

**University of Leeds independent  
prescribing course reaccreditation event  
report, November 2022**



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## Event summary and conclusions

<b>Provider</b>	University of Leeds
<b>Course</b>	Independent prescribing course
<b>Event type</b>	Reaccreditation
<b>Event date</b>	17 November 2022
<b>Approval period</b>	January 2023 – January 2026
<b>Relevant standards</b>	<b><u>Standards for pharmacist independent prescribers, January 2019, updated October 2022</u></b>
<b>Outcome</b>	The accreditation team agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that pharmacist independent prescribing course provided by University of Leeds should be reaccredited for a further period of three years.
<b>Conditions</b>	There were no conditions.
<b>Standing conditions</b>	The standing conditions of accreditation can be found <a href="#">here</a> .
<b>Recommendations</b>	No recommendations were made.
<b>Registrar decision</b>	<p>The Register is satisfied that the University of Leeds has met the requirement of continued approval in accordance with Part 5 article 42 paragraph 4(a)(b) of the Pharmacy Order 2010, in line with the Standards for the education and training of pharmacist independent prescribers, January 2019, updated October 2022.</p> <p>The Registrar confirms that University of Leeds is approved to continue to offer the independent prescribing course for a further period of 3 years. The Registrar notes that there were no conditions associated with this event.</p>
<b>Maximum number of all students per cohort</b>	60
<b>Number of pharmacist students per cohort</b>	60
<b>Number of cohorts per academic year</b>	2

<b>Approved to use non-medical DPPs</b>	Yes
<b>Key contact (provider)</b>	Sumrah Shaffiq
<b>Provider representatives</b>	Sumrah Shaffiq, Module Lead for Independent Prescribing for Pharmacists Dan Greer, Professional Lead and Programme Manager Postgraduate Programme in Pharmacy Practice Melanie McGinlay, Module Lead for Independent Prescribing for Nurses, Midwives and Allied Health Professionals Dr Mary-Claire Kennedy, Visiting Lecturer Pharmacy Practice, University of Leeds
<b>Accreditation team</b>	Susan Bradford (event Chair) Lay Commissioner, Commission on Human Medicines Dr Andrew Sturrock, Associate Professor of Public Health, Northumbria University Dr Brian Addison, Academic Strategic Lead (Clinical Practice), Robert Gordon University
<b>GPhC representative</b>	Alex Ralston, Quality Assurance Officer (Education), General Pharmaceutical Council
<b>Rapporteur</b>	Rakesh Bhundia, Quality Assurance Officer (Education), General Pharmaceutical Council

## Introduction

### Role of the GPhC

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

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

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

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

### Background

The University of Leeds has run accredited prescribing courses for pharmacists since 2003; first as a supplementary prescribing module and then as an independent and supplementary prescribing module from January 2008.

The University of Leeds was last reaccredited by the GPhC in December 2019 to provide a course to train pharmacist independent prescribers, for a period of 3 years, and there were no conditions or recommendations. In line with the standards for the education and training of pharmacist independent prescribers January 2019, updated October 2022, an event was scheduled on 17 November 2022 to review the course's suitability for reaccreditation. The event was held remotely by videoconference.

The Independent Prescribing module for pharmacists has two cohorts per year (January and September) with a maximum of 60 pharmacists per cohort. The module is jointly taught with Independent and Supplementary Prescribing for Nurses and Midwives and Independent and Supplementary Prescribing for Allied Healthcare Professionals (AHPs). The Independent and Supplementary Prescribing for pharmacists is a single 30 credit module offered at Master's Level.

### Documentation

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

### The event

The reaccreditation event was held remotely by videoconference on 17 November 2022 and comprised of several meetings between the GPhC accreditation team and representatives of University of Leeds prescribing course. Students who were currently undertaking the course, or who

had completed it in the last three years, contributed to the event by completing a qualitative survey, responses to which were reviewed by the GPhC accreditation team.

## Declarations of interest

There were no declarations of interest.

## Schedule

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

## Key findings - Part 1 - Learning outcomes

The team reviewed all 32 learning outcomes relating to the independent prescribing course. To gain additional assurance the team also tested a sample of 6 learning outcomes during the event was satisfied that **all 32 learning outcomes continue to be met** to a level as required by the GPhC standards.

The following learning outcomes were tested at the event: **3, 9, 15, 19, 28, 32**

### Domain: Person centred care (outcomes 1-6)

Learning outcomes met? Yes  No

### Domain: Professionalism (outcomes 7-15)

Learning outcomes met? Yes  No

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

Learning outcomes met? Yes  No

### Domain: Collaboration (outcomes 27-32)

Learning outcomes met? Yes  No

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

### Standard 1: Selection and entry requirements

Standard met/will be met? Yes  No

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

Pharmacists who are applying to the University of Leeds for the Independent Prescribing Module are required to complete two forms: the University of Leeds Application Form for all Students and the Independent Pharmacist Prescribing Trainee Application Form.

These forms capture all the necessary information to determine if the applicant has satisfied the requirements to undertake the course: applicants are registered as a pharmacist with the General Pharmaceutical Council (GPhC) or, in Northern Ireland, with the Pharmaceutical Society of Northern Ireland (PSNI); applicants must be in good standing with the GPhC and/or PSNI and any other healthcare regulator with which they are registered; applicants must have an identified area of clinical or therapeutic practice in which to develop independent prescribing practice; applicants must have a named Designated Prescribing Practitioner (DPP) who has agreed to supervise their learning in practice.

Applicants are also requested to submit a 500-word written statement demonstrating that they have clinical/therapeutic and patient-based experience in the UK that is relevant to becoming an independent prescriber; they recognise, understand, and articulate the skills and attributes required of a prescriber; they have reflected on their own performance and take responsibility for their own continuing professional development (CPD) and how they will develop networks for support, reflection and learning for the CPD of their prescribing practice. The course provider explained that all applicants are interviewed to ensure they understand the process and expectations.

Guidance on the type of experience a pharmacist should have before applying to the course is on the Course provider's ('the provider') module webpage within the provider's website. The accreditation team ('the team') noted that the provider will update this webpage to reflect the revised selection and entry criteria in the updated standards for the education and training of pharmacist independent prescribers published in October 2022.

Applications are reviewed by the module lead and at times with the assistance of another module team member to determine whether the candidate has the necessary qualifications and supervision arrangements in practice to allow them to be accepted onto the programme. Places are offered on a first come, first served basis. If any aspect of the application pack is found to have not satisfied the necessary criteria for admission onto the course or if this is identified/explored during the interview process, the applicant is sent an email by the admissions team informing them of the outcome of their application and the specific criteria that has resulted in their rejection. The provider will indicate the types of experiences and skills or other issues the candidate would need to address before reapplying.

The admissions team maintain a database of all applications for the programme. Any applications that have been refused are documented clearly within this database and the reason for refusal also recorded.

## Standard 2: Equality, diversity and inclusion

Standard met/will be met? Yes  No

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

As part of the submission document, it was noted that the provider states that equality and diversity policies are embedded within every aspect of course delivery and design including the admissions process, reasonable adjustments for trainees with disabilities, facilitating trainees due to religious observances and accommodating trainees with carer roles. The University of Leeds provides education and training to staff members on equality and inclusion policies and legislation. All staff members at the University of Leeds complete Equality and Inclusion Training which is completed annually. All staff members involved in the selection process also attend an 'Unconscious Bias' workshop.

Staff are supported in ensuring that teaching and learning materials meet the diverse needs of students. The University's Equality and Inclusion Unit provide a wide range of support, guidance and policy, including support for students who are parents or carers, support for pregnant women or students with very young children. The accreditation team asked during the event for examples of how the principles of equality and diversity have influenced the design and delivery of the course. The provider explained that they have introduced new taught sessions around cultural differences. OSCEs are also designed to include a range of patients from all backgrounds and ages. The provider also explained that the University has invested in high tech mannequins that include pregnancy and different ethnicities. As part of the submission document, it was noted that based on the demographic information gathered during the admissions process, the provider was aware that trainees are from a range of ethnic backgrounds and have taken steps to ensure that study and assessment dates do not clash with key religious festivals.

As part of the submission documentation, it was noted that reasonable adjustments for specific needs are made on a one-to-one basis. Reasonable adjustments to learning and teaching can include permission to record taught sessions, flexibility around deadlines, and additional clarification and guidance from teaching staff. All teaching sessions are recorded, and the audio-visual recording placed on the VLE within 48 hours of the session. Trainees can listen back to the session to assist their learning. In addition, the 'Blackboard Ally' tool on the VLE, provides a readability grading to all written content uploaded to the VLE (including PowerPoint presentations and word documents). This tool also provides suggestions as to how a resource could be edited to enhance accessibility for all users.



### Standard 3: Management, resources and capacity

Standard met/will be met? Yes  No

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

The team was satisfied that those involved in managing and delivering the course understand their roles, are suitably qualified and experienced, and are supported to carry out their work effectively including clear lines of accountability with the School of Healthcare. The roles and responsibilities of the key stakeholders in relation to this programme (the trainee, the DPP, the module lead and team and the employer/manager) are agreed with all parties prior to commencing the programme and during the programme itself. The roles and responsibilities of the DPP, the module lead and module team and the trainee are defined in the trainee module handbook and the DPP handbook. The Employer/Manager/Education Lead Declaration must indicate that the practice environment has the necessary structures, policies and procedures in place to support and accommodate the trainee.

As part of the submission documentation, it was noted that the module team has a wide range of practice experience, with two pharmacists who are lecturer/practitioners, who are active prescribers in practice. The module team also has a large amount of educational experience, five members of the module team possess at least a post graduate teaching qualification, some specifically in the field of clinical education, five members of team are Fellows of the Higher Education Academy, and the module lead holds a Masters in Education.

The course provider explained that although they are a small team, they are supported by the wider group of staff in the School of Healthcare and develop assessments such as OSCEs in consultation with experienced nurse lecturers and advanced nurse practitioner lecturers. The provider also works with doctors (GPs, hospital doctors and consultants) and educational statisticians from the Leeds Institute of Medical Education (LIME), University of Leeds in developing their teaching and assessment for the module. In particular, the provider has undertaken a large project with LIME colleagues on standard setting the OSCEs for the prescribing module.

The DPP and trainee handbooks detail the Tripartite Learning Agreement that exists between the DPP, the trainee and the academic supervisor. The Learning Agreement is agreed upon by both the trainee and DPP and reviewed by a member of the module team within the first 4 weeks of commencing the module allowing for areas for development for the trainee and an action plan to address these areas put in place.

### Standard 4: Monitoring, review and evaluation

Standard met/will be met? Yes  No

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

As part of the submission documentation, it was noted that a module survey is completed by trainees at the end of the module. The module survey is designed to capture aspects of the trainee experience of the module requiring consideration of teaching resources, teaching facilities and staff support.

During 2022, the University has introduced an additional element to the module review where the module lead responds to the comments from trainees and this response is made visible to trainees.

A module report is written by the module lead each academic year. The report documents the feedback from the module survey from trainees, feedback from DPPs, the module team and the external examiner. The report also identifies area of good practice that can be shared with the wider School and summarises key action points identified by the module lead. There is a timeframe in place for the implementation of action points in the report. The action points documented in one year are revisited upon completion of the form the following year to determine if they have been achieved. A survey is circulated to DPPs prior to the conclusion of the module and allows the DPP to provide feedback on their experience of the programme and to suggest changes that could be made to improve the programme.

It was noted that the external examiner provides quality assurance that assessment processes have been conducted according to university requirements. As part of their role, the external examiner reviews OSCE stations prior to the assessment. External Examiner feedback about the assessment is considered by the module lead/team and changes made as necessary, prior to roll out with the students. The external examiner is required to comment on trainee performance within the module assessment board report, the report written by the module lead which accompanies the marksheets considered by the Module Assessment Board.

The Annual Academic Review for staff within the School of Healthcare, is a structured meeting attended by the Head of School and the Director of Education. This is a formal mechanism for performance review for all staff, including those involved with the Independent Prescribing Module.

External speakers, pharmacist independent prescribers who work in specialised areas including mental health, antimicrobials are subject experts and are up to date on developments. When planning teaching sessions for each new intake of trainees, the provider ensures that changes to clinical practice as well as policy or legislation are incorporated into teaching materials. If an issue in relation to prescribing comes to light during the course that is of significance to trainees, trainees are made aware of this.

## Standard 5: Course design and delivery

Standard met/will be met? Yes  No

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

The team was satisfied that the course design and delivery was appropriate and would support pharmacists to achieve the learning outcomes. There are opportunities for stakeholders to feedback and feed into the continuous development of the pharmacist elements of the course. As part of the submission documentation, it was noted that the provider consulted with the external examiner and education leads from Trusts across the Northeast who routinely send pharmacists to undertake the providers prescribing programme. The consultation sought feedback on changes to admissions requirements, changes in teaching and assessment and minor modifications to the contents of the prescribing portfolio.

It was noted that the module team attends quarterly meetings with the Northeast of England and Yorkshire and Humber NMP Networks. This network consists of representation from Health Education England (HEE), provider and commissioning organisations from across the region and Higher Education Institutions that deliver Non-Medical Prescribing qualifications. During these meetings any aspects of programme commissioning, design or delivery can be raised or discussed.

The course provider explained that in this academic term the provider has recorded interviews with the service user groups around their experience as a patient/carer and the experience of interactions with the prescriber, how they felt the consultation went, any concerns they had, feedback on what they can do to improve. Actions arising from this will be implemented from January.

The programme is updated to reflect clinical, legal, policy and practice changes. The module lead takes responsibility for identifying and implementing major changes to teaching sessions. The module review process offers a formal opportunity for the module lead to appraise many aspects of the course including teaching and learning materials and to develop a plan for implementation of changes.

## Standard 6: Learning in practice

Standard met/will be met? Yes  No

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

As part of the submission documentation, it was noted that the period of learning in practice comprises a total of 12 days or 90 hours of the trainee prescriber's time. The Employer/Manager/Education Lead Declaration form requires that the trainee will be enabled to undertake 26 days of blended learning (part university attendance and part online learning) and 90 hours of learning in practice. These hours are recorded in the 'Framework of Supervised Practice' that is submitted as part of the prescribing portfolio. The Framework requires the trainee to clearly document the types of activities they have covered during their 90 hours, and that the necessary infrastructure, including direct access to patients/guardians/carers will be in place.

The learning agreement, devised at the start of the programme by the trainee and DPP, and the midway progress review which is also completed by both parties, provide an opportunity to define learning needs in the context of the four domains of the GPhC learning outcomes.

The DPP has overall supervisory responsibility for the student and is responsible for assessing whether the learning outcomes have been met. Prior to the student being accepted onto the course, the DPP's application will have been evaluated by the provider and the DPP confirmed as suitable for the role. The DPP receives the prescribing supervisor handbook at the beginning of the course, which reiterates the requirements of the role as well as providing course staff contact details.

The DPP declaration form also requests that the DPP self-declares, through a series of statements, their competence to act as a DPP and that they are in good standing with their professional regulator and do not have any restrictions on their practice. Additionally, the induction and training opportunities offered to DPPs by the University give DPPs the opportunities to further enhance this core competence.

## Standard 7: Assessment

Standard met/will be met? Yes  No

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

The team asked for further information on the quality assurance of assessments undertaken in practice in particular the format of the Objective Structured Clinical Examination (OSCE). The provider explained that OSCEs are designed by the module team. Practising doctors and educational statisticians at the LIME were also consulted on the design of OSCEs. The provider also advised that new OSCEs/standard set OSCEs are sent 2 – 4 weeks beforehand to external examiners and simulated patients for comments and feedback. The module team act as assessors for the OSCE. Colleagues from the wider School of Healthcare also act as assessors. These colleagues are all either registered nurses, advanced nurse practitioners or midwives and are experienced in acting as assessors for OSCEs in the wider School.

It was noted that compensation is permitted between OSCE stations. The accreditation team asked the provider for further clarification on this. The provider emphasised that first and foremost, if a trainee did something in the OSCE that would mean patient harm, such as a failure to identify a serious problem, or giving an answer that would result in patient harm, then this would be an automatic failure. In an instance where the approach of the trainee is good in one station, but they then do not do as well on another station, then compensation between stations could be allowed, but was only permitted on points where the relevant learning outcome had been demonstrated elsewhere and that there was assurance that the learning outcome had been met. In the event that the trainee does automatically fail the OSCE, they are then required to complete a second attempt at the OSCE. Currently the summative OSCEs are audio recorded for internal moderation and are sent to the external examiner for review.

As part of the submission documentation, it was noted that the portfolio is composed of a number of short summaries of clinical encounters during which a prescribing decision is made (Prescribing Contacts (PCs) and Practice Evidence Records (PERs) which are longer reflective pieces. Pharmacists are required to map the evidence they present with the PERs to the RPS Competency Framework for All Prescribers (2021). A number of the PERs are structured using a reflective model and one of these pieces is awarded a mark, which then constitutes 70% of the overall mark for the module (the OSCE accounts for the remaining 50%). The portfolio is marked as a pass or fail by the DPP who signs to verify the trainee's achievement of each competency indicator. The portfolio is then marked by a member of the module team to assess it from a clinical and academic viewpoint. In the past three years, the module team have participated in an activity whereby each team member independently reviews a sample part of a portfolio and then meet to discuss the feedback and outcome that has been independently decided upon. This activity ensures the module team's common expectations in relation to the portfolio and this aids consistency in marking. Consistency in marking is also assured through the moderation process. All portfolios that have been moderated are forwarded electronically to the external examiner.

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

the DPP, also provide a mechanism for feedback on the overall performance of the trainee during the period of supervised practice.

## Standard 8: Support and the learning experience

Standard met/will be met? Yes  No

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

As part of the submission documentation, it was noted that an induction session is scheduled for the first day of the Independent Prescribing module. This is provided by the module team at the University of Leeds. The session, which is approximately 3 hours, provides trainee independent prescribing pharmacists with an overview of the module. This induction session includes topics that will be covered within the taught component of the course (including face-to-face and blended learning) and how the taught component meets the learning standards defined by the GPhC. Trainees are also informed about the assessments within the module and how these assessments map to the learning outcomes defined by the GPhC. Trainees are also informed about the relative weighting of each of these assessments in the overall module mark. The session is audio-recorded so that both trainees and DPPs can listen back to the recording at any point during the course.

Trainees are appointed an academic supervisor during the module and the academic supervisor provides feedback on draft documents from the prescribing portfolio. Feedback is also provided to trainees during teaching sessions. Trainees are provided with an overview of the programme team and the responsibilities and contributions of each of the team members. This ensures that the trainee has a clear understanding as to whom their points of contact are throughout the course.

As part of the submission documentation, it was noted that at a minimum, trainees can expect to meet with their DPP on three occasions to formally discuss their progress in training, at the outset of the programme, the midpoint and at the conclusion. Many trainees work alongside their DPPs in practice and will have ongoing formal and informal discussions with their DPP about their progress. These formal and informal discussions are opportunities for trainees to receive feedback on their performance to support their development.

It was noted that trainees are given several opportunities to provide feedback on the course including providing feedback on individual teaching sessions and towards the end of the module with an electronic module survey circulated by the School of Healthcare. The module survey captures information on teaching quality, resources and academic support and assessment. Trainees can share concerns about the supervision provided by the DPP with their employer (through their line manager) and with the module team at the University. The procedure for raising concerns in the School of Healthcare is provided in the trainee and DPP handbooks made available at the outset of the module.

## Standard 9: Designated prescribing practitioners

Standard met/will be met? Yes  No

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

As part of the submission documentation, it was noted that the DPP declaration form requires the DPP to self-declare that they meet the necessary criteria to act as a DPP. The provider disseminates information on the criteria for a DPP and their roles and responsibilities.

The accreditation team asked how the provider assures that the DPP is competent to assess patient-facing clinic and diagnostic skills. The provider explained that the application form for DPPs requires the DPP to self-declare that they possess each of the required attributes to act as DPP. This information is also validated by the Employer/Manager/Education Lead who must confirm that the DPP is within the applicant's practice area and other practice placement areas; that they are experienced assessors/supervisors who can recognise early signs of failing trainee performance and are also experienced in the taking prompt action. The self-declaration provided by the DPP includes the following criteria; they must have 3 years prescribing experience; they are qualified as an Independent Prescriber; are in good standing with their healthcare regulator with no restrictions on practice (this is checked on the relevant professional register to ensure that this criterion is satisfied); they have active prescribing competence applicable to area in which they will supervise the trainee prescriber; they have appropriate patient-facing clinical and diagnostic skills and the ability to assess these skills.

The provider noted that for trainees with a DPP that is a non-medical prescriber it is mandated that the trainee spends 18hours/20% of their time with a medic in order to ensure that the trainee prescriber receives further support on consultation, diagnostic and clinical assessment skills.

It was noted that the provider provides information and training to DPPs to ensure that they are sufficiently prepared for their role. A handbook is provided to DPPs at the outset of the course. This is also made available to DPPs in hardcopy at the induction session and is also made available electronically online as well as being emailed directly to DPPs by the programme team. A pre-recorded briefing for DPPs is also sent alongside the module handbook, DPP FAQs and Summary of Key Assessment Dates document. The DPP handbook and pre-recorded briefing ensure that the DPP understands their role in the course, understands how and when they will assess the performance of the pharmacist independent prescriber, understands the opportunities for formal learning agreement, midway progress review and portfolio sign off and informal feedback. These resources also clearly signpost the DPP to contact the module lead if they have any specific questions or concerns.

Online training materials are currently being developed to supplement the training provided to DPPs. This online training material will be available to DPPs. Pharmacist DPPs will also have the opportunity to attend 'Educational Supervision in the Workplace' sessions.

