

Step 5 Accreditation of an MPharm degree course, University of Ulster

Report of an accreditation event, 18th & 19th April 2011

Introduction and background

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 MPharm at the University of Ulster is delivered by the Department of Pharmacy and Pharmaceutical Science (DPPS), part of the School of Biomedical Sciences (SBS), one of the eight schools within the Faculty of Health and Life Sciences. A Step 2 visit took place in April 2008. As the funding of the proposed programme was dependent on financial support from an overseas partner, the Saad Group, the then regulators (the Royal Pharmaceutical Society of Great Britain and the Pharmaceutical Society of Northern Ireland) required to be reassured that the financial support arrangements for the proposed MPharm were robust. After obtaining the necessary reassurances, approval was given to proceed to Step 3 of the accreditation process for a new school.

A Step 3 visit to the Coleraine campus took place on 21 April 2009 and the first cohort of students was admitted in September 2009. At the subsequent Step 4 visit on July 19 - 20 2010, one condition was set, namely that the comprehensive module guides for the academic year 2010 - 2011 had to be submitted to the RPSGB and the PSNI accreditation division for approval before the start of the next academic year. This was to meet criterion 3, 4, and 32-39. The recommendation made at Step 4 stated that the team should regularly review module content and descriptors, paying particular attention to the currency of the reading lists and associated material; the completeness of content; realistic levels of content and required student effort, along with the M-level nature of the proposed final year modules..

Documentation

The following documents were submitted by the provider in advance of the step 5 accreditation visit:

1. University of Ulster, Department of Pharmacy and Pharmaceutical Sciences: MPharm Step 5 Accreditation Submission
2. University of Ulster, Department of Pharmacy and Pharmaceutical Sciences: MPharm Step 5 Appendices

3. University of Ulster, Department of Pharmacy and Pharmaceutical Sciences: MPharm Plans for Step 5 Accreditation visit

The team agreed that the documentation submitted provided the basis for discussion during the visit. Other documents were provided during the visit.

The visit

The Step 5 accreditation visit took place on the 19 April 2011 at the Department of Pharmacy and Pharmaceutical Sciences, University of Ulster, Coleraine, Northern Ireland.

18 April 2011

Meeting	Time
1 Private meeting of accreditation teams and GPhC representatives	15:00 – 18:30

19 April 2011

Meeting	Time
1 Private meeting of accreditation teams and GPhC representatives	08:30 – 09:00
2 Accreditation teams' meeting (Strategic) with provider's senior staff	09:00 – 10:30
3 Accreditation teams' meeting (Course team) with provider's teaching staff	10:45 – 12:00
4 Accreditation teams' meeting with provider's Senior University staff	12:00 – 12:20
5 Accreditation teams' meeting with students (including working lunch)	12:30 – 13:30
6 Accreditation teams' tour of Saad Centre for Pharmacy and Diabetes	13:30 – 14:15
7 Private meeting of accreditation teams and GPhC representatives	14:15 – 15:30
8 Feedback to provider	15:30

The Accreditation Teams:

1. The GPhC accreditation team comprised:

Name	Designation at the time of accreditation event
Professor Terry Healey*	Accreditation team leader, Emeritus Professor of Robert Gordon

Professor Brenda Costall	University, Aberdeen and Visiting Professor at the University of Strathclyde Accreditation team member (academic), Professor of Neuropharmacology, former Head of School of Pharmacy University of Bradford
Dr Gillian Hawksworth	Accreditation team member (pharmacist, community), Pharmacy Consultant, Locum Pharmacist and Senior lecturer, University of Huddersfield
Dr Linda Hakes	Accreditation team member (pharmacist, industry), UCB Group
Mr Alan Kershaw	Accreditation team member (Lay), Chair, ILEX Professional Standards Ltd
Professor David Luscombe	Accreditation team member (academic), Emeritus Professor of Clinical Pharmacy, Welsh School of Pharmacy, Cardiff University
Mrs Barbara Wensworth	Accreditation team member (pharmacist, hospital), Lecturer, Bradford College

There were no conflicts of interest expressed by members of the GPhC accreditation team.

2. The PSNI accreditation team comprised:

Name	Designation at the time of accreditation event
Professor Stephen Denyer**	Accreditation team leader, (PSNI) Professor of Pharmacy & Deputy Pro-Vice Chancellor, Cardiff University
Dr Geoffrey Hall	Accreditation team member (Academic) Associate Head of Leicester School of Pharmacy
Ms Michelle McCorry	Accreditation team member (PSNI) Post Registration Facilitator, PSNI (Observer)
Mrs Linda Stewart,	Accreditation team member (PSNI) Practice Pharmacist, PSNI
Professor Dorothy Whittington	Accreditation team member (Lay), Previous Director of Education & Research North Bristol NHS Trust

Professor Whittington confirmed that she had previously been a member of academic staff at the University of Ulster but left eight years ago.

along with:

Name	Designation at the time of visit
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Ms Joanne Martin*	Accreditation and Recognition Manager, General Pharmaceutical Council
Mr Damian Day	Head of Education and Quality Assurance, General Pharmaceutical Council (observing)
Mr Graham Pope	Invited Observer
Ms Lindsay Taylor	Rapporteur

*attended pre-visit meeting

** attended pre-visit meeting by teleconference

Accreditation criteria

Criteria	Accreditation team's commentary
Prerequisites, including admissions [criteria 1-6 (see Appendix 2)]	On the basis of the submitted documentation the teams agreed that five of these criteria were likely to be met. The provider reported that the practice staff members (most of whom do not have research- based qualifications) were already accumulating relevant research experience through cross-University projects. The Department is working towards a requirement that staff must have studied at the level at which they are supervising and consequently some of the practice staff are undertaking an M-level Postgraduate Certificate which includes a research module and work within a research environment. There are also plans to ensure that first-time supervisors are teamed with those who have more experience. The teams agreed that it would be necessary to monitor the arrangements for the delivery of the projects as the course develops. It will be a recommendation of this report that the provider to put in place, where appropriate, a structured development programme for the supervision of research projects for staff that are in the early stages of their research career. The teams agreed that subject to the satisfaction of this recommendation, this criterion (criterion 5) is likely to be met.
Outcomes: the graduate... [criteria 7-23]	On the basis of the submitted documentation the teams agreed that all but two of these criteria were likely to be met. Thus, the teams agreed that criteria relating to communication skills, problem-solving, calculations, and ethical dilemmas were well covered and particularly noted the high level of debate that was emerging from both staff and students as a result of the teaching of ethical dilemmas. However, the teams concluded that, although most aspects of the basic science underpinning the understanding of later topics such as therapeutics are well covered, important connections between them, such as those demonstrated by an understanding of the principles of pharmacokinetics, are less clear. As a result it will be a

	<p>recommendation of this record that there be further development of integration throughout the course (this relates to criterion 11). The teams accepted that examples quoted during the visit introduced the students to the concepts of risk assessment and risk management, but did not provide evidence of a holistic approach to risk management when dealing with medicines and patients. The teams considered that a review of risk management should be undertaken as the course material is developed for the final years of the programme. As indicated in relation to criterion 11 above, the teams noted that there is a number of inexperienced researchers who will be given the responsibility of supervising students as they themselves develop research skills. It will be a recommendation of this report that a formal development programme be put in place for staff in the early stages of their research career (this relates to criterion 21). Subject to the satisfaction of the above recommendations, these criteria are likely to be met.</p>
<p>Processes: the student... [criteria 24-31]</p>	<p>On the basis of the submitted documentation the teams agreed that all but one of these criteria were likely to be met. Although the provider explained that the students discuss patients and their care in the tutorials and seminars associated with the first pharmacy practice module, the teams were concerned to note that the documentation for the Level 4 pharmacy practice module contained little reference to patients. The teams accepted that the needs of the patient featured in the initial pharmacy practice module, but welcome further patient involvement in the future and an understanding of the achievement of measurable clinical outcomes would be facilitated. It will be a recommendation of this record that there be further development of the integration throughout the course. The teams agreed that subject to the satisfaction of this recommendation, this criterion (criterion 24) is likely to be met.</p>
<p>Processes: the degree course... [criteria 32-39]</p>	<p>On the basis of the submitted documentation teams agreed that all but one of these criteria were likely to be met. The teams noted that a wide variety of stakeholders contribute to curriculum review and considered this to be a positive approach. There is a Pharmacy Employers Liaison committee comprising local community pharmacists, the heads of pharmacy in nearby hospital trusts, and industrial pharmacists with a cross NI responsibility. However, whilst some of the identified indicative syllabus issues have been resolved by the provider, others remain unresolved. The teams agreed that individual elements of scientific and practice-based knowledge should be better integrated throughout the MPharm, both horizontally between modules and vertically between levels. It will be a recommendation of this report that there be further development of the integration throughout the course. The teams agreed that subject to the satisfaction of this recommendation, this criterion (criterion 32) is likely to be met.</p>
<p>Structures [criteria 40-50]</p>	<p>The teams were reassured to learn from the Vice Chancellor of his continued support for the MPharm degree at the University of Ulster and that the institution views pharmacy as a key strategic priority. On the basis of the submitted documentation teams agreed that these criteria were likely to be met.</p>

Summary and conclusions

The accreditation teams agreed to recommend to the General Pharmaceutical Council's Registrar and the PSNI's Registrar that the University of Ulster be permitted to progress from step 5 to step 6 of the MPharm accreditation process, subject to the following recommendations:

1. that the course team enhances the links across and between modules. This relates to criteria 11,24 and 32.
2. that, where appropriate, there should be a structured development programme for the supervision of research projects for staff that are relatively inexperienced researchers. This relates to criteria 5 and 21.

These recommendations should be considered in time for any changes to be implemented before the start of the 2011/12 academic year.

The accreditation team leaders reminded the University of the following:

- the recommendations of the accreditation team are not binding on the Registrars of the GPhC and the education committee of the PSNI and they may add, remove or modify points on reflection and in light of members' views;
- the GPhCs and PSNIs record and report would be sent to the University shortly to comment on factual accuracy;
- all accredited MPharm providers are required to inform the GPhC and the PSNI annually of changes to the curriculum and/or resources.

The accreditation team leaders emphasised that the accreditation teams' feedback is confidential until it has been ratified by the Registrar of the GPhC and the education committee of the PSNI.

Cautions

Preregistration and employment as a pharmacist:

- In respect of all students, successful completion of an accredited course is not a guarantee of a placement for a pre-registration year or of future employment as a pharmacist.

The accreditation process

- Either party may withdraw from the accreditation process at any time.
- The General Pharmaceutical Council will not withdraw unless it has good reason to do so: specifically, if it has evidence the conditions of accreditation are not being met and are unlikely to be met for the foreseeable future. Meeting conditions includes meeting the standing conditions for accreditation, meeting the generic criteria for accreditation and complying with specific conditions imposed as part of an accreditation event

Standing condition of accreditation:

These are the conditions which will apply in all circumstances of degree accreditation:

1. The school or department of pharmacy always seeks approval from the GPhC and the PSNI for curriculum amendments and always at least informs the GPhC and the PSNI of significant changes to pharmacy undergraduate student numbers or resources for their teaching, learning support and assessment, including any change from internal to teaching, learning and assessment from outside the school or department;
2. The school or department of pharmacy produces and submits to the GPhC and the PSNI annually requested data on student numbers and progression and degree awards;
3. The school or department of pharmacy produces and submits to the GPhC and the PSNI annually requested information about the extent of human and physical resources it enjoys for the delivery and support of the degree course;
4. The school or department of pharmacy or the university makes students and potential students aware of the existence and Internet address where they can view the GPhC's summary reports of degree accreditation exercises, main after- actions therefrom and of the timetable for future accreditation exercises.

Appendix 1

Overview of the MPharm accreditation process

The accreditation process

Initial education and training: The initial education and training of pharmacists in Great Britain is determined by the General Pharmaceutical Council. The European Communities (Recognition of Professional Qualifications) Regulations 2007 build into UK law European requirements for mutual recognition of pharmacy qualifications within the European Union. One of the requirements is that the initial education and training of pharmacists is at least five years full time (or part-time) equivalent. The only routes to registration as a pharmacist for students in the UK are:

1. A four-year accredited MPharm plus one year pharmacist pre-registration training and the GPhC's Registration Examination = five years; or
2. A two-year accredited Foundation Degree in Pharmacy plus years Two-Four of an MPharm plus one year pharmacist pre-registration training and the GPhC's Registration Examination = six years.

The accreditation process for new schools has seven steps:

- Step 1 [intake minus three years]: An initial meeting between a university and the Council at the Council's headquarters. A brief report is written but it is not formally approved by the Registrar.
- Step 2 [intake minus two years]: Consideration of the business plan, outline syllabus and draft prospectus entry. A formal report is written, as is the case for all subsequent steps.
- Step 3 [intake minus one year]: Consideration of the syllabus. Successful completion of step 3 permits an institution to admit students onto a provisionally accredited course.
- Step 4 [first year of teaching]: Consideration of year one & plans for year two and reviewing progress towards meeting the accreditation criteria & teaching the syllabus.
- Step 5 [second year of teaching]: Consideration of year two & plans for year three and reviewing progress towards meeting the accreditation criteria & teaching the syllabus.
- Step 6 [third year of teaching]: Consideration of year three & plans for year four and reviewing progress towards meeting the accreditation criteria & teaching the syllabus.
- Step 7 [fourth year of teaching]:

Existing schools are reaccredited every five years, normally for a period of five years.

Accreditation teams are drawn from a wider accreditation panel. The members of the accreditation panel are on the GPhC's website.

1.2 Outcomes of accreditation

New Schools

At each step event a school can be permitted to progress to the next step or not. The next step event will be in the following academic year.

Existing schools

The outcomes are:

1. Reaccreditation for five years (a full period);
2. Reaccreditation for a shorter period;
3. Imposing probationary status if serious concerns are raised;
4. Withdrawal of accreditation.

Withdrawal of accreditation can be appealed.

Extraordinary events

The Council reserves the right to investigate a concern at a school of pharmacy at any point.

Appendix 2 - Criteria for degree accreditation

Organisation and status of the criteria

The criteria for degree accreditation are structured as follows:

- Pre-requisites
- Outcomes
- Processes
 - The student
 - The degree course
- Structures

The GPhC's main concern is for the outcomes, processes and structures of, and for, the MPharm degree course. As such there is just a single criterion related to degree course entry requirements. The pre-requisites are dictated by the European Directive 85/432/EEC and resolutions of the EC Advisory Committee on Pharmaceutical Training.

Prerequisites

1. The student undertakes at least 3,000 hours of directed study of pharmaceutically-relevant subjects within a full-time degree course of four years' duration.
2. The greater part of the curriculum and not less than 50% of the final year of the degree course is core content, i.e. common to all students.
3. Those components of the degree course which collectively deal with the actions and uses of drugs and medicines occupy no less than 35% of the curriculum, irrespective of the extent of specialisation in the final year.
4. At least 35% of those parts of the degree course common to all students involve the student in preparing for, undertaking and analysing the outcomes of experiments, exercises or observations wherein s/he reaches his/her own findings or conclusions.
5. The degree course includes a significant research project of three to six months duration, but not necessarily with all curriculum time during this period being devoted to this activity alone. The student must undertake the project alone or as his/her individual contribution to a team endeavour. The project must

address a research question or problem, must involve a critique of research methodology employed, and must include an analysis of results generated directly by the student or indirectly by others as primary researchers.

6. All pharmacy degree course entrants must have achieved GCSE at Grades A to C, or equivalent qualifications, in English Language and Mathematics

Outcomes

The graduate...

7. takes personal responsibility for his/her learning, developing a foundation for subsequent continuing professional development,
8. can communicate effectively, orally and in writing, with his/her teachers and peers, as a sound basis for future interaction with patients, carers and other healthcare professionals,
9. can undertake structured problem-solving,
10. is able to recognise ethical dilemmas in healthcare and science, and understands ways in which these might be managed by healthcare professionals, whilst taking account of relevant law,
11. appreciates and has an understanding of main sources of drugs; ways in which drugs are purified, characterised and analysed; their physico-chemical properties; and properties drugs display as biologically active molecules in living systems,
12. has an understanding of the design, manufacture and performance of drug dosage forms and is able critically to appreciate the inter-relationship between formulation, drug delivery and therapeutic effectiveness,
13. understands how medicines are developed, manufactured and brought to the market place,
14. has proved him/herself capable of performing pharmaceutical calculations accurately,
15. has the capability to prepare extemporaneously any medicine for which this would be regarded as the normal means of provision, including by aseptic technique,

16. is able to interpret and evaluate, for safety, quality, efficacy and economy, prescriptions and other orders for medicines, and to advise patients and other healthcare professionals about medicines and their usage,
17. is aware of and understands systems for the quality assurance of products and pharmaceutical services. This includes the management of risk,
18. is able to design, improve, and operate within standard operating procedures, including Patient Group Directions,
19. is able to supply medicines in accordance with legal and professional requirements,
20. can undertake critical appraisal of information or conjecture in all forms of presentation,
21. can apply appropriate research approaches and methods to manage scientific and practice problems,
22. has a foundation of knowledge, understanding and skills for promoting good health; diagnosing disease; and prescribing medicines.
23. Understands and can explain concepts of medicines management and pharmaceutical care.

Processes

The student...

24. is inculcated with a concern for the patient, normally above other considerations,
25. gains first-hand structured experience of practice, including contact with patients and practitioners of other healthcare professions,
26. is required to communicate with individuals and audiences,
27. is instructed in the use of, and required to apply, library and other information resources,
28. is required to apply routinely, word-processing, spreadsheet, database, e-mail and information retrieval computer applications,
29. has brought to his/her attention the continuing professional development opportunities open to practising pharmacists,

30.is made aware of the advantages of, and encouraged to undertake, employment or attachment for vacation experience in pharmacy practice,

31.is encouraged both to be a participating member of the British Pharmaceutical Students' Association and to attend local RPSGB branch or regional meetings, or equivalent meetings in Northern Ireland.

The degree course...

32.is planned with reference to the indicative syllabus at Appendix 2 and as an integrated programme. This means that the inter-relationships of its component parts are considered and made explicit,

33.seeks to develop students' skills of self-management, teamworking and peer assessment,

34.has the features of positioning knowledge, understanding and skills in a pharmaceutical context and with reference to pharmacy practice,

35.in the processes of curriculum review and development, benefits from the academic staff properly taking account of major advances and developments potentially impacting on pharmacy,

36.features a variety of approaches to achieving and assessing learning appropriate to its stated objectives, including lectures, practical classes, seminars, workshops, tutorials, computer-based/ aided learning, clinical visits, problem-solving exercises, essays, projects, dissertations and other assignments, and examinations,

37.includes significant staff-led or supervised time devoted to the topics of pharmacy law and professional requirements, and their applications in practice, this being in addition to the assimilation of legal and professional requirements into a substantial proportion of a dispensing practical course,

38.where appropriate and possible, has the student taught and learning alongside and together with students of other healthcare professions,

39.has pharmacy undergraduate teaching taking place alongside and with reference to research and other postgraduate activities.

Structures

40. For its proper ethos, quality assurance, and scientific and professional leadership, the degree course is within the control of, and predominantly delivered by, an autonomous school or department of pharmacy,
41. accommodation, human, equipment, and other resources available to the school or department of pharmacy are sufficient for the effective delivery of the planned degree course to the numbers of students in each year of the degree course, and overall; properly taking account of the teaching, research and other commitments of the unit,
42. the school or department of pharmacy has an appropriately expert academic staff, including such in the practice of pharmacy,
43. the school or department of pharmacy has within its academic staff at least one pharmacist who is a professor or of equivalent authority in the institution,
44. teacher-practitioners and visiting lecturers from all of community, hospital and industrial pharmacy practice, and appropriate persons from other healthcare professions are involved in teaching/support for learning and assessment,
45. the student has access to a personal tutor or tutors for academic guidance and pastoral care,
46. there is an active staff-student consultative committee,
47. pharmacy law, professional requirements and practice are taught - predominantly by pharmacists - from within the identifiable organisational unit which provides the bulk of teaching and other support for learning for the degree course,
48. there is assessment of competence in dispensing either by an examination at the end of a dispensing course, taken under full examination conditions with an external examiner present or by a series of tests taken under examination conditions, with an external examiner having the right to attend any of the practical tests and attending some part of the assessment every year. The external examiner is associated with the overall assessment.
49. There is a requirement for achievement of satisfactorily high standards in assessments of both dispensing practice, and pharmacy law and professional requirements, irrespective of the student's performance in other subjects. Compensation of marks for these subjects is not allowed and success in these subjects is either a condition of entry to the final year or, if undertaken in the final year, for the award of the degree.
50. During the final year, the student is required to pass an assessment of knowledge and understanding of any important recent changes in pharmacy law and /or professional requirements.

Standing conditions of accreditation

These conditions apply in all circumstances of degree accreditation:

- i. The provider always seeks approval from the General Pharmaceutical Council (GPhC) for curriculum amendments and always at least informs the GPhC of significant changes to pharmacy undergraduate student numbers or resources for their teaching, learning, support or assessment, including any change from internal to teaching, learning and assessment from outside the school or department.
- ii. The provider produces and submits to the GPhC annually requested data on student numbers, progression, and degree awards.
- iii. The provider produces and submits to the GPhC annually requested information about the extent of human and physical resources it enjoys for the delivery and support of the degree course.
- iv. The provider makes students and potential students aware of the existence and internet address where they can view the GPhC's summary reports of accreditation events.