General Pharmaceutical Council

Pearson Education Limited pharmacy technician qualification interim event report, February 2023

Contents

Event summary and conclusions	
Awarding organisation	Pearson Education Limited
Qualifications	Pharmacy technician qualifications
Names of qualifications	Qualification 1: Pearson BTEC Level 3 Diploma in the Principles and Practice for Pharmacy Technicians Qualification 2: Pearson BTEC Level 3 Diploma in the Principles and Practice for Pharmacy Technicians (Apprenticeship)
Event type	Interim
Event date	20 February 2023
Approval period	January 2020 – January 2026
Relevant requirements	Standards for the initial education and training of pharmacy technicians, October 2017
Outcome	Continued recognition The recognition team has agreed to recommend to the Registrar of the General Pharmaceutical Council (GPhC) that the pharmacy technician qualification (including apprenticeship pathway) provided by Pearson should continue to be recognised for the remainder of the recognition period, subject to two conditions and three recommendations.
Conditions	1. Pearson must develop and implement a process to ensure that centre providers use equality and diversity data while designing and delivering courses, this is to ensure that centre providers policies and procedures are fair and do not discriminate against trainees or applicants, and may include analysis of the data to identify themes, trends, and actions based on protected characteristics. This must be monitored in a meaningful way by Pearson. This is because although the team could see evidence that Pearson encourage centre providers to collect equality and diversity data, it was unclear how that data was used by centre providers, and monitored by Pearson, to ensure it was being utilised in delivery of the qualification. This is to meet criterion 2.2. 2. Pearson must develop and implement a process to obtain views from a range of stakeholders, specifically patients and the public. This is because the team could see no meaningful engagement with patients and the public since the last recognition event. This is to meet criterion 5.5.

	The plan of how Pearson intend to address the conditions must be sent to the GPhC, for approval by the recognition team. This must be done by end of May 2023.
Standing conditions	A link to the standing conditions can be **found here**.
Recommendations	1. Pearson should prioritise the process currently underway for recruitment and training of new Standards Verifiers. This is because the team noted that there is not sufficient capacity within the Standard Verifier (SV) team to deal with the volume of work and centre providers indicate delays in the EQA processes. This is in relation to criterion 3.5. 2. Pearson should review its strategy for communication with centre providers. This is because centre providers learned about consultations by chance and the team noted some inconsistency of SV approach and misunderstandings about processes such as Direct Claims status. This is in relation to criterion 3.6. 3. Pearson should update the SV report processes to explicitly capture the public protection aspects of the GPhC Standards. This is because it is not clear where Fitness to Practice processes and patient safety issues are collated and raised by the SV. This is in relation to criteria 5.10 and 6.4.
Registrar decision	The Registrar of the GPhC has reviewed the interim report and considered the recognition team's recommendation. The Registrar is satisfied that Pearson has met the requirement of continued approval (subject to remediation) in accordance with Part 5 article 42 paragraph 4(a)(b) of the Pharmacy Order 2010, in line with the Standards for the initial education and training of pharmacy technicians, October 2017. The Registrar notes that conditions as outlined in the report have been met. Pearson is approved to continue to offer the pharmacy technician qualification and apprenticeship pathway for the remainder of the recognition period until the **end of January 2026.**
Key contact (provider)	Dionne Broughton, Product Manager Healthcare, Childcare and Education and Training
Awarding organisation representatives	Dionne Broughton, Product Manager Healthcare* Sophie Bromley, Qualification Delivery and Award Manager* Michael Phun - Assessment Leader* Chris Oley, Assessment Leader EPA* Amy Laflin, Standards Verifier* Zoe Corcoran (Bradford College)

	Sam Bradshaw (Bradford College) Tania Cork (Stoke College) Maryann Schulz (City of Portsmouth College) Michelle Barnard (City of Portsmouth College) Michelle Owen (City of Portsmouth College) Tina James (Nottingham College) Carol Chamberlain (Nottingham College) Karen Francis (Nottingham College) Rachelle Lewis (Sheffield College) Lauren Partridge (Sheffield College) Kirsty Fielding (Sheffield College) Sam Knox (Nottingham College)
Recognition team	Professor Ruth Edwards (Team leader), Head of School of Pharmacy, University of Wolverhampton* Rebecca Chamberlain (team member - pharmacy technician), Education Officer, Health Education and Improvement Wales and Education and Training Pharmacy Technician Independent Consultant Joanne Bye (team member - pharmacy technician), Senior Medicines Management Pharmacy Technician, West Suffolk Clinical Commissioning Group (WSCCG) Fiona Barber (team member - lay), Deputy Chair & Independent Lay member, East Leicestershire & Rutland CCG
GPhC representative	Chris McKendrick, Senior Quality Assurance Officer (Education), General Pharmaceutical Council*
Rapporteur	Ian Marshall, Proprietor, Caldarvan Research (Educational and Writing Services); Emeritus Professor of Pharmacology, University of Strathclyde

* Attended pre-visit meeting on 13 February 2023

Introduction

Role of the GPhC

The General Pharmaceutical Council (GPhC) is the statutory regulator for pharmacists and pharmacy technicians and registered pharmacy premises in England, Scotland and Wales (the countries of Great Britain). In order to practise in Great Britain, pharmacists and pharmacy technicians must be registered with the GPhC and have satisfied us that they meet our detailed requirements. If you are a training provider or awarding body, you will need to follow the process set out **Standards for the initial education and training of pharmacy technicians, October 2017** to have your pharmacy technician competency and knowledge-based course/qualification approved by us.

The powers and obligations of the GPhC in relation to the accreditation of pharmacy education are legislated in the Pharmacy Order 2010. For more information, visit: http://www.legislation.gov.uk/uksi/2010/231/contents/made

Purpose of this event

The purpose of the interim event is to review the performance of the qualification against the education and training of pharmacy technicians to ensure that delivery is consistent with the GPhC education standards. The interim event utilises trainee feedback and evaluation together with a review of documentation and a meeting with the awarding organisation representatives and relevant stakeholders.

Background

Pearson Education Ltd. (Pearson) approached the General Pharmaceutical Council (GPhC) in 2019 with an application for recognition of a qualification to train pharmacy technicians. Pearson had worked as part of a group of awarding organisations, facilitated by Skills for Health, and supported by Health Education England, in the development of the qualification. The development process included working closely with pharmacy technicians and pharmacists to design the learning outcomes, assessment criteria and indicative content, underpinned by an external consultation. A recognition event (Stage 1) relating to the GPhC learning outcomes was held on 11 April 2019. In line with the GPhC's standards for the initial education and training of pharmacy technicians, October 2017 (integrated knowledge and competency), a Stage 2 event took place on 8 November 2019 to review the Pearson qualification's suitability for recognition; this event concentrated on the fulfilment of the GPhC accreditation and recognition standards and criteria and the awarding organisation's ability to deliver the qualification through their centre providers. In line with the GPhC's methodology for recognising awarding organisations delivering pharmacy technician qualifications. The recognition team agreed to recommend to the Registrar of the GPhC that the L3 Diploma in the Principles and Practice for Pharmacy Technicians (Qualification) provided by Pearson Education Ltd should be recognised for a period of six years with an interim visit in three years. There were no conditions or recommendations.

Documentation

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

Pre-event

In advance of the main event, a pre-event meeting took place via videoconference on 13 February 2023. The purpose of the pre-event meeting was to prepare for the event, allow the GPhC and the provider to ask any questions or seek clarification, and to finalise arrangements for the event.

The event

The event began with a private meeting of the recognition team and GPhC representatives on 20 February 2023. The remainder of the event took place via videoconference on 20 February 2023 and comprised a series of meetings with the provider staff and stakeholders involved in the design of the course/qualification.

Declarations of interest

There were no relevant declarations of interest.

Schedule

Day 1: Pharmacy technician interim, 20 February 2023

	09:00 – 10:15	Private meeting of the recognition team and GPhC representative
	10:15 – 10:30	Break
1	**10:30 – 12:00**	**Questions to provider (optional 15-minute presentation by provider)**
	12:00 – 12:45	Lunch
2	**12:45 – 13:30**	**Meeting with stakeholders and sample of centre providers**
	13:30 – 13:45	Break
3	**13:45 – 14:15**	**Meeting with EQA/IQA of the qualification(s)**
	14:15 – 14:20	Break
4	**14:20 – 14:50**	**Meeting to discuss apprenticeship structure**
	14:50 – 16:30	Private meeting of recognition team
5	**16:30 – 16:45**	**Deliver outcome to provider**

Key findings - Part 1 - Learning outcomes

The Learning Outcomes were not tested at this event

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

Standard 1: Selection and entry requirements

Standard met/will be met? Yes ☒ No ☐

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

The submission stated that there have been no amendments to the selection and entry requirements since the last recognition event. Since the teaching first started in 2020 there have been 1635 enrolments to the qualifications, with 524 completions. The basis for access to the qualifications is that they should be available to everyone who is capable of reaching the required standards, be free from barriers that restrict access and progression, and that there should be equal opportunities for all wishing to access the qualifications. Centres must ensure that their learner recruitment process is conducted with integrity. This includes ensuring that applicants have appropriate information and advice about the qualification to ensure that it will meet their needs.

The team learned that Pearson Standards Verifiers (SVs) visit centres and check admission and fitness to practice policies and documentation, and talk to learners. Information s included in the SV report but Pearson does not collate information across the centres. Centres have to meet the specification and in the case of problems the SV can ask Pearson for guidance. Pearson could impose a sanction such as preventing the centre from recruiting more learners, for example, if there were insufficient staff members to teach the course. Such a sanction would have to be approved by the Senior Standards Verifier (SSV) after discussions between the SSV and a scrutineer. Consistency is helped by training and standardisation events carried out by the SSV, scrutineer and Pearson staff.

The entry requirements are included within the Qualification Specification to ensure consistency across all Pearson-approved centre providers. Centres are advised that they should review applicants' prior qualifications and/or experience, considering whether this profile shows that they have the potential to achieve the qualification. The entry requirements include that learners must be currently working in a pharmacy environment, therefore securing the placement as a pre-registration trainee pharmacy technician. Additionally, learners must have GCSE passes in English, Mathematics and Science and acceptable good character references and health check results. The team was told that, in the interests of widening participation, the science entry qualification has been softened. As part of the Standard Verifier (SV) activities it will be ensured that centres have a procedure to check fitness to practise in the form of a DBS check or a character reference check. There are templates for gathering the health check and good character reference to support the centres. Selectors must apply the selection criteria consistently, in an unbiased way and in line with relevant legislation. They will be trained to do this, and the training will include equality, diversity and inclusion. Centres will provide evidence of this as part of the sampling exercise during Standards Verifier (SV) visits. Additionally, SVs will ensure that centres have policies on fair recruitment. The outcomes of SV monitoring are

recorded to confirm that the centres' access and fair assessment policy and practice is understood and complied with by assessors and candidates. The team was told that the default situation is two SV visits to a centre per year. Legacy centres having shown consistency of performance over a number of years would have two visits but newer centres would have another two visits.

Standard 2: Equality, diversity and inclusion

Standard met/will be met? Yes ☐ No ☒

The team was satisfied that two of the three criteria relating to equality, diversity and inclusion requirements continue to be met with one criterion subject to a condition.

The submission stated that there have been no amendments to equality, diversity and inclusion policies since the last recognition event. The guidance to centres for embedding equality and diversity is given under Centre resource requirements is monitored during SV/LSV visits to ensure that the centres have the policy and apply it in practice. Centres are advised that for learners with disabilities and specific needs, the assessment of their potential to achieve the qualification must identify, where appropriate, the support that will be made available to them during delivery and assessment of the qualification. The learner must be directly supervised by a pharmacy professional that is registered with the GPhC.

The team learned that EDI is taken into account in centre approval process; EDI should be embedded in the programme by centres so that everyone has to be treated fairly. However, the team was told that Pearson does not collect or collate EDI data from centres as it is the centres' responsibility, although centres would not be penalised for not collecting data. SVs are not expected to analyse EDI data. Representatives of centres interviewed indicated that EDI data are used to inform specialised learning needs approaches, for example, for mental health issues, and that reasonable adjustments are made. However, it will be a **condition** of recognition that Pearson must develop and implement a process to ensure that centre providers use equality and diversity data while designing and delivering courses, this is to ensure that centre providers policies and procedures are fair and do not discriminate against trainees or applicants, and may include analysis of the data to identify themes, trends, and actions based on protected characteristics. This must be monitored in a meaningful way by Pearson. This is because although the team could see evidence that Pearson encourages centre providers to collect equality and diversity data, it was unclear how that data was used by centre providers, and monitored by Pearson, to ensure it was being utilised in delivery of the qualification. This is to meet criterion 2.2.

Reasonable adjustments are made to course delivery and assessment to help learners having specific needs to meet the learning outcomes. Teaching, learning and assessment may be modified for this purpose but learning outcomes may not. Any reasonable adjustment must reflect the normal learning or working practice of a learner in a centre or working within the occupational area. Data on special considerations and reasonable adjustments is held centrally within Pearson and is considered when reviewing the qualifications and/or reviewing assessments.

Standard 3: Management, resources and capacity

Standard met/will be met? Yes ☒ No ☐

The team was satisfied that all seven criteria relating to management, resources and capacity requirements continue to be met. Two recommendations were made.

The submission indicated that there have been two amendments to the management, resource and capacity requirements since the last recognition event. The GPhC were informed of these in April 2022. There was a notification of the change of key contact, and clarification of the guidance on the equivalency of science requirements for entry to the two qualifications.

The general and specific resources required for the delivery, assessment and quality assurance of the qualification, including roles and responsibilities, are checked at centre approval stage and monitored through Lead Standards Verifier (LSV) and SV visits. The LSV report provides generic assessment over several subject areas for verification activity and references the workplace with a written code of practice and/or contract between any satellite, outreach, franchise, linked centres/sites and work placements. The SV report references employer with learner, employer and other feedback being used to evaluate the quality and effectiveness of qualification provision against the centre's stated aims and policies. Centres' representatives told the team that there were 1:1 reviews of trainees' progress with employers and that communication with employers was good.

The team heard from representatives of centres interviewed that there have been problems in organising SV visits towards the end of the programmes at the time of the assessments. Pearson explained that their long-standing pharmacy SV had retired recently and that currently there is one person acting as both SSV and SV. Two additional SVs have been appointed recently and are being trained, with another two SVs being recruited currently. Although centre providers indicated that SVs were very supportive, they did report delays in arranging sampling. It will be a **recommendation** that Pearson should prioritise the process currently underway for recruitment and training of new Standards Verifiers. This is because the team noted that there is not sufficient capacity within the SV team to deal with the volume of work and centre providers indicate delays in the EQA processes. This is in relation to criterion 3.5. It will also be a **recommendation** that Pearson should review its strategy for communication with centre providers. This is because centre providers learned about consultations by chance and the team noted some inconsistency of SV approach and misunderstandings about processes such as Direct Claims status. This is in relation to criterion 3.6.

Standard 4: Monitoring, review and evaluation

Standard met/will be met? Yes ☒ No ☐

The team was satisfied that all five criteria relating to monitoring, review and evaluation requirements continue to be met.

The submission stated that there have been no amendments to the monitoring, review and evaluation requirements since the last recognition event. The qualification has been designed collaboratively with HEE and other awarding organisation and the views of employers and other providers were gained through consultation and used to improve various aspects of the qualification. Pearson will continue to elicit the views of employers and other stakeholders and make improvements as needed. Pearson has a Quality Management policy to deliver continual improvement and efficiencies to enable it to meet the needs of learners, centres and stakeholders,

and to ensure that its business goals comply with internal, external, legal and regulatory requirements.

There is a quality assurance system in place for all BTEC and competence-based qualifications. This starts at the centre and qualification approval stage. Centres are expected to get a centre approval and then a qualification approval and enter a formal agreement with Pearson to offer the qualifications.

The team was told that the 2021 cohort was around 730 trainees with the SV sampling at least 10% of trainees with apprentices needing to be 100% verified by the SV. As indicated in the commentary to Standard 3 above, the current capacity of SVs is reduced due to retirement. The team learned that Direct Claim status is due to consistency of delivery by centres. Representatives of centres interviewed said that qualified internal verifiers that are pharmacy technicians are used. It was confirmed that SVs have to declare any conflicts of interest.

Standard 5: Course design and delivery

Standard met/will be met? Yes ☐ No ☒

The team was satisfied that nine of the ten criteria relating to the course design and delivery requirements continue to be met, with one criterion subject to a condition. One recommendation was made.

The submission stated that there have been no amendments to the course design and delivery requirements since the last recognition event. The team learned that the specification is updated on a 3-year cycle and was last updatd In April 2020 including the assessment guidance. The Product Manager Healthcare checks that everything is correct in the specification.

Wishing to know how the quality of teaching is monitored for centres who are not under Ofsted/ESTYN monitoring, the team was told that SVs check quality which is then double-checked by EQA. SVs also observe teaching and delivery of assessments. IVs check feedback on QA and that the delivery staff is trained.

Pre-registration trainee Pharmacy Technicians will be employed and the responsibility for supervision will lie with the employer.

The qualification consists of 21 mandatory units which cover a mix of knowledge and skills. The units are designed to be delivered in the workplace and by education and training providers and be assessed holistically where appropriate and in line with standard assessment principles. The specification gives centres direction on the suggested order of delivery of the units. The skills and underpinning knowledge will be taught through work-based learning, guided learning and individual study throughout the two-year programme. The centres develop their own individual training and learning strategies. This allows for flexibility for the training providers in how they deliver the programme according to local provision. Indicative content for each unit has been developed which each training provider must deliver. This provides assurance that all training providers are delivering the same content across England and Wales.

The specification gives guidance to centres on delivery and resource requirements for an effective delivery and assessment to ensure all standards are met. It gives direction on the good practice for the delivery of the units, the skills and underpinning knowledge to be taught through work-based

learning, guided learning and individual study throughout the two-year programme. Centres obtain feedback from trainees via Learner Voice meetings with an independent chair, online and end of course surveys, plus IVs can telephone learners.

The team was told by centres' representatives that employers and past students had helped in the design and delivery of units. One centre indicated that it attended meetings with HEE and was involved in an Integrated pilot study with HEE including trainees in GP practices. In response to a question about input from with wider stakeholders (employers, trainees, patients, public, other AOs) to ensure that the qualification continues to be fit for purpose, the team was told that this is the responsibility of centres and that Pearson has no interaction with patients and public. Representatives of centres interviewed also said that there was no involvement of patients and the public as it would be too difficult to get views on the course It was suggested that this was an area that could usefully be discussed at the Joint Advisory Board. The team pointed out that this is part of the standard and should not be left to SVs to check. Accordingly, it will be a **condition** of continued recognition that Pearson must develop and implement a process to obtain views from a range of stakeholders, specifically patients and the public. This is because the team could see no meaningful engagement with patients and the public since the last recognition event. This is to meet criterion 5.5. It will also be a **recommendation** that Pearson should update the SV report processes to explicitly capture the public protection aspects of the GPhC Standards. This is because it is not clear where Fitness to Practice processes and patient safety issues are collated and raised by the SV. This is in relation to criterion 5.10.

Standard 6: Course assessment

Standard met/will be met? Yes ☒ No ☐

The team was satisfied that all ten criteria relating to the course assessment requirements continue to be met. One recommendation was made.

The submission indicated that there have been no amendments to the course assessment requirements since the last recognition event. Pearson along with other awarding organisations as part of the collaborative development have developed a set of common assessment principles for this qualification. The principles cover the assessment requirements for both skills-based and knowledge-based units and the re-sit requirements for the knowledge-based units. Three skills-based units which have additional assessment requirements detailed in the units. The roles and responsibilities of assessors, internal quality assurers, expert witnesses, co-ordinating and lead assessors and external quality assurers are included. However, these common assessment principles do not cover marking criteria, procedures for suspected plagiarism and/or malpractice, appeals procedures, mapping of assessments to learning outcomes. This because as each Awarding Organisation will have its own procedures.

The primary method of assessment for the skills-based units is observation in the workplace by the assessor. Across the skills-based units there must be at least three observations which cover the required skills. Evidence should be generated over a period of time to show consistent performance. Expert witness testimony may be used where it is difficult for an assessor to observe aspects of practice. However, expert witness testimony is not a substitute for the requirement of three observations by the assessor across the qualification.

For knowledge-based units, evidence will be assessed using internally set, internally marked written assignments. Pearson will provide sample assignments and assessment guidance to centres Assignments will be marked by the centre using set marking criteria produced by the centre. The assignments will be internally quality assured, then subject to externally quality assurance sampling by Pearson. Centres' representatives told the team that centres have qualified !QAs. SVs examine the work that has been IVed, with 100 percent sampling at the moment. The IQAs are pharmacy technicians.

Health and safety, including patient safety, is a common theme in the units and will be assessed continuously. A statement concerning patient safety is also included in the common set of assessment principles. Reflective practice must be undertaken throughout the programme. However, the team noted that the SV visit report does not appear to reference patient safety. The team wished to know how the monitoring process ensures that patient safety is prioritised within a centre's assessment process. As indicated in the commentary to Standard 5 above, the team was told that patient safety is not included in the SV report and that Pearson depends on centres to record any instance of patient safety problems. It was indicated that dispensing includes reporting of errors and incidents. It will be a **recommendation** that Pearson should update the SV report processes to explicitly capture the public protection aspects of the GPhC Standards. This is because it is not clear where Fitness to Practice processes and patient safety issues are collated and raised by the SV. This is in relation to criterion 6.4.

The individual training providers are responsible for the recruitment, management and competence of the assessors. However, the roles and responsibilities, including the requirement to have appropriate assessor qualifications and be a registered pharmacy professional are included in the common set of assessment principles.

Standard 7: Pre-registration trainee pharmacy technician support and the learning experience

Standard met/will be met? Yes ☒ No ☐

The team was satisfied that all seven criteria relating to pre-registration trainee pharmacy technician support and the learning experience requirements continue to be met.

The submission stated that there have been no amendments to the support and the learning experience requirements since the last recognition event. There is signposting to the support available to the learners, covering academic study, general welfare and career advice. This support is discussed at induction and revisited throughout the course. Centres have been provided with guidance on learner support in the specification, and this is further reinforced during training and networking events. Centres have agreements with employers for learners to have full access and support required for learning and assessment. Centres have policies and procedures for learner support. The SV considers how these are implemented. The implementation is considered through interviews with staff and learners, the quality of assessment and IQA outcomes and progress over time. Assessment, delivery and quality assurance strategies are required from the outset, all carried out by the SV before approval is given. Centres attend networking sessions organised by Pearson to share best practice.

Learners are given the opportunity to work in multi-disciplinary teams to have the opportunity to learn from peers. All centres and employers have procedures in place to deal with concerns. Serious concerns that may affect a pre-registration trainee pharmacy technician's suitability for future registration, such as inappropriate or criminal behaviour, must be reported to the GPhC. There must also be clear procedures for learners to raise concerns. Any concerns must be dealt with promptly, with documented action taken when appropriate. Learners are made aware of the GPhC's guidance to raising concerns about pharmacy education and training. During Pearson's SV visits it will be confirmed that that tutors are registered with the GPhC and have been practising for at least three years.

The team wished to know how trainee feedback collected and acted upon and was told that Pearson does not have a process for feedback but rather that it is the responsibility of centres to collect for the SV to check. As a result, the process is limited, being restricted to centres. The SSV and SVs involved and discuss feedback and good practice at visits. It was confirmed that that SV visits will be resumed after the COVID-19 pandemic, and that Confirmed that SV visits will be resumed and that centres that show consistency will proceed to Direct Claim status.

Apprenticeship pathway and End Point Assessment (EPA)

A brief overview of the apprenticeship structure EPA integration of the apprenticeship route.

The apprenticeship is treated as a separate qualification. Thus, apprentices will receive their competence-based qualification, prior to undertaking their end-point assessment.

Pearson looks after pharmacy with respect to the EPA and works with the lead internal QA. Within the pharmacy technician (integrated) route, all providers have opted for the temporary dispensation route, using the new fully integrated EPA plan. To ensure compliance with the assessment plan (and IFATE requirements), Pearson has requested that a copy of the Pharmacy Technician qualification is uploaded as part of the gateway process. Pearson works closely with its colleagues that verify standards and allow certification, to ensure apprentices are not disadvantaged by any delays. Providers use the Pearson level 3 qualification, which allows EPA delivery to review and monitor gateway submissions in a timely manner.

Pearson uses ACE360 as its EPA management system. This system allows for each provider to upload the gateway evidence and then submit to Pearson for review, before entering the EPA period. As the system tracks each interaction, it confirms who has reviewed, who has added comments and allows for a clear picture for internal and external audit. Only when the gateway evidence has been

confirmed by a Pearson-appointed individual, can the provider make a booking for EPA and undertaken the assessment.

Wishing to know how Pearson monitors the EPA requirements in terms of the dispensation currently in place and how Pearson is supporting the centres with this, the team learned that Pearson is monitoring any updates/changes, for example. revision of assessment plan. There have been a number of meetings with training providers to know what has been agreed. Trusted centres with direct claim status have performed consistently over several years. Other centres wishing for direct claim status have experienced difficulties in certifying trainees due to the lack of SV capacity at crucial times and that the IFATE website has no plan, but 100% sampling will continue until an assessment plan agreed.

The team was told that the major problem for Pearson with the apprenticeship route has been the lack of clarity from IFATE meaning that Pearson has had to take decisions. It was agreed that the 100% sampling is a challenge and that centres have been asked to provide as much notice as possible for SVs. The Pearson EPA Assessment Leader can organise EPAs for pharmacy registrants plus assessor qualifications. Internal verification is done by SVs, followed by the EPA Assessment Leader for extra skills and validating portfolio.

Once assessment has been completed, the Independent End-Point Assessors have 48 hours to upload their assessment decisions, IQA has 48 hours to sample, and results are released on the system on day 5. With everything being contained in the ACE360 system, the system is able to lock any assessment-related decisions until IQA has occurred. This is a standard time frame for both level 2 and level 3 apprenticeship standards. The team was told that Dispensation strips away the need for the EPA but requires validation. It was confirmed that the EPA must be passed for a pass and registration. The EPA Assessment Leader will take over pass list from the Pearson Assessment Team to submit to the GPhC.

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