numbers of tutors at the training site according to ethnic group, pharmacy sector worked in and country. Those from Asian ethnic groups and ethnic groups other than White or Asian, those who work in the community pharmacy sector and from London were more likely to have been the only tutor at the training site.



**Significant difference between number of tutors at training site and ethnic group (p=0.000)**

**Significant difference between number of tutors at training site and sector (p=0.000)**

**Significant difference between number of tutors at training site and country (p=0.041)**

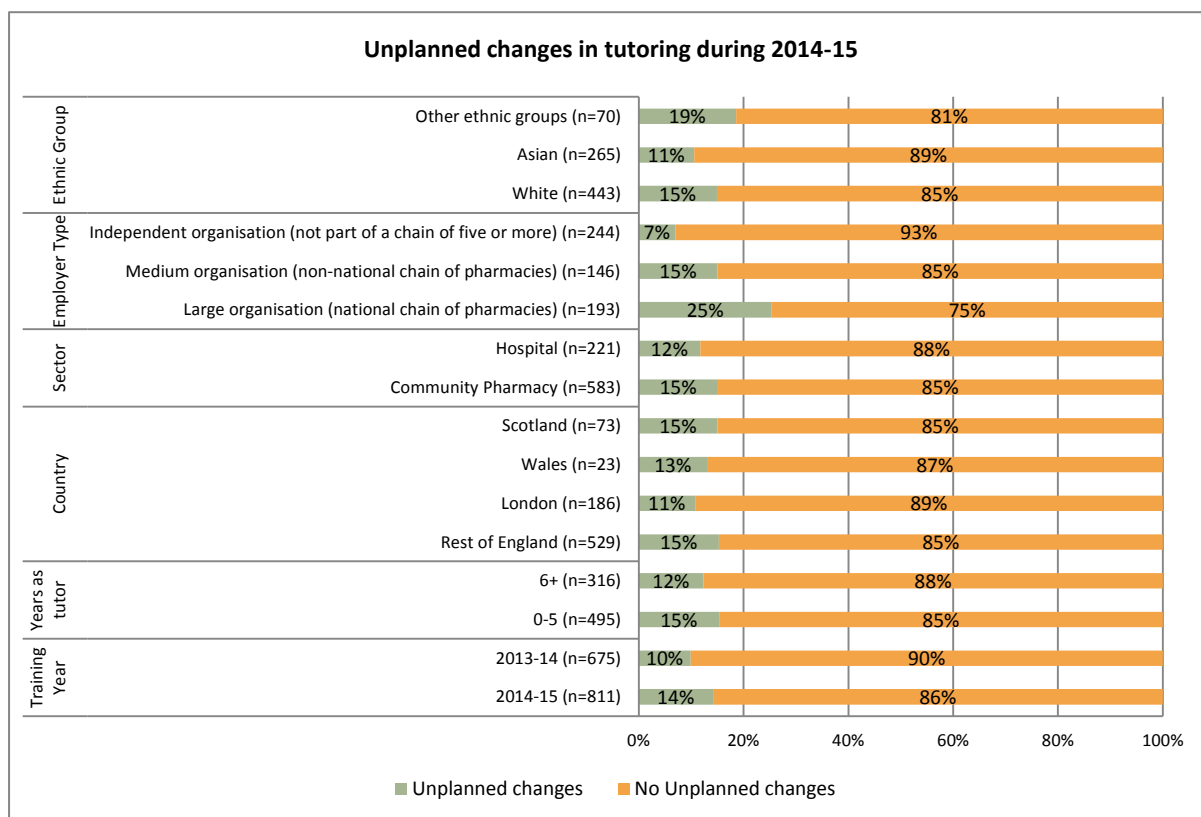
**'Not sure' excluded**

## UNPLANNED CHANGES DURING 2014-15

There were no unplanned changes in the vast majority (86%, 696) of cases. Of the 14% (115) who did report unplanned changes, in 4% (29) of cases a trainee was permanently moved to another site, and in 4% (35) the tutor had permanently moved to another site. 7% (58) of respondents had an unplanned change for another reason. These reasons included taking over from another tutor who left or was unable to continue as a tutor (for example because of illness or maternity leave), the tutor being away from the training site for a period of time (for example because of maternity leave), and a trainee leaving without completing their training.



There is a significant difference in unplanned changes in tutoring according to employer type and training year. Those working for a large organisation for community pharmacies and those tutors in 2014-15 were more likely to have had an unplanned change in tutoring.



Significant difference between unplanned changes and employer type ( $p=0.000$ )

Significant difference between unplanned changes and training year ( $p=0.013$ )

In the 2014-15 training year a higher proportion of unplanned changes in tutoring was seen in all types of community pharmacy organisation.

### Unplanned change in tutoring by employer type and training year

	2014-15		2013-14	
	Count	%	Count	%
<b>Large organisation (national chain of pharmacies)</b>	49	25%	22	19%
<b>Medium organisation (non-national chain of pharmacies)</b>	22	15%	14	11%
<b>Independent organisation (not part of a chain five or more pharmacies)</b>	17	7%	10	4%

In the 2013-14 survey of **trainees** six percent (48) of respondents reported having an unplanned permanent move of training site during their pre-registration period and 15% (121) reported having a change in tutor during the year.

## 5.2 SUPPORT AVAILABLE TO TUTORS

Tutors were asked whether they had access to a regional or national NHS pre-registration scheme (e.g. London Pharmacy Education & Training, Scotland Pre-Registration Pharmacist scheme), a community pharmacy pre-registration training programme (e.g. Numark, NPA, Buttercups), community pharmacy pre-registration training programme provided by their employing organisation.

The vast majority (92%, 744) of tutors reported that they had access to a pre-registration training programme in 2014-15 provided by the NHS, their community pharmacy employing organisation or another provider. 35% (282) had access to a regional or national NHS pre-registration scheme, 33% (270) had access to a community pharmacy pre-registration programme provided by their employing organisation, and 32% (259) had access to a community pharmacy pre-registration training programme from an external provider.

There is a significant difference in agreement with the statement 'as a tutor I had access to sufficient support in 2014-15' according to access to a training programme. Tutors who had access to a pre-registration training programme in 2014-15 provided by the NHS, their community pharmacy employing organisation or another provider were more likely to agree or strongly agree with the statement 'as a tutor I had access to sufficient support in 2014-15'.

As a tutor I had access to sufficient support in 2014-15 ('Not sure' excluded)				
		Strongly disagree/ disagree	Neither agree nor disagree	Strongly agree/ agree
Access to a pre-registration training programme in 2014-15 provided by the NHS, their community pharmacy employing organisation or another provider	%	9%	15%	77%
	Count	63	111	567
No access to training programme	%	34%	14%	52%
	Count	22	9	34

The 67 tutors who reported not having access to a training programme were more likely to have been a pre-registration tutor for five years or fewer. Tutors who reported not having access to a training programme were less likely to be from Asian ethnic groups.

- There is a significant difference in access to a regional or national NHS pre-registration scheme according to ethnic group, pharmacy sector worked in and country. Those from White ethnic groups, those who work in a hospital and those from Scotland or Wales were more likely to have had access to a regional or national NHS pre-registration scheme.
- There is a significant difference in access to a community pharmacy pre-registration training programme according to ethnic group, pharmacy sector worked in, size of community pharmacy, country and years as a tutor. Those from Asian ethnic groups, those who work in an independent organisation community pharmacy, from London and who have been a tutor for 0 to 5 years were more likely to have had access to a community pharmacy pre-registration training programme.

- There is a significant difference in access to a community pharmacy pre-registration training programme provided by an employing organisation according to ethnic group, pharmacy sector worked in, size of community pharmacy, country and years as a tutor. Those from ethnic groups other than White and Asian, those who work for a large community pharmacy organisation and those who have been a tutor for 6 or more years were more likely to have had access to a community pharmacy pre-registration training programme provided by an employing organisation.

The majority of tutors (98%, 798) reported that they had access to other forms of support in 2014-15:

- 61% (493) had access to support from another tutor, with 56% (454) having support from another tutor in their employing organisation and 17% (135) from another tutor outside their employing organisation.
- 50% (407) had access to off-site tutor training opportunities.
- 46% (375) had access to a pre-registration manager in their employing organisation.
- 36% (288) had access to online learning modules.
- 5% (38) reported having access to another form of support.

Of the 5% of respondents who reported having access to another form of support, one tutor reported having support from the National Pharmacy Association and one from the Royal Pharmaceutical Society.

- There is a significant difference in access to *off-site tutor training opportunities* according to ethnic group, pharmacy sector and size of community pharmacy. Those from White and Asian ethnic groups, those who work in hospitals, and those who work in independent community pharmacies were more likely to have had access to off-site tutor training opportunities.
- There is a significant difference in access to a *pre-registration manager* in their employing organisation according to ethnic group, pharmacy sector, size of community pharmacy, country and training year. Those from White ethnic groups, those who work in hospitals, those who work in large organisation community pharmacies, and those from Wales were more likely to have had access to a pre-registration manager in their employing organisation.
- There is a significant difference in access to *another tutor* in their employing organisation according to ethnic group, pharmacy sector, size of community pharmacy and country. Those from White ethnic groups, those who work in hospitals, those who work in medium organisation community pharmacies, and those from Wales were more likely to have had access to another tutor in their employing organisation.
- There is a significant difference in access to *another tutor outside their employing organisation* according to pharmacy sector, size of community pharmacy and years as tutor. Those from who work in hospitals, those who work in independent community pharmacies, and those who had been a tutor for six or more years were more likely to have had access to another tutor outside their employing organisation.
- There is a significant difference in access to *online learning modules* according to pharmacy sector, size of community pharmacy and country. Those who work in community pharmacies, those who work in independent

community pharmacies, and those from Scotland were more likely to have had access to online learning modules.

- There is a significant difference in access to 'other' forms of support according to length of time as a tutor. Those who had been a tutor for six or more years were more likely to have had access to 'other' forms of support.

In the 2014-15 training year a higher proportion of tutors reported having access to a pre-registration manager in their employing organisation in all types of community pharmacy compared with the 2013-14 training year.

#### Access to a pre-registration manager in their employing organisation by employer type and training year

	2014-15		2013-14	
	Count	%	Count	%
<b>Large organisation (national chain of pharmacies)</b>	128	66%	66	58%
<b>Medium organisation (non-national chain of pharmacies)</b>	63	43%	56	42%
<b>Independent organisation (not part of a chain five or more pharmacies)</b>	20	8%	9	4%

#### AWARENESS AND USE OF GPhC RESOURCES FOR TUTORS

The majority of tutors (96%, 776) were aware of the GPhC Guidance on Tutoring for Pharmacists and Pharmacy Technicians and 76% (614) said they had used the guidance during 2014-15. Of the 614 tutors who reported using the Guidance, 92% (567) said they found it fairly or very useful.

Similarly, the majority of tutors (97%, 784) were aware of the GPhC's online pre-registration manual and 87% (702) report using it. Of the 702 tutors who reported using the online manual, 96% (670) had found it fairly or very useful.

Over three-quarters (78%, 636) had used the GPhC website to check for information on changes to the pre-registration scheme in 2014-15. Of the 636 tutors who reported using the GPhC website, 92% (588) said they found it fairly or very useful.

Eighty-four percent (84%, 681) were aware of the changes that the GPhC is making to the registration assessment in 2016 and 57% (465) had used the GPhC website to check for information about these changes. Of the 465 tutors who had used the GPhC website to check for information about changes to the registration assessment in 2016, 91% (425) said they found it fairly or very useful.

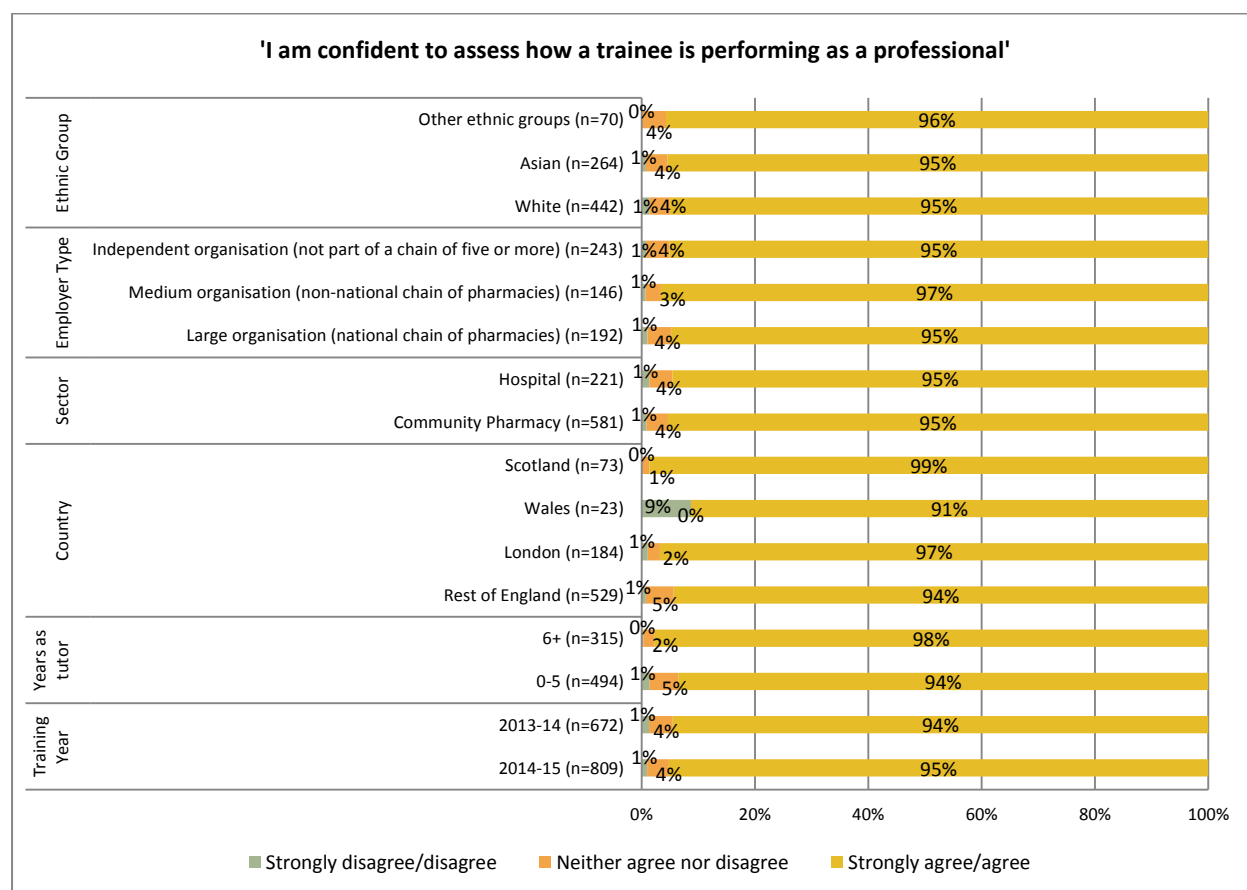
A small number of tutors (3%, 27) had not used any of the GPhC online resources mentioned above.

### 5.3 TUTOR TRAINING NEEDS AND INTEREST IN ADDITIONAL TRAINING

Tutors were asked how confident they felt in:

- Assessing how a trainee is performing as a professional - 95% (770) agreed they felt confident in doing so.
- Providing effective feedback following assessment – 93% (758) said they felt confident in doing so.

There is a significant difference between confidence in assessing how a trainee is performing as a professional according to country and to length of time as a tutor. Those who have been a tutor for 6 or more years were more likely to agree or strongly agree that they felt confident in assessing how a trainee is performing as a professional and those from Wales were more likely to disagree or strongly disagree that they felt confident in assessing how a trainee is performing as a professional.



Significant difference between confident to assess how a trainee is performing and country ( $p=0.003$ )  
 Significant difference between confident to assess how a trainee is performing and years as tutor ( $p=0.021$ )  
 'Not sure' excluded

When tutors were asked for their level of interest in training on a range of topics, the highest interest (more than 50% of respondents 'Very interested') was in:

- Identification and management of a trainee who is in difficulty (53%, 427)
- Giving effective feedback (52%, 422)
- Coaching & mentoring (52%, 420)

**How interested are you in undertaking training in the following topics? n = 811**

	Not interested	Fairly interested	Very interested	Not sure
<b>The types of evidence which can be used to assess a trainee</b>	14%	44%	39%	4%
<b>The GPhC pre-registration performance standards</b>	14%	42%	42%	3%
<b>Assessing a trainee's progress against the pre-registration performance standards</b>	13%	36%	49%	2%
<b>Dealing with diversity and providing equality of opportunity</b>	26%	43%	25%	6%
<b>Giving effective feedback</b>	10%	36%	52%	2%
<b>Identification and management of a trainee who is in difficulty</b>	9%	36%	53%	2%
<b>Coaching and mentoring</b>	11%	35%	52%	2%
<b>Setting and reviewing a pre-registration training plan</b>	14%	42%	41%	3%
<b>Other training</b>	25%	18%	13%	45%

Further analysis shows that the 53% (427) of tutors who were very interested in undertaking training on identification and management of a trainee who is in difficulty were more likely to:

- have been a pre-registration tutor for five or fewer years;
- have been joint tutor for the full 12 months (lead); and
- not be from a White ethnic group.

The 52% (422) of tutors who were very interested in undertaking training on giving effective feedback were more likely to:

- have worked in the community pharmacy sector;
- have been a pre-registration tutor for five or fewer years;
- to have trained four or fewer trainees since becoming a tutor;
- have been qualified as a pharmacist for ten or fewer years;
- have not been a tutor for the full twelve months in 2014-15;
- have been a joint tutor for less than 12 months (lead);
- have had unplanned changes in their tutoring in 2014-15; and
- not be from a White ethnic group.

The 52% (420) of tutors who were very interested in undertaking training on coaching and mentoring were more likely to:

- have worked in the community pharmacy sector;
- have been a pre-registration tutor for five or fewer years;
- to have trained three or fewer trainees since becoming a tutor;
- have been qualified as a pharmacist for fifteen or fewer years;
- have not been a tutor for the full twelve months in 2014-15;
- have had one trainee at their training site at the same time in 2014-15;
- have had unplanned changes in their tutoring in 2014-15;
- not be from a White ethnic group; and
- be aged forty or under.

The 26% (213) of tutors who were not interested in undertaking training on dealing with diversity and providing equality of opportunity were more likely to have trained eleven trainees or more since becoming a tutor and to be from a White ethnic group.

These findings can be considered in the context of data on the trainee perspective. In the 2013-14 survey of **trainees**, when asked if they were helped to reflect on their performance, 77% (637) of trainees agreed or strongly agreed that they were, with 12% (101) saying they disagreed or strongly disagreed. Trainees' experiences of the feedback received are summarised in the table below.

Element (n=829)	Strongly agree/ agree	Disagree/ strongly disagree
<b>Targets set</b>	65%	19%
<b>Constructive feedback received</b>	76%	14%
<b>Feedback was an accurate reflection on performance</b>	74%	11%
<b>Opportunity to contribute views</b>	81%	8%

#### 5.4 SUPPORT AVAILABLE TO TRAINEES

Tutors were asked what additional support was in place for their trainee/s in 2014-15. The majority of respondents (94%, 764) reported that off-site training opportunities were available. 77% (627) respondents reported online learning modules being available, 74% (602) that support from a network of trainees was available and 60% (490) that peer support from other trainees was available and 9% (70) that another form of support was available.

Comparison with data from the trainee perspective provides corroboration. In the 2013-14 **trainee** survey 86% (715) of respondents reported that their tutor or employer had arranged for them to attend off-site training. 83% (687) reported that peer support was available.

In the 2013-14 **trainee** survey only 3% (29) of respondents reported that they had no access to additional support systems. The majority of trainees had access to several types of support and most of these appeared to have been well-used.

- There is a significant difference in tutors reporting trainees having access to off-site training opportunities according to ethnic group, pharmacy sector and

length of time as tutor. Those from White ethnic groups, those who work in hospitals and those who have been a tutor for six or more years were more likely to report trainees having access to off-site training opportunities.

- There is a significant difference in tutors reporting trainees having access to online training modules according to pharmacy sector, size of community pharmacy, country, length of time as tutor and training year. Those who work in community pharmacies, those who work in large organisation community pharmacies, those from Scotland, those who had been a tutor for six or more years and those who were a tutor in 2014-15 were more likely to report trainees having access to online training modules.
- There is a significant difference in tutors reporting trainees having access to support from a network of trainees according to ethnic group, pharmacy sector, size of community pharmacy, country and training year. Those from White ethnic groups, those who work in hospitals, those who work in large organisation community pharmacies, those in Scotland and those who were tutors in 2014-15 were more likely to report trainees having access to support from a network of trainees.
- There is a significant difference in tutors reporting trainees having access to peer support from another trainee according to pharmacy sector, and size of community pharmacy. Those who work in hospitals and those who work in large organisation community pharmacies were more likely to report trainees having access to peer support from another trainee.
- There is no significant difference in tutors reporting trainees having access to “other” support according to according to ethnic group, to pharmacy sector, size of community pharmacy, country, length of time as tutor or training year.

In the 2014-15 training year a higher proportion of tutors reported trainees having access to online training modules in large and medium community pharmacies.

#### Additional support was in place for trainee/s in 2014-15 - Online learning modules

	2014-15		2013-14	
	Count	%	Count	%
<b>Large organisation (national chain of pharmacies)</b>	169	88%	95	84%
<b>Medium organisation (non-national chain of pharmacies)</b>	108	74%	87	65%
<b>Independent organisation (not part of a chain five or more pharmacies)</b>	186	76%	174	78%

In the 2014-15 training year a higher proportion of tutors reported trainees having support from a network of trainees in medium and independent community pharmacies.

#### Additional support was in place for trainee/s in 2014-15 - Support from a network of trainees

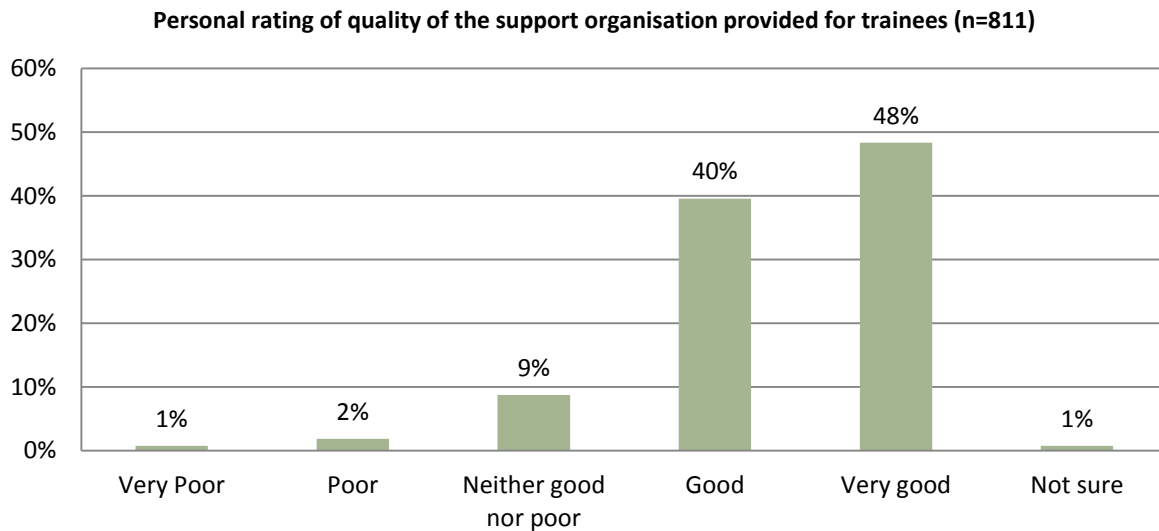
	2014-15		2013-14	
	Count	%	Count	%
<b>Large organisation (national chain of pharmacies)</b>	173	90%	101	89%
<b>Medium organisation (non-national chain of pharmacies)</b>	105	72%	82	62%
<b>Independent organisation (not part of a chain five or more pharmacies)</b>	123	50%	105	47%



## 5.5 PERCEIVED QUALITY OF TRAINING AND SUPPORT PROVIDED

Pre-registration tutors rated the quality of the training and support provided by their organisation very highly.

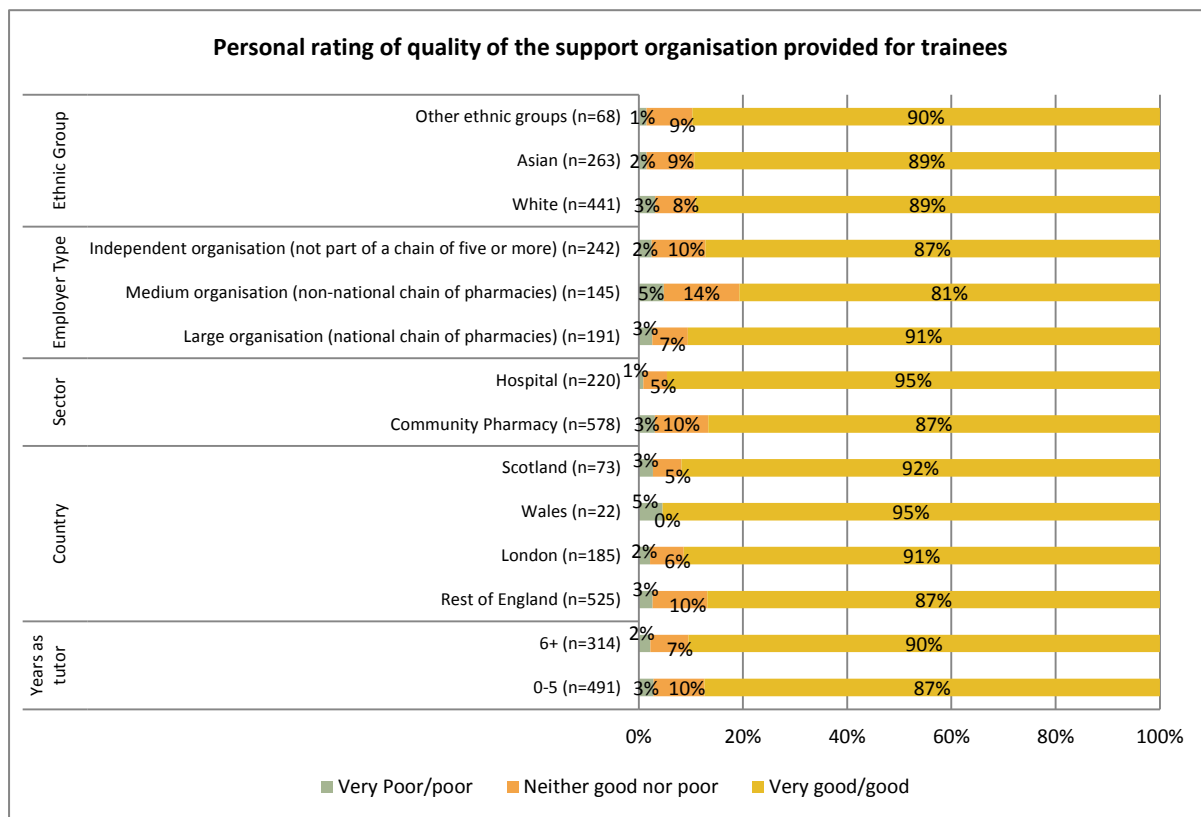
When asked for their personal rating of the quality of support their organisation provided for pre-registration trainees during 2014-15, 88% (713) of tutors rated this either 'Good' (40%, 321) or 'Very Good' (48%, 390), with 9% (71) 'Neither good nor poor', 3% (21) 'Poor/Very poor' and 1% (6) 'Not sure'.



The tutors who rated the quality of support their organisation provided for pre-registration trainees during 2014-15 as very poor, poor or neither good nor poor were more likely to:

- work in the community pharmacy sector
- work for a medium organisation community pharmacy,
- be at a training site where there was only one trainee, and
- have had an unplanned change in their tutoring arrangements

There is a significant difference in tutors' rating of the quality of support their organisation provided for pre-registration trainees according to sector. Those who worked in the hospital sector were more likely to rate of the quality of support their organisation provided for pre-registration trainees as very good or good.

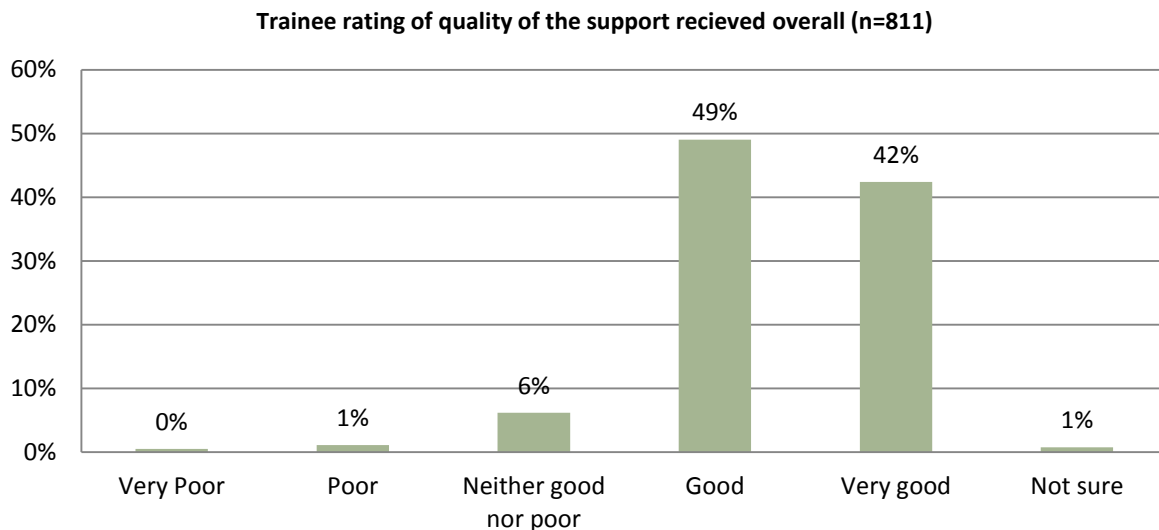


**Significant difference between personal rating of the quality of support organisation provided for trainees and sector (p=0.006)**

Respondents who had experienced an unplanned change in their tutoring during 2014-15 were less likely to rate the quality of the support their organisation provided for trainees as very good or good. 82% (93) of tutors who had had an unplanned change during their tutoring and 90% (620) of tutors who had not had an unplanned change in their tutoring would rate the quality of the support their organisation provided for trainees as very good or good, a significant difference.

In the **2013-14** tutor survey when asked for their personal rating of the quality of support their organisation provided for pre-registration trainees during 2013-14, 91% (614) of tutors rated this either 'Good' (25%, 169), 'Very Good' (40%, 273) or 'Excellent' (25%, 172), with 5% (37) 'Neither good nor poor', and only 2% (17) rated it 'Poor/Very poor' and 1% (7) 'Not sure'.

Tutors were asked to think about how their trainee felt about their training experience and to answer questions from the point of view of their trainee. When asked how they thought their trainee/s would have rated the quality of the support they received overall during 2014-15, 91% (742) of tutors' rated this as very good or good, 6% (50) neither good nor poor, 1% (9) as poor, 0.5% (4) as very poor and 1% (6) 'Not sure'.

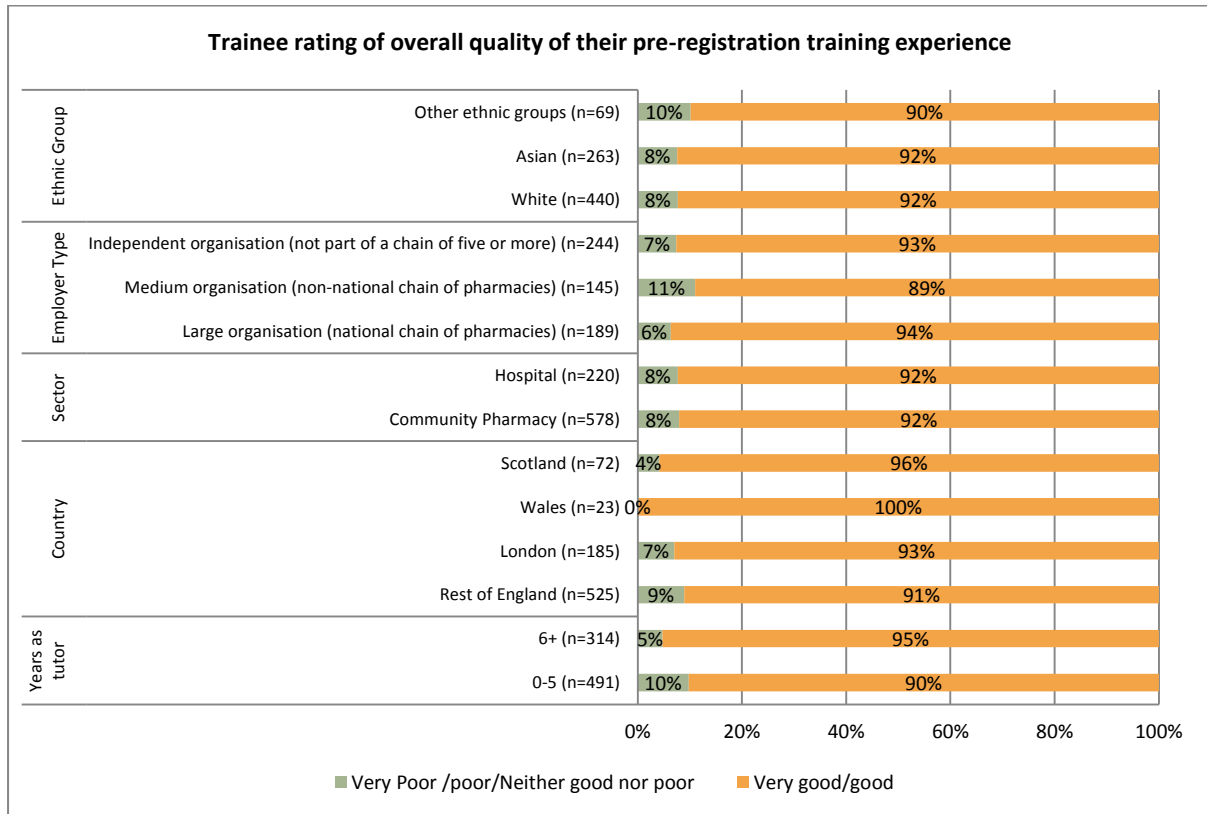


In the 2013-14 **trainee** survey the quality of support received during the year was rated excellent, good or adequate by the majority of respondents.

In the **2013-14** tutors survey when asked how they thought their trainee/s would have rated the support they received during 2013-14, tutors' ratings were: 'Adequate' (8%, 54), 'Good' (55%, 369), 'Excellent' (36%, 240), with only 1% (5) rated it 'Poor' and 1% (7) 'Not sure'.

Eighty-five per cent (94) of tutors who had had an unplanned change in their tutoring and 93% (648) of tutors who had not had an unplanned change in their tutoring thought that their trainee would rate the support that they received overall during the year as very good or good, a significant difference.

There is a significant difference in how tutors thought trainees would rate the quality of the support received during the year according to length of time as tutor. Those who had been a tutor for six years or more were more likely to think that trainees would rate the quality of the support they received as good or very good.



**Significant difference between trainee rating of overall quality of their pre-registration training experience and years as tutor**

When asked how they thought their trainee/s would have rated the overall quality of their pre-registration training experience during 2014-15, their ratings were: 'Good' (51%, 416) or 'Very Good' (38%), 310, with 4% (58) 'Neither good nor poor', 2% (13) 'Poor/Very poor' and 2% (14) 'Not sure'.

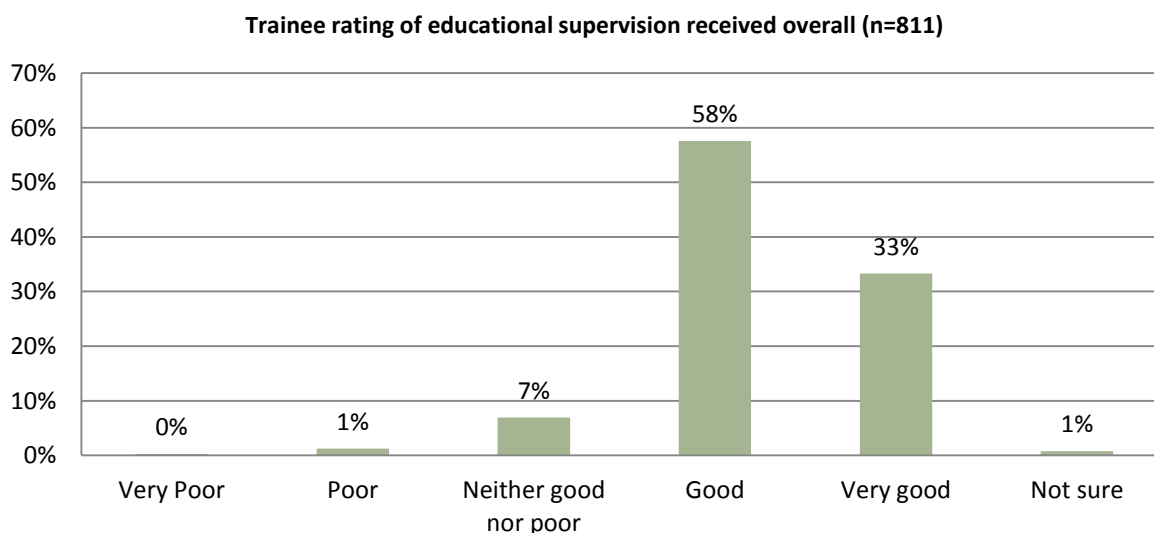


In the **2013-14** tutor survey, when asked how they thought their trainee/s would have rated the quality of their pre-registration training experience during 2013-14, their ratings were: 'Good' (29%, 199), 'Very Good' (48%, 325) or 'Excellent' (16%, 106), with 4% (28) 'Neither good nor poor', 1% (9) 'Poor/Very poor' and 1% (8) 'Not sure'.

In the 2013-14 **trainee** survey when asked to rate the overall quality of their training, 78% (649) of respondents agreed it was good/very good with only 7% (58) and 4% (31) respectively rating it as poor/very poor.

There is no significant difference in how respondents thought their trainee/s would have rated the quality of their pre-registration training experience according to ethnic group, pharmacy sector, size of community pharmacy, country or length of time as tutor.

When asked how they thought their trainee/s would have rated the educational supervision they received during 2014-15, the tutors' perceptions of trainees' ratings were: 'Very good (33%, 270), 'Good' (58%, 467), 'Neither good nor poor' (7%, 56), with 1% (12) 'Poor' or 'Very poor' and 1% (6) 'Not sure'.



In the **2013-14** tutors survey when asked how they thought their trainee/s would have rated the educational supervision they received, the tutors' perceptions of trainees' ratings were similarly positive: 'Adequate' (13%, 86), 'Good' (59%, 398), 'Excellent' (26%, 177), with only 1% (6) rating it 'Poor' and 1% (8) 'Not sure'.

In the **trainee** survey when asked to rate the quality of educational supervision during the year, 60% (499) rated this as excellent or good, 22% (181) rated it as adequate and 17% (141) rated it as very poor or poor.

When asked how they thought their trainee would rate the educational supervision they received and the support that they received overall during the year, respondents who had experienced an unplanned change in their tutoring thought their trainees would rate both the educational supervision received and the support received less highly than tutors who had not had an unplanned change. 86% (95) of tutors who had had an unplanned change in their tutoring arrangement and 93% (642) of tutors who had not thought that their trainee would rate the educational supervision they received as very good or good, a significant difference.

Tutors were asked how they thought their trainees would have perceived specific aspects of their training: coverage of the GPhC pre-registration standards, adequacy of preparation for their role as a pharmacist, adequacy of range of professional practice experience, and coverage of the GPhC assessment syllabus. The majority of respondents agreed or strongly agreed that the pre-registration performance standards were fully covered with 93% (755) agreeing with this, and that training prepared the trainee adequately for their role as a pharmacist with 92% (744) agreeing. 88% (710) of respondents agreed or strongly agreed that their trainee experienced a range of professional practice to meet their developmental needs. 85% (690) of respondents agreed or strongly agreed that the training fully covered the GPhC assessment syllabus.

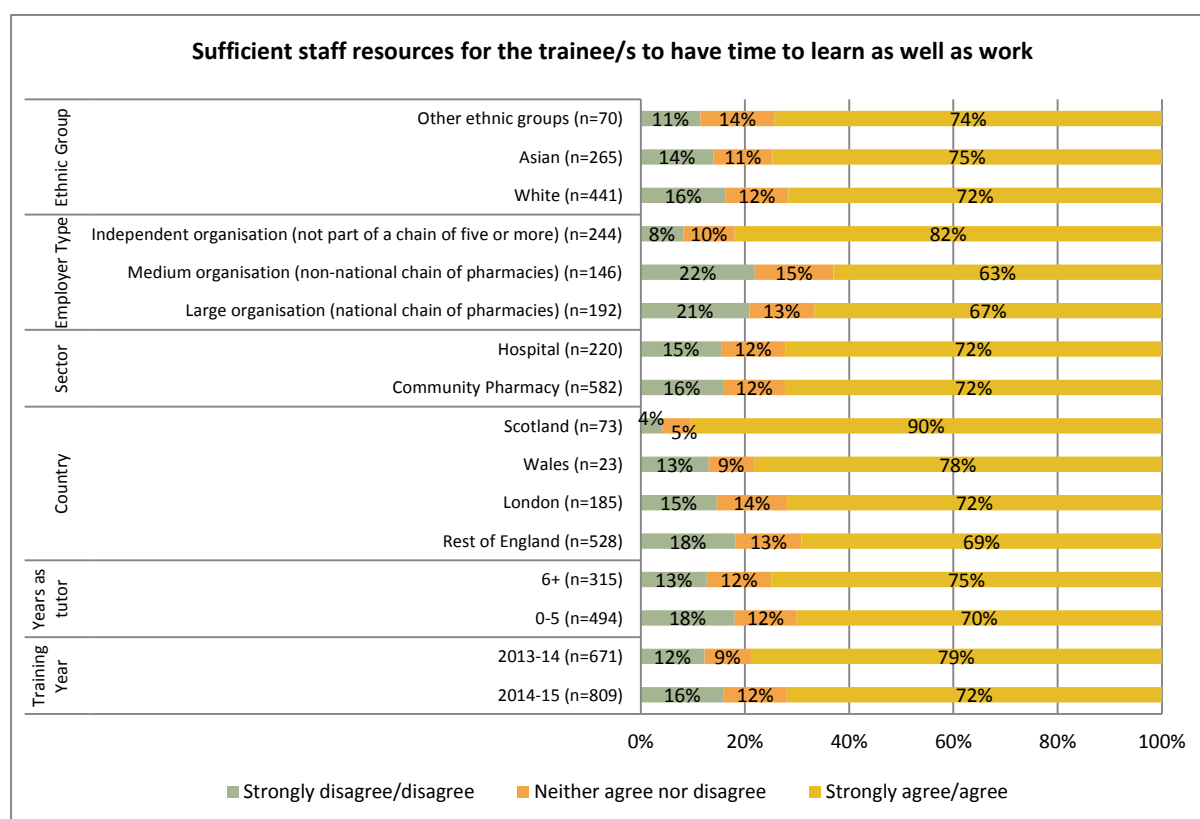
In the 2013-14 **trainee** survey when asked whether their training had enabled them to fully cover the GPhC's pre-registration standards, 87% (723) of respondents agreed or strongly agreed. The necessary range of experiences of professional practice was reported by 77% (636) of respondents. The percentage of respondents agreeing that their training enabled them to cover the GPhC assessment syllabus was 67% (557). At the end of their pre-registration training 78% (648) of respondents agreed or strongly agreed that they had received adequate preparation for their future role as a pharmacist. Fewer respondents, 69% (576) agreed or strongly agreed that the placement had fully prepared them for the registration assessment.

## 5.6 BARRIERS IMPACTING ON TRAINING QUALITY

Generally, tutors reported that there were sufficient staff resources for the trainee to have time to learn as well as work with 72% (582) agreeing or strongly agreeing. Respondents who disagreed or strongly disagreed that there were sufficient staff resources for the trainee to have time to learn as well as work were more likely to:

- work in a large or medium organisation community pharmacy,
- have been a tutor for between 0 and 5 years,
- have had an unplanned change in their tutoring in 2014-15,
- be female,
- be aged 30 year or under, and
- to be from England, not including London.

There is a significant difference in reporting of sufficient staff resources for the trainee to have time to learn as well as work according to size of community pharmacy, country and training year. Those who work in an independent community pharmacy, those from Scotland and those who were a tutor in 2013-14 were more likely to agree that there were sufficient staff resources for the trainee to have time to learn as well as work.



**Significant difference between sufficient staff for trainee to have time to learn as well as work and employer type (p=0.000)**

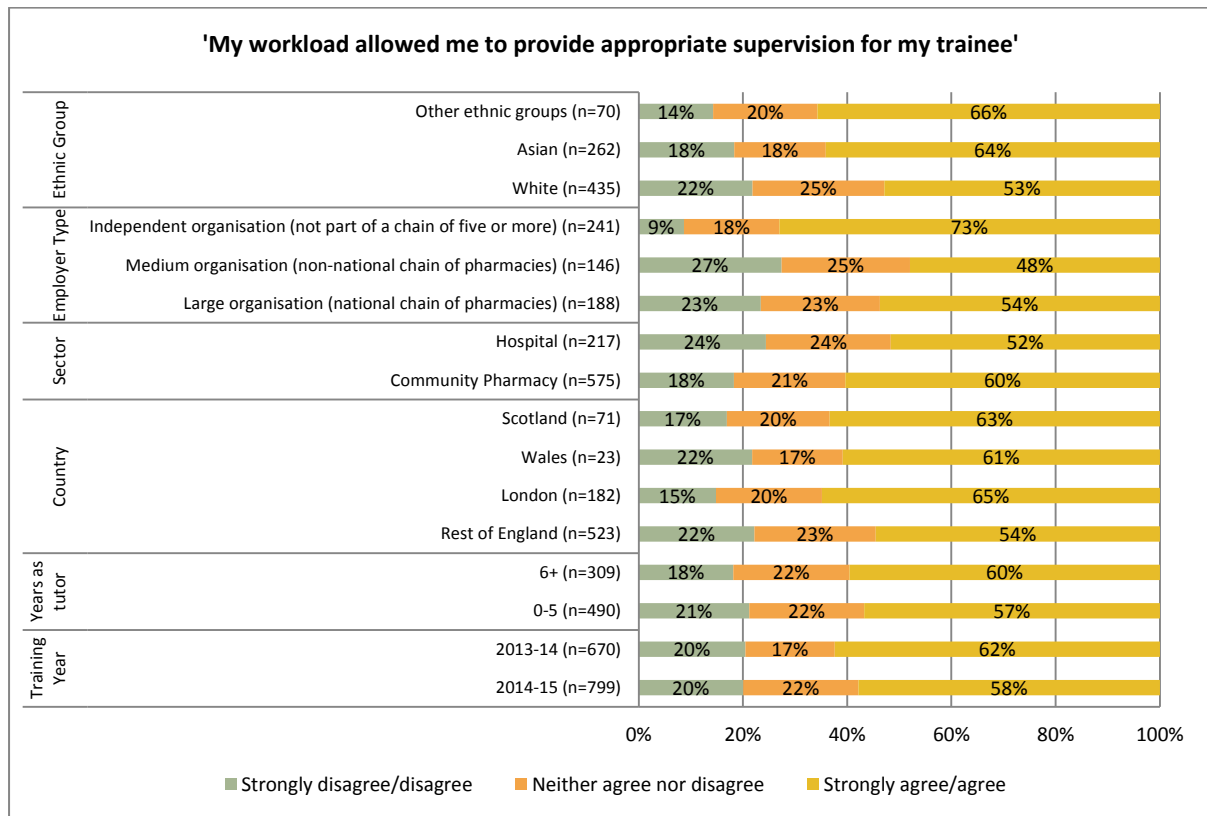
**Significant difference between sufficient staff for trainee to have time to learn as well as work and country (p=0.014)**

**Significant difference between sufficient staff for trainee to have time to learn as well as work and training year**

**(p=0.009)**

'Not sure' excluded'

Most tutors agreed or strongly agreed (57%, 462) that their workload allowed time for appropriate supervision of their trainee, with 20% (160) disagreeing or strongly disagreeing. There is a significant difference in agreement with the statement 'my workload allowed me to provide appropriate supervision for my trainee' according to ethnicity and size of community pharmacy. Those from non-white ethnic groups and independent community pharmacies were more likely to agree that their workload allowed time for appropriate supervision of their trainee.



Significant difference between agreement with 'my workload allowed me to provide appropriate supervision for my trainee' and ethnic group (p=0.024)

Significant difference between agreement with 'my workload allowed me to provide appropriate supervision for my trainee' and employer type (p=0.000)

'Not sure' excluded

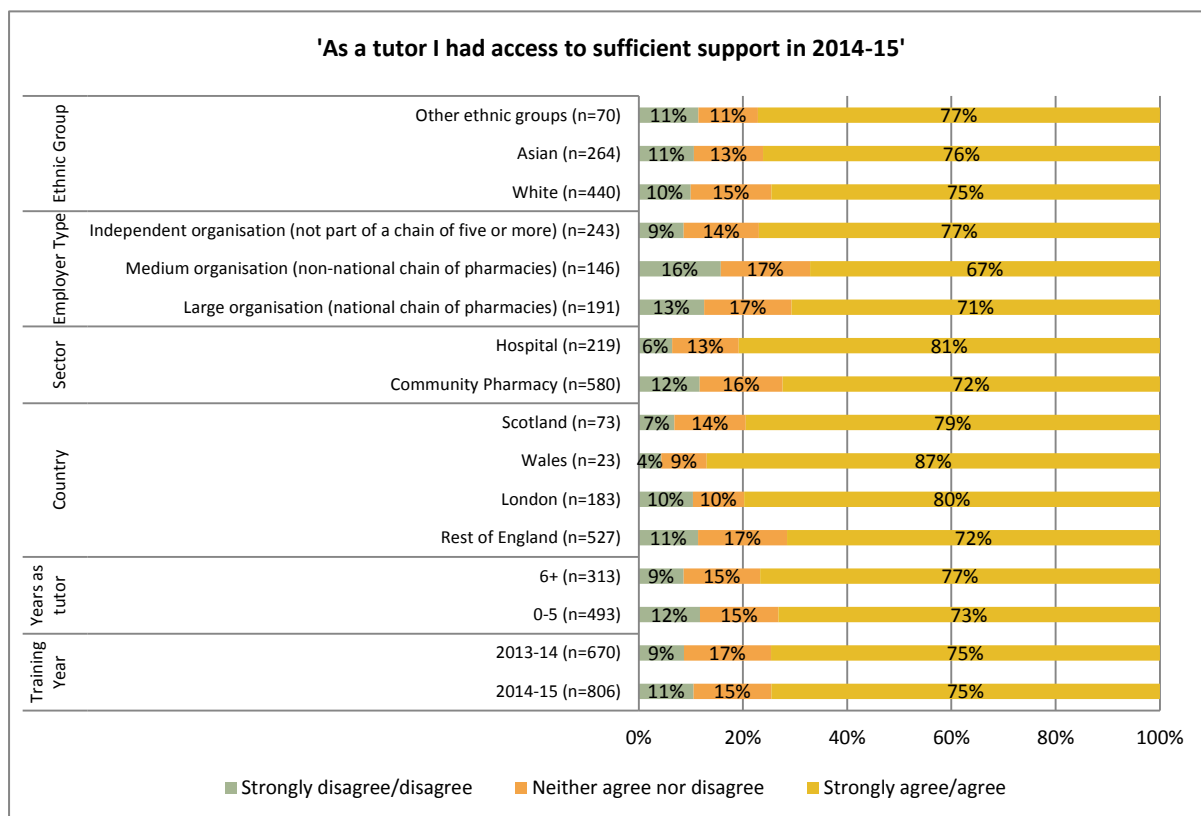
Similarly, most tutors reported that they had access to sufficient support as a tutor in 2014-15 with 74% (601) agreeing or strongly agreeing.

The tutors who disagreed or strongly disagreed that they had access to sufficient support as a tutor in 2014-15 were more likely to:

- Work in the community pharmacy sector,
- Not have been a tutor for the full 12 months,
- Have been the only tutor at the training site, and
- Have had an unplanned change in their tutoring in 2014-15.



There is a significant difference in agreement with the statement 'as a tutor I had access to sufficient support in 2014-15' according to sector. Those who worked in the hospital sector were more likely to agree with this statement.



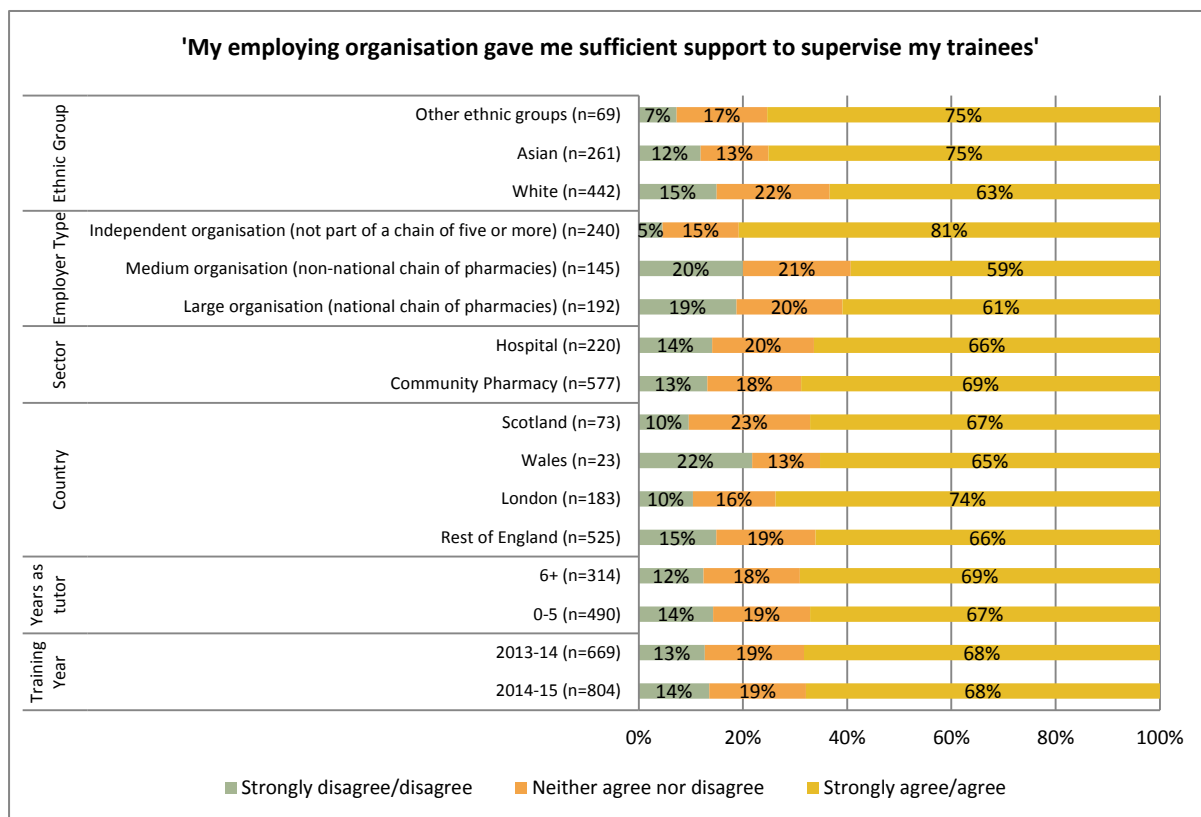
**Significant difference between agreement with 'As a tutor I had access to sufficient support in 2014-15' and sector (p=0.039)**  
 'Not sure' excluded

Most tutors agreed or strongly agreed (67%, 546) that their employing organisation gave them sufficient support to supervise their trainees, with 13% (109) disagreeing or strongly disagreeing.

Tutors who disagreed or strongly disagreed that their employing organisation gave them sufficient support to supervise their trainees were more likely to:

- work for large or medium organisation community pharmacies,
- have had an unplanned change in tutoring in 2014-15, and
- be female.

There is a significant difference in agreement with the statement 'my employing organisation gave me sufficient support to supervise my trainees' according to ethnicity and size of community pharmacy organisation. Those from Asian or 'other' ethnic groups and those who worked for an independent community pharmacy were more likely to agree with this statement.



**Significant difference between agreement with 'My employing organisation gave me sufficient support to supervise my trainees' and ethnicity (p=0.008)**

**Significant difference between agreement with 'My employing organisation gave me sufficient support to supervise my trainees' and employer type (p=0.000)**

'Not sure' excluded

## CHANGES TO HELP IMPROVE TRAINING

Tutors were asked what single change would help them to improve the training they deliver. The change that would help improve training that was most commonly mentioned was more time in general and more time to spend with their trainee. *"More time to spend one on one with my trainee."* Many tutors stated that more dedicated or protected time to work with their trainee without distractions would help to improve the training they deliver. *"Specially designated time spent with the trainee during working hours but not while acting as the responsible pharmacist."* Many tutors mentioned that more staff, more resources or a reduced workload which would enable them to spend more time with their trainee would help improve training. *"Sufficient store staff and pharmacist cover to enable uninterrupted tutoring time."*

Many tutors stated that more support in general would help them to improve the training they deliver, with some tutors stating they would like more support from the GPhC. *"More support from GPhC. When we call GPhC they are not interested or seem too busy to care."* Some tutors wanted more support in specific areas which included with the new registration assessment, with appraisals, for new tutors and on

dealing with trainees who were experiencing difficulties. *“More information and support regarding the new pre-registration assessment.”*

Some tutors thought that more training or improved training for them as tutors would help them to improve the training they deliver. *“A mandatory day's training for a tutor each year to ensure that they are up-to-date with everything.”* Some tutors wanted more training in specific areas which included training on coaching, providing feedback and the changes to the registration assessment.

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#### ADDITIONAL COMMENTS ABOUT EXPERIENCE AS TUTOR

Respondents were asked if they would like to make any additional comments about their experiences as a tutor in 2014-15. A selection of comments which reflect the main areas identified are given below.

Many tutors made positive comments stating that they had enjoyed their role as a tutor, had a good experience or found their role as a tutor rewarding. “I enjoyed the experience greatly and was looking forward to being a tutor this year again.” Some tutors also praised the pre-registration trainee they had tutored. “I had a very good, keen student and we learned a lot together.” In contrast there were some comments that the standard of pre-registration trainees was not high enough with some tutors feeling that standards were falling. “The calibre of students is getting lower.”

Some tutors commented on the registration assessment. Some tutors did not feel that they had received enough information about the changes to the assessment. “I felt the changes to the exam questions weren't well communicated and took our pre-regs by surprise.” Some tutors did not feel the exam assessment reflected the syllabus, or reported that their trainee did not feel it reflected the syllabus. “The exam continues to be a massive hurdle for most trainees, and judging on feedback, seems quite detached from the student's experience.”

Some tutors commented that they had not received enough support from their employer or from GPhC. “I didn't get adequate support from head office.” Some tutors commented that a lack of time, a lack of resources or insufficient staffing levels were affecting their tutoring. “There was very little time to sit down and discuss pre-reg matters as it was a very busy pharmacy.”

Tutors also expressed concerns that trainees did not have enough practical experience before starting their training. “University students are not coming with enough prior experience. This wastes months at the beginning if they have never worked before.”

## 6. DISCUSSION AND ISSUES FOR CONSIDERATION

### 6.1 PRINCIPAL FINDINGS

#### PROFILE OF TUTORS

The survey findings have generated information about the profile of tutors. This has enabled exploration of responses in the light of participants' prior experience of tutoring pre-registration pharmacist trainees, their length of time as a registered pharmacist, and their perceptions of training quality and barriers impacting upon it.

The tutors who responded to the survey have a substantial amount of practice experience, with seven in ten being qualified for 11 years or longer. Their prior tutoring experience was variable with two-thirds of tutors having supervised up to five trainees. As would be expected from the survey of trainees, most tutors were responsible for a single trainee and had supervised that trainee for the full 12 months. Roughly one quarter of tutors were based in hospitals and of those based in community pharmacy roughly four in ten were in independent community pharmacy organisations, with around a third in large (national chain) organisations and a quarter in medium (non-national) organisations. Most tutors reported that there had been no unplanned changes during the pre-registration period.

#### TUTOR ACCESS TO SUPPORT AND EDUCATIONAL RESOURCES

Generally, tutors reported that they had access to sufficient support in 2014-15. The exception was those who worked in the community pharmacy sector, who were more likely to disagree. Access to support otherwise appeared to be comprehensive with the majority (92%) of tutors having access to a pre-registration training programme provided by the NHS, their employing community pharmacy organisation or an external provider of community pharmacy pre-registration training. Respondents who were a member of such a programme were significantly more likely to agree that they had access to sufficient support in 2014-15. Respondents who reported that they had not had access to such a programme were more likely to be tutors who had less than five years of experience as a tutor and were less likely to be from Asian ethnic groups. Over 40% of tutors have access to a pre-registration manager, mainly those working in hospitals and in large community pharmacy organisations. A majority (61%) of tutors said they had access to support from another tutor, either within or external to their own organisation. Half of tutors said they had access to off-site tutor training opportunities.

#### PROFESSIONAL ISOLATION

Although the majority of tutors appear to have access to support from other professional colleagues the survey findings suggest that there may be a small group of tutors who are more isolated. Support from a pre-registration manager is inevitably more likely in organisations that are large enough to require one. Opportunities for peer discussion and support from other tutors, on the other hand, could be available to any tutor. Nevertheless, almost 40% of tutors said they did not have access to another tutor either within or outside their employing organization. The survey found that tutors in community pharmacy were less likely to report such access and that there were some differences according to the type of community pharmacy organization. Access to another tutor within the community pharmacy

organisation was less likely to be reported by tutors in independent or large community pharmacy organizations while access to another tutor outside the community pharmacy organisation was less likely to be reported by tutors in medium or large community pharmacy organizations.

The survey results indicate that steps need to be taken to enable tutors to have access to peers in order to overcome professional isolation. The GPhC may wish to discuss possible methods of achieving this with stakeholders.

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#### 'EARLY EXPERIENCE' TUTORS

The survey findings provide several indications that 'early experience' tutors (those who have 5 years or less experience as a tutor) have additional needs for support and development. These tutors were less likely to think that their trainee would rate the quality of support received as good or very good. They were less confident in assessing how a trainee is performing as a professional and were significantly more likely to say they were very interested in undertaking training on identification and management of a trainee who is in difficulty, in giving effective feedback, and in coaching and mentoring. These findings from this year's survey confirm that additional attention should now turn to this group of tutors.

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#### TRAINEE ACCESS TO SUPPORT

Trainee access to additional support was also reported by tutors to be comprehensive, reflecting the findings of the 2013-2014 survey of trainees. Off-site training opportunities were reported to be widely available. Personal support from other trainees via networks or individual peers were less extensively reported but nevertheless widespread. As might be expected, support from other trainees was more likely to be available in hospitals and large community pharmacy organisations, both of which are likely to have multiple trainees as well as established organisational training infrastructure. Tutors in 2014-15 were more likely to report that trainees had access to online learning modules and to support from a network of trainees than tutors in 2013-14. Similarly, to the small group of tutors, the trainee survey findings also indicate that a small proportion lack access to support from peers and exposure to wider professional practice through, for example, off-site training.

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#### TUTOR TRAINING

Respondents' expressions of interest in possible training topics highlighted particular areas: over half of all tutors did so for Identification and management of a trainee who is in difficulty; giving effective feedback; coaching & mentoring. Training providers may wish to consider offering targeted modules in these areas.

Providing feedback to trainees is an essential skill for tutors. Although over 90% of tutors said they felt confident in 'Providing effective feedback following assessment', over half still expressed interest in training in this area, indicating a perceived need for skills improvement. There is some evidence from the 2013-2014 survey of **trainees** to shed further light on trainee experience of feedback. When asked if they were helped to reflect on their performance by feedback from their tutor, over three quarters of trainees agreed or strongly agreed that they were, 12% disagreed or strongly disagreed and the remainder were neutral. Taken together these findings

suggest that the majority of trainees' experience of tutor feedback is helpful and that it could be improved for a substantial minority.

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## TUTOR PERCEPTIONS OF QUALITY OF SUPPORT AND TRAINING PROVIDED

Generally, tutors gave high ratings for the perceived quality of support and training that they and their organisation provided. Comparison of the data from the two tutor surveys and the trainee surveys confirms a gap between tutor and trainee perception, with ratings from the latter being lower in several aspects. Caution must be exercised when interpreting these comparative findings because the tutors and trainees may have been from different organisations and it is not possible to know the extent of overlap or difference between the two groups of respondents. Furthermore, the most recent trainee survey covers the period 2013-14 and the current tutor survey covers the period 2014-15. Nevertheless, the findings indicate a need to explore the underlying issues in more detail.

The two areas where the gap between tutor and trainee perceptions were largest were in relation to perceived quality of educational supervision and coverage of the syllabus for the GPhC registration assessment during the pre-registration training. These findings may indicate that trainee and tutor expectations may be different. Discussion about the respective roles and responsibilities of tutor and trainee in this respect may be useful. We suggested last year that at least part of the explanation may lie in how well tutors might or might not understand the structure and content of the current MPharm course and how this might in turn influence how they are able to provide appropriate support to their trainee. The GPhC may wish to consider whether tutors do/should receive regular updates on changes to the content of the MPharm programme, for example information on revised learning outcomes.

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## BARRIERS AND THEIR IMPACT

Most tutors reported that there were sufficient staff resources for the trainee to have time to learn as well as work, that they had access to sufficient support as a tutor, and that they had sufficient support from their employer to supervise their trainees. A lower proportion (although still a majority) agreed that their workload allowed time for appropriate supervision of their trainee.

In relation to sufficiency of staff resources, tutors working in an independent community pharmacy and tutors in Scotland were more likely to agree, while those working in a large or medium organisation community pharmacy were more likely to disagree. Tutors in 2014-15 were also more likely to disagree than tutors in 2013-14. In relation to workload, tutors from Asian or ethnic groups other than White, and those working in independent community pharmacies, were more likely to agree that their workload allowed time for appropriate supervision for their trainee while those from White ethnic groups and those working in medium or large organisation community pharmacies were less likely to agree. In relation to sufficiency of support, tutors who worked in the community pharmacy sector were more likely to disagree. In relation to sufficiency of support from their employing organisation, those tutors working for large or medium organisation community pharmacies and those from a White ethnic group were more likely to disagree while those from Asian and ethnic groups other than white and those who worked for an independent community pharmacy were more likely to agree.

In interpreting these findings, it is important to consider that amongst respondents working in independent community pharmacy organisations some of the tutors will be business owners or partners. They would thus have more autonomy and involvement in decisions on aspects relating to support, including workforce and workload.

## 6.2 STRENGTHS AND LIMITATIONS OF THE SURVEY

Strengths of the survey include the robustness of the questionnaire, resulting from detailed review and consultation with key stakeholders when the survey was first undertaken in 2014, including pre-registration tutors; the implementation of an active online survey delivery method with piloting and a sufficiently large number of respondents to allow detailed analysis and the detection of statistically significant differences by key variables. Limitations include the lower than expected response rate, despite implementation of specific steps based on learning from the previous surveys of tutors and trainees and agreed with the GPhC to maximise the response rate.

The representativeness of the respondents in relation to the total population of tutors has been assessed using a basket of measures including country/region, age, gender and the length of time since registration. Overall the respondents were broadly similar to the total population of tutors. Geographical area was almost the same among the respondents and the total population. Women were slightly over-represented (52% versus 47% in the total population). More recently qualified tutors were under-represented (9% registered 1-5 years compared with 13% in the total population, and 22% registered 6-10 years compared with 29%). The proportion of tutors registered for 10 years or less was 31% compared with 41% in the total population. This profile overall is similar to last year's survey, where the proportion of tutors registered for 10 years or less was 27% compared with 44% in the total population.

Low response rates have also been found in other regulators' surveys of trainers/tutors of trainees. Following low response rates from previous surveys of medical trainers between 2007-12 the General Medical Council (GMC) piloted a revised Trainer Survey in 2014 using a combination of GMC invitation to take part and follow up by deaneries and Local Education and Training Boards (LETBs) as well as by the GMC itself. The GMC sent lists of trainers who had not completed the survey to the deaneries and LETBs 3–5 weeks after the survey began, so they could send reminders to these trainers at weekly intervals. In the final two weeks of the survey, these trainers received two email reminders each week<sup>4</sup>. The resulting response rate was 48% but the GMC noted that a large amount of resource was used by them in sending data on non-responders to deaneries and LETBs. For the 2016 survey the GMC introduced a set of leaflets, postcards and posters to promote the survey<sup>5</sup>.

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<sup>4</sup> General Medical Council 2015. National Survey: Key findings from the pilot survey of trainers. [http://www.gmc-uk.org/NTS\\_2015\\_pilot\\_trainers\\_survey\\_report.pdf\\_61187899.pdf](http://www.gmc-uk.org/NTS_2015_pilot_trainers_survey_report.pdf_61187899.pdf)

<sup>5</sup> [http://www.gmc-uk.org/education/nts\\_documents.asp](http://www.gmc-uk.org/education/nts_documents.asp)

### 6.3 ISSUES FOR THE GPHC TO CONSIDER

Overall the findings of the GPhC's first two annual surveys of pre-registration tutor experiences indicate that in the early years of the tutor role access to additional support and development are needed. The survey data confirm that unplanned changes in tutoring during the pre-registration period can have an adverse effect on tutor access to support with implications for trainee experience. The incidence of such unplanned changes was significantly higher in the 2014-15 survey and was higher among tutors working in national level community pharmacy organisations in both years of the survey. Consideration can be given to possible ways of ameliorating the effects of unplanned changes and their potential to negatively impact on trainees. There is also some evidence from the surveys that tutors who were a joint tutor or who tutored for less than the full 12 months may also have additional support and development needs. Professional isolation experienced by some tutors who did not have access to peer support needs to be addressed.



## 7. CONCLUSIONS

The survey findings confirm many of the key results of last year's survey of pre-registration tutors and extend understanding of the factors that impact on tutor experiences and, in turn, the experiences of their trainees. The profile of pre-registration tutors in England, Scotland and Wales in 2014-15 with regard to their previous experience of tutoring, their reports of the support available both to them and to their trainees, their perceptions of training quality, and their training and development needs is broadly similar to that of the 2013-14 cohort. The tutor cohort encompasses extensive experience of pharmacy practice and with many tutors who also have substantial experience of tutoring trainees. There continues to be a substantial number of tutors who have more limited but growing experience of both tutoring and of pharmacy practice, whose support needs are higher, and who were under-represented in both last year's and this year's surveys.

The majority of tutors rate the quality of the training and support provided to trainees by their organisation very highly. Lower ratings of the support provided to trainees were more likely to be given by less experienced tutors. In comparison to the ratings of quality given by pre-registration pharmacist trainees in previous GPhC surveys, the tutors' ratings were again consistently higher. The gaps were widest regarding perceived quality of educational supervision, perceived coverage of the GPhC assessment syllabus during the pre-registration period and perceived quality of support.

Although most tutors reported that staff resources, their workload and access to support allowed both their trainee and themselves to have an appropriate training experience, this was not so in a substantial minority of cases and the results were less positive than in the 2013-14 survey. Tutors who did not agree that they had access to sufficient support were more likely work in the community pharmacy sector, not have been a tutor for the full 12 months, have been the only tutor at their training site and to have had an unplanned change in their tutoring in 2014-15.

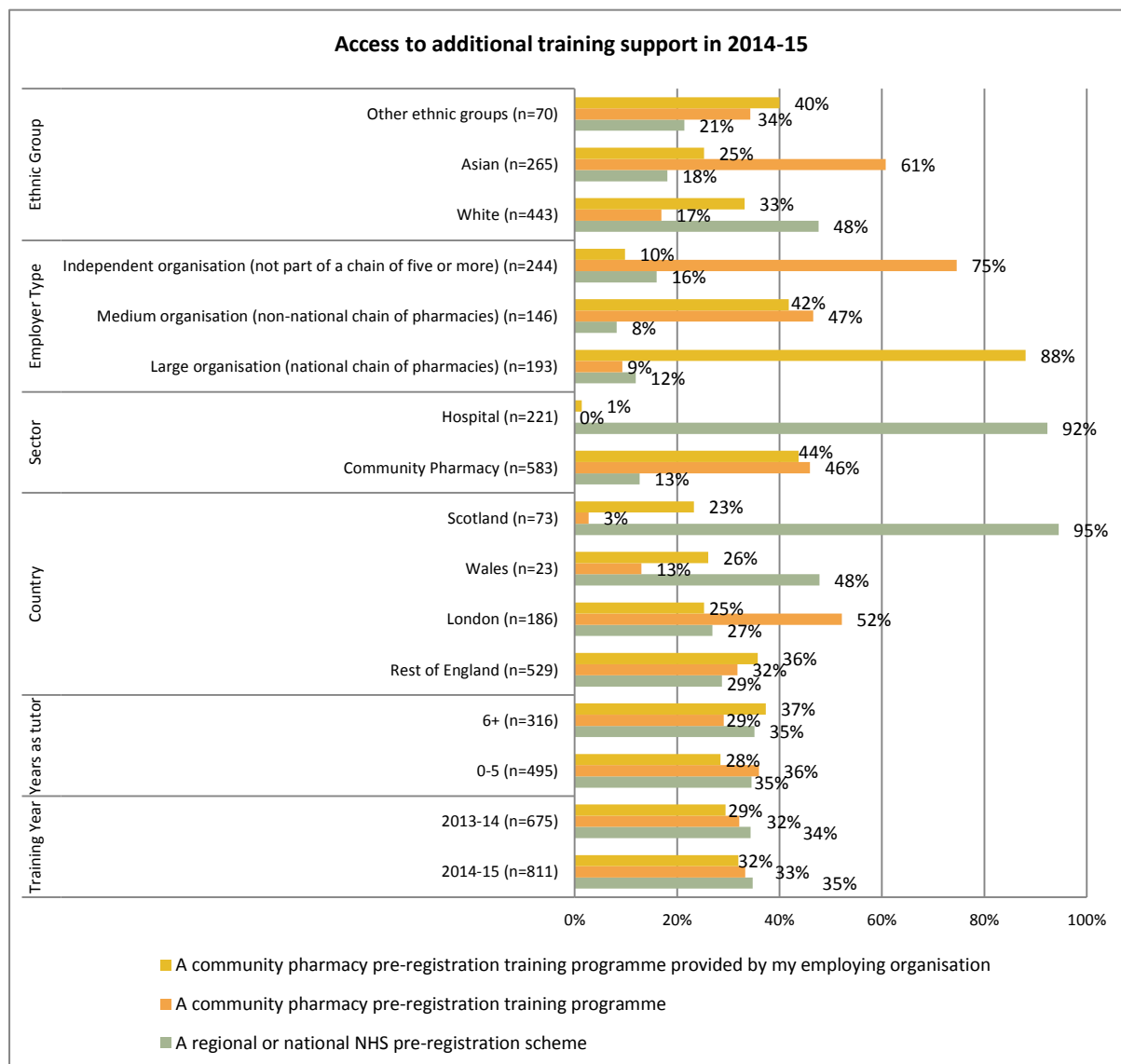
Encouragingly, more than half of respondents expressed interest in further training and development in identification/management of a trainee in difficulty, giving effective feedback, and in coaching/mentoring.

The survey results can be used by the GPhC and others to discuss and explore these issues further as part of the continuing programme of work on quality of pre-registration training.

## APPENDIX 1 – REPRESENTATIVENESS OF THE SAMPLE

REPRESENTATIVENESS OF THE SAMPLE		
	Total tutor population sent survey	Survey respondents
<b>Country of Training</b>		
England (outside London)	66%	65%
England (London)	24%	23%
Wales	3%	3%
Scotland	7%	9%
Northern Ireland	0%	0%
Outside UK	0%	0%
<b>Age (from Date of Birth)</b>		
24-30	17%	13%
31-40	41%	33%
41-50	21%	24%
51-60	17%	26%
61+	3%	4%
<b>Years since registered</b>		
1-5	13%	9%
6-10	29%	22%
11-15	16%	16%
16-20	13%	13%
21-30	16%	20%
31+	14%	19%
<b>Gender</b>		
Female	53%	48%
Male	47%	52%

## APPENDIX 2 – CHARTS



### A regional or national NHS pre-registration scheme

Significant difference between access to a regional or national NHS pre-registration scheme and ethnic group (p=0.000)

Significant difference between access to a regional or national NHS pre-registration scheme and sector (p=0.000)

Significant difference between access to a regional or national NHS pre-registration scheme and country (p=0.000)

### A community pharmacy pre-registration training programme

Significant difference between access to a community pharmacy pre-registration training programme and ethnic group (p=0.000)

Significant difference between access to a community pharmacy pre-registration training programme and employer type (p=0.000)

Significant difference between access to a community pharmacy pre-registration training programme and sector (p=0.000)

Significant difference between access to a community pharmacy pre-registration training programme and country (p=0.000)

Significant difference between access to a community pharmacy pre-registration training programme and years as tutor (p=0.044)

### A community pharmacy pre-registration training programme provided by my employing organisation

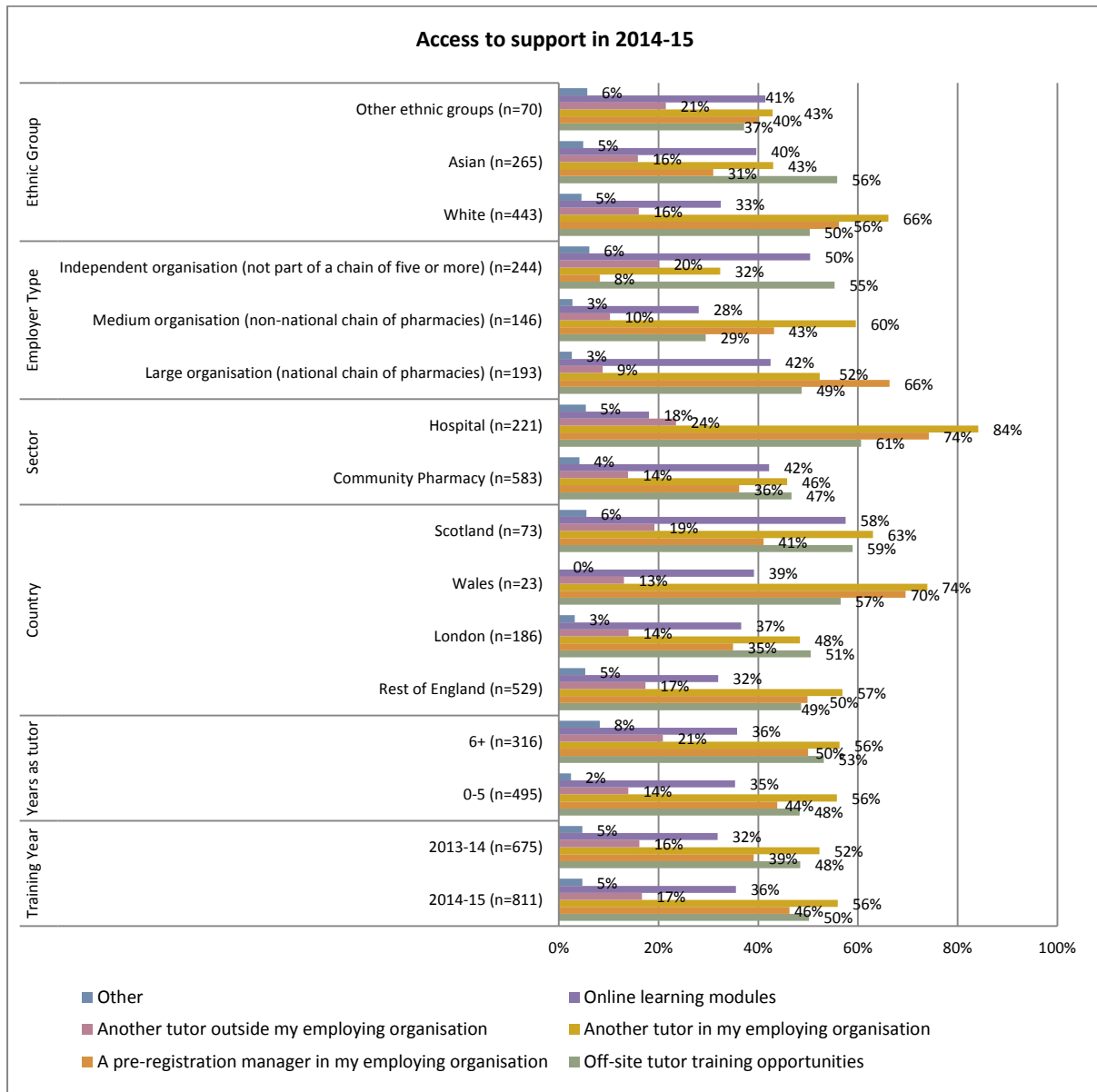
Significant difference between access to a community pharmacy pre-registration training programme provided by employing organisation and ethnic group (p=0.022)

Significant difference between access to a community pharmacy pre-registration training programme provided by employing organisation and employer type (p=0.000)

Significant difference between access to a community pharmacy pre-registration training programme provided by employing organisation and sector (p=0.000)

Significant difference between access to a community pharmacy pre-registration training programme provided by employing organisation and country (p=0.017)

Significant difference between access to a community pharmacy pre-registration training programme provided by employing organisation and years as tutor (p=0.008)



**Off-site tutor training opportunities**

Significant difference between access to off-site tutor training opportunities and ethnic group (p=0.019)

Significant difference between access to off-site tutor training opportunities and employer type (p=0.000)

Significant difference between access to off-site tutor training opportunities and sector (p=0.000)

**A pre-registration manager in my employing organisation**

Significant difference between access to another tutor in employing organisation and ethnicity (p=0.000)

Significant difference between access to another tutor in employing organisation and employer type (p=0.000)

Significant difference between access to another tutor in employing organisation and sector (p=0.000)

Significant difference between access to another tutor in employing organisation and country (p=0.000)

Significant difference between access to another tutor in employing organisation and training year (p=0.006)

**Another tutor in my employing organisation**

Significant difference between access to another tutor in employing organisation and ethnicity (p=0.000)

Significant difference between access to another tutor in employing organisation and employer type (p=0.000)

Significant difference between access to another tutor in employing organisation and sector (p=0.000)

Significant difference between access to another tutor in employing organisation and country (p=0.029)

**Another tutor outside my employing organisation**

Significant difference between access to another tutor outside employing organisation and employer type (p=0.001)

Significant difference between access to another tutor outside employing organisation and sector (p=0.001)

Significant difference between access to another tutor outside employing organisation and years as tutor (p=0.010)

**Online learning modules**

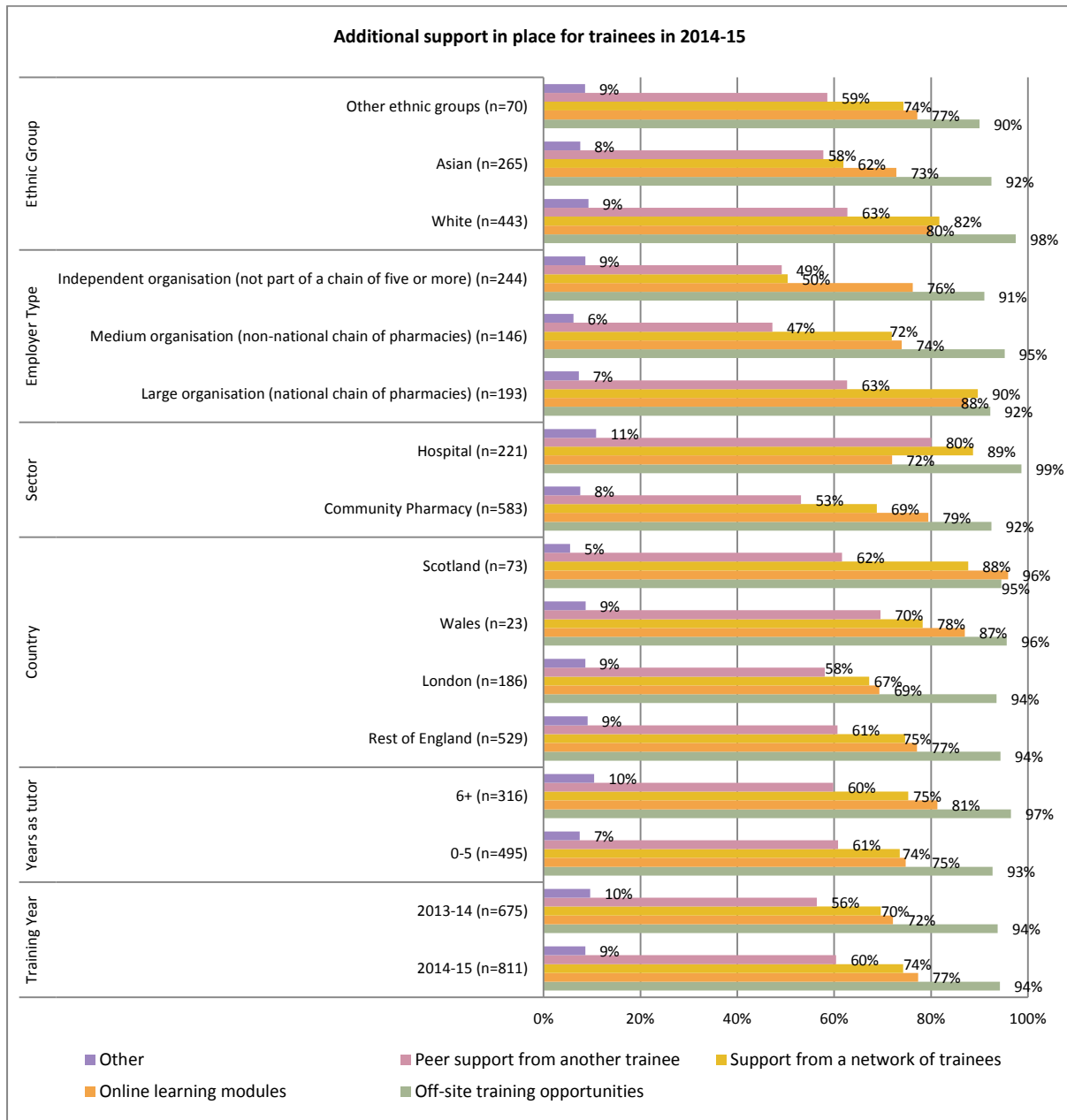
Significant difference between access to online learning modules and employer type (p=0.000)

Significant difference between access to online learning modules and sector (p=0.001)

Significant difference between access to online learning modules and country (p=0.000)

**Other**

Significant difference between access to other and years as tutor (p=0.0000)



**Off-site training opportunities**

Significant difference between access to off-site training opportunities and ethnicity (p=0.001)

Significant difference between access to off-site training opportunities and sector (p=0.001)

Significant difference between access to off-site training opportunities and years as tutor (p=0.024)

**Online learning modules**

Significant difference between access to online learning modules and employer type (p=0.002)

Significant difference between access to online learning modules and sector (p=0.024)

Significant difference between access to online learning modules and country (p=0.000)

Significant difference between access to online learning modules and years as tutor (p=0.029)

Significant difference between access to online learning modules and training year (p=0.022)

**Support from a network of trainees**

Significant difference between access to support from a network of trainees and ethnicity (p=0.000)

Significant difference between access to support from a network of trainees and employer type (p=0.000)

Significant difference between access to support from a network of trainees and sector (p=0.000)

Significant difference between access to support from a network of trainees and country (p=0.008)

Significant difference between access to online learning modules and training year (p=0.049)

**Peer support from another trainee**

Significant difference between access to support from peer support from another trainee and employer type (p=0.005)

Significant difference between access to support from peer support from another trainee and sector (p=0.000)

## APPENDIX 3 – TABLES

### Did you have access to any of the following forms of additional training support in 2014-15

		A regional or national NHS pre-registration scheme			A community pharmacy pre-registration training programme			A community pharmacy pre-registration training programme provided by my employing organisation		
		Count	%	Significant difference	Count	%	Significant difference	Count	%	Significant difference
<b>Training year</b>	2014-15	282	35%	No	270	33%	No	259	32%	No
	2013-14	232	34%		217	32%		199	29%	
<b>Years as tutor</b>	0-5	171	35%	No	178	36%	Yes p=0.000	141	28%	Yes p=0.022
	6+	111	35%		92	29%		118	37%	
<b>Country</b>	Rest of England	152	29%	Yes p=0.000	168	32%	Yes p=0.000	189	36%	Yes p=0.00
	London	50	27%		97	52%		47	25%	
	Wales	11	48%		3	13%		6	26%	
	Scotland	69	95%		2	3%		17	23%	
<b>Sector</b>	Community Pharmacy	74	13%	Yes p=0.000	268	46%	Yes p=0.000	255	44%	Yes p=0.000
	Hospital	204	92%		0	0%		3	1%	
<b>Employer Type</b>	Large organisation (national chain of pharmacies)	23	12%	No	18	9%	Yes p=0.000	170	88%	Yes p=0.017
	Medium organisation (non-national chain of pharmacies)	12	8%		68	47%		61	42%	
	Independent organisation (not part of a chain of five or more)	39	16%		182	75%		24	10%	
<b>Ethnic Group</b>	White	211	48%	Yes p=0.000	75	17%	Yes p=0.044	147	33%	Yes p=0.008
	Asian	48	18%		161	61%		67	25%	
	Other ethnic groups	15	21%		24	34%		28	40%	

Did you have access to any of these forms of support during 2014-15																			
		Off-site tutor training opportunities			A pre-registration manager in my employing organisation			Another tutor in my employing organisation			Another tutor outside my employing organisation			Online learning modules			Other		
		Count	%	Significant difference	Count	%	Significant difference	Count	%	Significant difference	Count	%	Significant difference	Count	%	Significant difference	Count	%	Significant difference
<b>Training year</b>	2014-15	407	50%	No	375	46%	Yes p=0.00	454	56%	No	135	17%	No	288	36%	No	38	5%	No
	2013-14	327	48%		264	39%		353	52%		109	16%		215	32%		32	5%	
<b>Years as tutor</b>	0-5	239	48%	No	217	44%	No	276	56%	No	69	14%	Yes p=0.001	175	35%	No	12	2%	Yes p=0.00
	6+	168	53%		158	50%		178	56%		66	21%		113	36%		26	8%	
<b>Country</b>	Rest of England	257	49%	No	264	50%	Yes p=0.000	301	57%	Yes p=0.000	92	17%	No	169	32%	Yes p=0.000	28	5%	No
	London	94	51%		65	35%		90	48%		26	14%		68	37%		6	3%	
	Wales	13	57%		16	70%		17	74%		3	13%		9	39%		0	0%	
	Scotland	43	59%		30	41%		46	63%		14	19%		42	58%		4	6%	
<b>Sector</b>	Community Pharmacy	272	47%	Yes p=0.019	211	36%	Yes p=0.000	267	46%	Yes p=0.000	81	14%	Yes p=0.001	246	42%	Yes p=0.001	24	4%	No
	Hospital	134	61%		164	74%		186	84%		52	24%		40	18%		12	5%	
<b>Employer Type</b>	Large organisation (national chain of pharmacies)	94	49%	Yes p=0.000	128	66%	Yes p=0.000	101	52%	Yes p=0.000	17	9%	Yes p=0.010	82	42%	Yes p=0.000	5	3%	No
	Medium organisation (non-national chain of pharmacies)	43	29%		63	43%		87	60%		15	10%		41	28%		4	3%	
	Independent organisation (not part of a chain of five or more)	135	55%		20	8%		79	32%		49	20%		123	50%		15	6%	
<b>Ethnic Group</b>	White	223	50%	Yes p=0.00	249	56%	Yes p=0.006	293	66%	Yes p=0.029	71	16%	No	144	33%	No	20	5%	No
	Asian	148	56%		82	31%		114	43%		42	16%		105	40%		13	5%	
	Other ethnic groups	26	37%		28	40%		30	43%		15	21%		29	41%		4	6%	

Additional support in place for trainee/s in 2014-15																
		Off-site training opportunities			Online learning modules			Support from a network of trainees			Peer support from another trainee			Other		
		Count	%	Significant difference	Count	%	Significant difference	Count	%	Significant difference	Count	%	Significant difference	Count	%	Significant difference
<b>Training year</b>	2014-15	764	94%		627	77%		602	74%		490	60%		70	9%	
	2013-14	633	94%	No	487	72%	Yes p=0.002	470	70%	Yes p=0.000	381	56%	No	65	10%	No
<b>Years as tutor</b>	0-5	459	93%	Yes p=0.001	370	75%	Yes p=0.024	364	74%	No	301	61%	No	37	7%	No
	6+	305	97%		257	81%		238	75%		189	60%		33	10%	
<b>Country</b>	Rest of England	499	94%	No	408	77%	Yes p=0.000	395	75%	Yes p=0.000	321	61%	No	48	9%	No
	London	174	94%		129	69%		125	67%		108	58%		16	9%	
	Wales	22	96%		20	87%		18	78%		16	70%		2	9%	
	Scotland	69	95%		70	96%		64	88%		45	62%		4	5%	
<b>Sector</b>	Community Pharmacy	539	92%	Yes p=0.001	463	79%	Yes p=0.029	401	69%	Yes p=0.000	310	53%	Yes p=0.005	44	8%	No
	Hospital	218	99%		159	72%		196	89%		177	80%		24	11%	
<b>Employer Type</b>	Large organisation (national chain of pharmacies)	178	92%	No	169	88%	Yes p=0.022	173	90%	Yes p=0.008	121	63%	Yes p = 0.000	14	7%	No
	Medium organisation (non-national chain of pharmacies)	139	95%		108	74%		105	72%		69	47%		9	6%	
	Independent organisation (not part of a chain of five or more)	222	91%		186	76%		123	50%		120	49%		21	9%	
<b>Ethnic Group</b>	White	432	98%	Yes p=0.024	354	80%	No	362	82%	Yes p=0.049	278	63%	No	41	9%	No
	Asian	245	92%		193	73%		164	62%		153	58%		20	8%	
	Other ethnic groups	63	90%		54	77%		52	74%		41	59%		6	9%	