

The aim of this questionnaire is to find out the views and experiences of your pre-registration training. This forms part of the quality assurance that the Pharmaceutical Society NI undertakes to identify important issues and improve the quality of training for pre-registration trainees. You have the opportunity to make additional commentary in the space provided.

1. Trainee Name

Surname

First Name(s)

*** 2. Trainee Number**

*** 3. The statements below relate to your opinion of your personal experiences as a pre-registration trainee:**

	Stongly Agree	Agree	Niether agree nor disagree	Disagree	Stongly Disagree
I enjoyed my pre-registration year	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I coped well with the training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The pre-registration training year reinforced my choice of Pharmacy as a career	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My workload/working conditions allowed me to make the most of learning opportunities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you have any additional comments with regard to your personal experiences?

* 4. In relation to the structure of pre-registration training, please complete the following:

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
The training allowed me to identify my strengths as a pre-registration trainee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The training enabled me to identify and improve any areas of weakness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The training enabled me to monitor my progress	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The training assisted me to become a competent Pharmacist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you have any additional comments with regard to the structure of the pre-registration training?

* 5. Please indicate your views on the following statements relating to the support available to pre-registration trainees:

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
The Pre-registration Lead was approachable and helpful on any occasion I needed to contact him	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Society's office staff were approachable and helpful on any occasion I needed to make contact	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I found the communication by the Society kept me suitably informed of updates throughout the year	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you have any additional comment with regard to the support for pre-registration trainees

* 6. Please indicate your views on the following statements relating to the appraisal process and final examination:

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Agree
The appraisal process was helpful in identifying my strengths and weaknesses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In general the questions on the Registration Examination were appropriate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you have any additional comments with regard to the in-practice appraisal process and examination process?

* 7. Please indicate how you rate the following statements relating to the E-portfolio:

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Completing the e-portfolio helped me identify and record what I had done	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This approach helped me identify the aspects of training that I had completed and focus on those I still needed to complete	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The e-portfolio was user friendly and easy to navigate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you any additional comments with regard to the E-portfolio (including your thoughts on how the system could be improved)?

* 8. In relation to the compulsory training. Please indicate how you rated the following:

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
The distance learning courses were beneficial in improving my knowledge and understanding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The compulsory training days improved my knowledge and understanding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you have any additional comments with regard to the organisation's compulsory training?

* 9. Premises standards for pre-registration training

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
A comprehensive training programme was available allowing me to fulfil the requirements of the e-portfolio and the examination syllabus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The pharmacy had sufficient staffing levels to allow learning to occur	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
All the recommended reference sources for pre-registration training were available in the pharmacy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
All the relevant staff in the pharmacy had an appropriate awareness of the aims and components of the pre-registration programme	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A suitably qualified tutor was available to supervise my work and when not available satisfactory arrangements were made	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
As recommended by the Pharmaceutical Society approximately 4 hours per week was protected for study/personal development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 10. What type of pharmacy did you complete your pre-registration training in?

- Large Multiple (more than 8) 6 months hospital, 6 months community
- Small Multiple 12 months hospital
- Independent

* 11. On average how many hours did you work in the pharmacy per week excluding breaks

* 12. My first destination when I register is:

Community NI

Hospital GB

Hospital NI

Don't know yet

Community GB

Other, please comment:

* 13. Once registered I will be:

Permanent employment

Locum employment

Returning to academia

No employment secured

Other, please comment

14. Please provide below any additional comments you may have on any aspect of your training. You may want to include aspects that were beneficial to your training or areas that could be improved or added. This will help to improve the quality of pre-registration for future years.