General Pharmaceutical Council

Pharmaceutical Society of Northern Ireland

Protecting Registering Regulating

Standards for the initial education and training of pharmacists

January 2021

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About us

Who we are

We regulate pharmacists, pharmacy technicians and pharmacies in Great Britain.

We work to assure and improve standards of care for people using pharmacy services.

What we do

Our role is to protect the public and give them assurance that they will receive safe and effective care when using pharmacy services.

We set standards for pharmacy professionals and pharmacies to enter and remain on our register.

We ask pharmacy professionals and pharmacies for evidence that they are continuing to meet our standards, and this includes inspecting pharmacies.

We act to protect the public and to uphold public confidence in pharmacy if there are concerns about a pharmacy professional or pharmacy on our register.

Through our work we help to promote professionalism, support continuous improvement and assure the quality and safety of pharmacy.

Introduction

Pharmacists, as experts in medicines, play a vital role in delivering care and helping people to maintain and improve their health, safety and wellbeing.

Patients and the public have a right to expect safe and effective care from pharmacists. We believe it is pharmacists' attitudes and behaviours in their day-to-day work which make the most significant contributions to the quality of care, of which safety is a vital part.

These standards set out the knowledge, skills, understanding and professional behaviours a student/trainee pharmacist must demonstrate to pass their initial education and training and to join the professional register. The standards also set out our requirements for organisations providing initial education and training.

We have developed these standards to produce adaptable pharmacists who will be:

- **confident** about and **capable** of operating in multi-professional teams across a variety of healthcare settings to meet diverse and changing patient needs
- **dedicated to person-centred care**[1], both in person and through remote consultations. They will ensure the high-quality use of medicines that incorporates both safety and effectiveness alongside **compassion** and **empathy**, and
- **proficient prescribers** whose skills can be used to collaborate with and support the wider, complex healthcare systems across Great Britain and Northern Ireland.

Within these standards are the standards for pharmacy professionals, which are the professional standards trainee pharmacists will be expected to meet once they join the register.

Context

The standards for the initial education and training of pharmacists were last published in May 2011. These standards covered the four years of the MPharm degree – there have been separate outcomes for the 52-week pre-registration training year. However, the standards described how it might be possible to combine academic study and pre-registration training in the future.

Since the standards were published, there has been a shift across Great Britain towards integrated health and social care. There has also been a move for patient care to be delivered in the right setting at the right time.

Also, people live longer and they more often have multiple long-term conditions that need to be managed. Every healthcare professional will have a part to play in making sure people remain healthy or are cared for when in poor health.

[1] The standards include the term 'person-centred care' and refer to a 'person' (or 'people') throughout. This means 'the person receiving care'. The term may also apply to carers or patients' representatives, depending on the situation.

We have also seen the publication of ambitious healthcare strategies in Great Britain and Northern Ireland. All of these refer to the role pharmacists and pharmacies can play in bringing about change, and the skills they will need to do this – including prescribing.

Finally, the COVID-19 global pandemic highlighted why these changes were so important and needed to be brought in quickly. We need to make sure future pharmacists will have the necessary skills and knowledge to play a bigger part in delivering care.

As a result, we have created this set of standards. Over the course of the five years, they will develop pharmacists with the desired skills and attributes to deliver safe and effective care at the heart of their communities. Beyond that, this enhanced learning experience will support pharmacists as they begin their lifelong, post-registration learning.

The purpose of these standards

These standards introduce a number of important changes to make sure pharmacists are equipped for their future roles.

These changes include:

- introducing **a new set of learning outcomes that cover the full five years** of education and training, and which can link to their continued development after registration
- incorporating the skills, knowledge and attributes for **prescribing**, to enable pharmacists to independently prescribe from the point of registration
- emphasising **the application of science in clinical practice** and including a greater focus on the key skills needed for current and future roles – including professional judgement, management of risk, and diagnostic and consultation skills
- making the fifth year of initial education and training a **foundation training year** with **strengthened supervision support,** and **collaborative working** between higher education institutions, statutory education bodies and employers
- having a **greater emphasis on equality, diversity and inclusion** to combat discrimination and deal with health inequalities

Accreditation

Our accreditation requirements for education and training programmes are based on the standards and learning outcomes in this document. To be eligible for registration and annotation, Master of Pharmacy (MPharm) degrees and foundation training year programmes must be approved by the GPhC.

The registration assessment

The framework for the GPhC registration assessment is based on the learning outcomes in this document.

For more information on our accreditation of education and training programmes and on our registration assessment, **please see the education section of the main GPhC website**.

The structure of the standards

The standards for the initial education and training of pharmacists are in two parts.

Part 1: Learning outcomes – these describe what a student/trainee pharmacist must be able to demonstrate when they successfully

complete their initial education and training. The learning outcomes are presented in four domains:

- person-centred care and collaboration
- professional practice
- leadership and management
- education and research

Part 2: Standards for all organisations involved – these describe the requirements for anyone providing initial education and training.

The standards for providers are split into two sections, and set out the requirements for the:

- MPharm degree
- foundation training year

All the components for initial education and training must be delivered **collaboratively** by everyone involved.

The four routes to registration as a pharmacist are described in Appendix 1.

Part 1: Learning outcomes

Standard: On successful completion of their initial education and training, the student/trainee pharmacist will have achieved the learning outcomes in these standards to the required level of competence.

Describing and assessing outcomes

The outcome levels in this standard are based on an established competence and assessment hierarchy known as 'Miller's triangle':

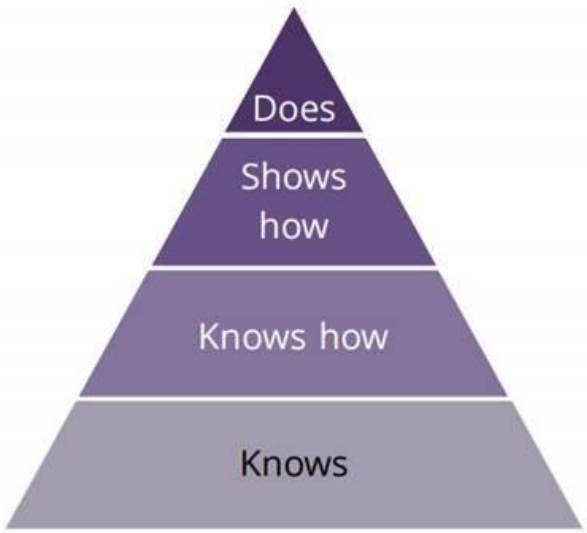

Figure 1: Miller's triangle

Because what is being assessed at each of the four levels is different, the assessment methods needed are different too – although there will be some overlap.

Level 1 – Knows

Has knowledge that may be applied in the future to demonstrate competence. Assessments may include essays, oral examinations and multiple-choice question examinations (MCQs).

Level 2 – Knows how

Knows how to use knowledge and skills. Assessments may include essays, oral examinations, MCQs and laboratory books.

Level 3 – Shows how

Can demonstrate that they can perform in a simulated environment or in real life. Assessments may include objective structured clinical examinations (OSCEs) and other observed assessments; simulated patient assessments; designing, carrying out and reporting an experiment; dispensing tests and taking a patient history.

Level 4 – Does

Can act independently and consistently in a complex but defined situation. Evidence for this level is provided when a student pharmacist demonstrates the learning outcomes in a complex, familiar or everyday situation repeatedly and reliably. Assessments may include OSCEs or other observed assessments.

Expectations for the level of the learning outcomes

Student/trainee pharmacists' skills, knowledge, understanding and professional behaviours will progress throughout their initial education and training. As they go through their MPharm degree they will be expected to demonstrate the learning outcomes to a greater depth, breadth and degree of complexity. The foundation training year will further expose student/trainee pharmacists to new situations and environments. This will give them opportunities to build upon their knowledge and skills and demonstrate these with patients in clinical settings.

The level 'Does', in Miller's triangle, will apply to both year 4 and year 5. 'Does' for year 4 will be for the academic context and 'Does' for year 5 will be for the practice context.

Level of study

The level of study for initial education and training is master's degree level, as defined in UK national qualifications frameworks.

Domains of study

The learning outcomes are presented in four domains:

- person-centred care and collaboration
- professional practice
- leadership and management
- education and research

The domains and learning outcomes are all of equal importance.

To achieve them, curricula, teaching and learning strategies, and programmes and training plans to deliver these learning outcomes will:

- apply the science behind pharmacy throughout all learning
- focus on the role of the pharmacist as a healthcare professional – using their comprehensive expertise of medicines, and building on their strong grounding in science – to deliver high-quality, person-centred care
- provide experiential learning and inter-professional learning, with students from other health and care professions, and provide experience in different pharmacy settings
- provide opportunities to engage with people and other health and care professionals
- build the requirement of patient and public safety into all aspects of the design and delivery of initial education and training
- deliver learning to highlight the skills and attributes associated with being a prescriber. These will be woven through the first four years, strengthening the student's knowledge and preparing them for practice
- provide a period of learning in practice specifically related to prescribing – during the foundation training year – of at least 90 hours of supervised practice. This will consolidate students' learning and allow them to achieve independent prescribing

annotation once they have completed their foundation training year, passed the registration assessment and registered with the GPhC. This is consistent with the independent prescribing standards for registered pharmacists

Prescribing

The skills and attributes required by a prescriber are part of the learning outcomes in all four domains[2].

For example, learning outcome 28 'Demonstrate effective diagnostic skills to decide the most appropriate course of action for the person' applies both to pharmacists' day-to-day practice and when they prescribe.

During the foundation training year, trainee pharmacists will be expected to demonstrate the learning outcomes specifically related to prescribing practice. This applies particularly to the period of learning in practice relating to prescribing. They will also be expected to build on their knowledge and skills so they are able to demonstrate the prescribing-focused outcomes at a higher level of competence.

Scientific knowledge

Learning outcome 21 says that trainee pharmacists, at the point of registration, are expected to apply the science behind pharmacy in all their professional activities.

We consider the science behind pharmacy to include:

- the relevant basic chemical, biological, physical and mathematical (including statistical) sciences to allow pharmacists to use this knowledge base to build their understanding of pharmaceutical activities, systems and practices
- the additional sciences of anatomy, physiology and pharmacology to allow pharmacists to understand how the body works; and the mechanisms by which drugs interact with it, their distribution and metabolism, and the mechanisms responsible for the risks associated with their use
- the science behind the design, synthesis, formulation, administration and prescribing of drugs, medicines and devices
- the science of epidemiology – to allow pharmacists to understand the role it plays in both preventing illness and managing patients in whom disease has already developed
- the understanding of genomics and how it is applied to drug development as well as patient care in practice
- the relevant social sciences associated with the development and administration of medicines, including an appreciation of the psychological, behavioural and economic aspects of medicines use

[2] The learning outcomes take into account the Royal Pharmaceutical Society (RPS) ***Prescribing Competency Framework***

Domain: Person-centred care and collaboration

If they are to pass, students/trainees must be able to demonstrate the following at the end of each element of their initial education and training:

Table 1: Learning outcomes for person-centred care and collaboration

Learning outcome	MPharm degree	Foundation training year
1. Demonstrate empathy and keep the person at the centre of their approach to care at all times	**Does**	**Does**
2. Work in partnership with people to support and empower them in shared decision-making about their health and wellbeing	**Shows how**	**Does**
3. Demonstrate effective communication at all times and adapt their approach and communication style to meet the needs of the person	**Does**	**Does**
4. Understand the variety of settings and adapt their communication accordingly	**Shows how**	**Does**
5. Proactively support people to make safe and effective use of their medicines and devices	**Shows how**	**Does**
6. Treat people as equals, with dignity and respect, and meet their own legal responsibilities under equality and human rights legislation, while respecting diversity and cultural differences	**Does**	**Does**
7. Obtain informed consent before providing care and pharmacy services	**Does**	**Does**
8. Assess and respond to the person's particular health risks, taking account of individuals' protected characteristics and background	**Shows how**	**Does**
9. Take responsibility for ensuring that personal values and beliefs do not compromise person-centred care	**Does**	**Does**
10. Demonstrate effective consultation skills, and in partnership with the person, decide the most appropriate course of action	**Does**	**Does**
11. Take into consideration factors that affect people's behaviours in relation to health and wellbeing	**Shows how**	**Does**

Learning outcome	MPharm degree	Foundation training year
12. Take an all-inclusive approach to ensure the most appropriate course of action based on clinical, legal and professional considerations	**Shows how**	**Does**
13. Recognise the psychological, physiological and physical impact of prescribing decisions on people	**Shows how**	**Does**
14. Work collaboratively and effectively with other members of the multi-disciplinary team to ensure high-quality, person-centred care, including continuity of care	**Shows how**	**Does**

Domain: Professional practice

If they are to pass, students/trainees must be able to demonstrate the following at the end of each element of their initial education and training:

Table 2: Learning outcomes for professional practice

Learning outcome	MPharm degree	Foundation training year
15. Demonstrate the values, attitudes and behaviours expected of a pharmacy professional at all times	**Does**	**Does**
16. Apply professional judgement in all circumstances, taking legal and ethical reasoning into account	**Does**	**Does**
17. Recognise and work within the limits of their knowledge and skills, and get support and refer to others when they need to	**Does**	**Does**
18. Take responsibility for all aspects of pharmacy services, and make sure that the care and services provided are safe and accurate	**Does**	**Does**
19. Take responsibility for all aspects of health and safety and take actions when necessary	**Does**	**Does**
20. Act openly and honestly when things go wrong and raise concerns even when it is not easy to do so	**Does**	**Does**
21. Apply the science behind pharmacy in all activities	**Does**	**Does**

Learning outcome	MPharm degree	Foundation training year
22. Demonstrate how the science behind pharmacy is applied in the discovery, design, development and safety testing of medicines and devices	**Shows how**	**Knows how**
23. Recognise the technologies that are behind developing advanced therapeutic medicinal products and precision medicines, including the formulation, supply and quality assurance of these therapeutic agents	**Shows how**	**Does**
24. Keep abreast of new technologies and use data and digital technologies to improve clinical outcomes and patient safety, keeping to information governance principles	**Shows how**	**Does**
25. Apply pharmaceutical principles to the safe and effective formulation, preparation, packaging and disposal of medicines and products	**Knows how**	**Shows how**
26. Consider the quality, safety and risks associated with medicines and products and take appropriate action when producing, supplying and prescribing them	**Knows how**	**Shows how**
27. Take responsibility for the legal, safe and efficient supply, prescribing and administration of medicines and devices	**Shows how**	**Does**
28. Demonstrate effective diagnostic skills, including physical examination, to decide the most appropriate course of action for the person	**Shows how**	**Does**
29. Apply the principles of clinical therapeutics, pharmacology and genomics to make effective use of medicines for people, including in their prescribing practice	**Shows how**	**Does**
30. Appraise the evidence base and apply clinical reasoning and professional judgement to make safe and logical decisions which minimise risk and optimise outcomes for the person	**Shows how**	**Does**
31. Critically evaluate and use national guidelines and clinical evidence to support safe, rational and cost-effective procurement for the use, and prescribing of, medicines, devices and services	**Shows how**	**Does**
32. Accurately perform calculations	**Does**	**Does**

Learning outcome	MPharm degree	Foundation training year
33. Effectively promote healthy lifestyles using evidence-based techniques	**Shows how**	**Does**
34. Apply the principles of effective monitoring and management to improve health outcomes	**Shows how**	**Does**
35. Anticipate and recognise adverse drug reactions, and recognise the need to apply the principles of pharmacovigilance[3]	**Does**	**Does**
36. Apply relevant legislation and ethical decision-making related to prescribing, including remote prescribing	**Shows how**	**Does**
37. Prescribe effectively within the relevant systems and frameworks for medicines use	**Shows how**	**Does**
38. Understand clinical governance in relation to prescribing, while also considering that the prescriber may be in a position to supply the prescribed medicines to people	**Shows how**	**Does**
39. Take responsibility for people's health records, including the legality, appropriateness, accuracy, security and confidentiality of personal data	**Shows how**	**Does**
40. Understand and implement relevant safeguarding procedures, including local and national guidance in relation to each person	**Shows how**	**Does**
41. Effectively make use of local and national health and social care policies to improve health outcomes and public health, and to address health inequalities	**Shows how**	**Does**
42. Proactively participate in the promotion and protection of public health in their practice	**Shows how**	**Does**
43. Identify misuse of medicines and implement effective strategies to deal with this	**Shows how**	**Does**
44. Respond appropriately to medical emergencies, including the provision of first aid	**Knows how**	**Shows how**

[3] Monitoring the effects of medicines after they have been licensed for use, especially to identify previously unreported adverse reactions.

Domain: Leadership and management

If they are to pass, students/trainees must be able to demonstrate the following at the end of each element of their initial education and training:

Table 3: Learning outcomes for leadership and management

Learning outcome	MPharm degree	Foundation training year
45. Demonstrate effective leadership and management skills as part of the multi-disciplinary team	**Shows how**	**Does**
46. Make use of the skills and knowledge of other members of the multi-disciplinary team to manage resources and priorities	**Shows how**	**Does**
47. Develop, lead and apply effective strategies to improve the quality of care and safe use of medicines	**Knows how**	**Does**
48. Actively take part in the management of risks and consider the impacts on people	**Shows how**	**Does**
49. Use tools and techniques to avoid medication errors associated with prescribing, supply and administration	**Shows how**	**Does**
50. Take appropriate actions to respond to complaints, incidents or errors in a timely manner and to prevent them happening again	**Shows how**	**Does**
51. Recognise when and how their performance or that of others could put people at risk and take appropriate actions	**Shows how**	**Does**
52. Demonstrate resilience and flexibility, and apply effective strategies to manage multiple priorities, uncertainty, complexity and change	**Shows how**	**Does**

Domain: education and research

If they are to pass, students/trainees must be able to demonstrate the following at the end of each element of their initial education and training:

Table 4: Learning outcomes for education and research

Learning outcome	MPharm degree	Foundation training year
53. Reflect upon, identify, and proactively address their learning needs	**Does**	**Does**
54. Support the learning and development of others, including through mentoring	**Shows how**	**Does**
55. Take part in research activities, audit, service evaluation and quality improvement, and demonstrate how these are used to improve care and services	**Shows how**	**Does**

Part 2: Standards for the initial education and training of pharmacists

Part 2 is made up of the standards for organisations providing initial education and training, and the criteria that are linked to them.

As a general principle, the standards and criteria apply to all organisations and environments that contribute to the delivery of the initial education and training of pharmacists. However, the emphasis placed on a standard or criterion will vary depending on the role played by the organisation. Everyone involved must therefore work together to deliver the standard. Organisations providing or managing any aspect of initial education and training must meet the relevant standards for all the activities they carry out[4].

Part 2 is split into two sections:

- the requirements for the MPharm degree
- the requirements for the foundation training year

MPharm degree

Introduction

MPharm degrees will be delivered mainly by higher-education institutions, but there will require collaboration with others including, for example, statutory education bodies. The precise nature of the collaboration will be decided between these organisations in consultation with the GPhC.

The undergraduate degree is best placed to highlight the skills and attributes associated with being a prescriber. These will be incorporated through the four years in preparation for the foundation training year.

After they successfully graduate, students will then have their foundation training year. This will include a period of supervised practice specifically relating to prescribing (unless students have opted to participate in a 5-year MPharm with integrated training).

[4] As well as meeting these standards, universities must meet the Quality Assurance Agency for Higher Education's ***UK Quality Code for Higher Education*** (2018).

Standard 1: Selection and admission

Students must be selected for and admitted onto MPharm degrees on the basis that they are being prepared to practise as a pharmacist

Criteria to meet this standard

1.1 The principles of equality, diversity and fairness must be built into selection processes. Selection processes must give all applicants an opportunity to demonstrate their ability and suitability, taking into account their background (such as protected characteristics and socio-economic and education background).

1.2 Higher-education institutions must actively aim to identify and reduce discrimination in selection and admission processes. As a minimum, every year, the MPharm degree admissions profile must be analysed by protected characteristics, as defined in the Equality Act 2010. Documented action must be taken if that analysis shows that the admissions process may be disadvantaging students.

1.3 Accurate admissions information must be provided to potential applicants.

1.4 Selection processes must give applicants the guidance they need to make an informed application.

1.5 Selection criteria must be explicit. They must include:

a meeting academic entry requirements

b meeting professional entry requirements – that is, suitability to practise as a pharmacist[5]

c meeting numeracy requirements

d meeting English language requirements appropriate to Master's level study and for professional registration. Guidelines issued by English language testing bodies should be followed to make sure that admissions language requirements are appropriate

e taking account of good-character checks

f taking account of health checks

g recognising prior learning, where that is appropriate

h taking an applicant's socio-economic and education background into account

1.6 Admissions criteria should take account of the admissions requirements for periods of learning in practice. These will include those overseen by statutory education bodies such as NHS Education for Scotland (NES), NHS England, Health Education and Improvement Wales (HEIW) and the Northern Ireland Centre for Pharmacy Learning and Development (NICPLD).

1.7 All admissions and selection processes must include an interactive component, to

[5] As set out in ***Standards for pharmacy professionals,*** *(2017)*

assess applicants' values and professional suitability. Having a robust application process including interactivity applies also to Clearing and Adjustment applications.

1.8 When higher-education institutions accept applicants who do not meet the academic entry requirements, they must set out clearly the criteria used for making the decision. This includes complying with the institution's policy on contextual offers.

1.9 Unconditional offers, where students have been accepted onto a programme without having met the entry requirements, are not permitted[6].

Standard 2: Equality, diversity and fairness

MPharm degrees must be based on, and promote, the principles of equality, diversity and fairness; meet all relevant legal requirements; and be delivered in such a way that the diverse needs of all students are met

Criteria to meet this standard

2.1 Systems and policies must promote the principles and legal requirements of equality, diversity and fairness.

2.2 Systems and policies must be in place to allow everyone involved to understand the diversity of the student body and the implications that has for delivery.

2.3 Systems and policies must be in place to allow everyone involved to understand the diversity of the students' circumstances and experiences and the implications that has for student support and development.

2.4 Every year, there must be a review of student performance broken down by protected characteristics, as defined in relevant equality and human rights legislation. Documented action must be taken to address differences when they are found.

2.5 Everyone involved must be trained to apply the principles and legal

[6] The prohibition of unconditional offers excludes postponed entry on an MPharm degree because of a gap year or similar (if grades have been met already) or Scottish unconditional offers made after the attainment of the desired grades.

requirements of equality, diversity and fairness in their role.

2.6 MPharm degree design and delivery must ensure student pharmacists understand their legal responsibilities under equality and human rights legislation and proactively seek to learn about and understand communities and cultures.

Standard 3: Resources and capacity

Resources and capacity must be sufficient to deliver the learning outcomes in these standards

Criteria to meet this standard

3.1 There must be robust and transparent systems for securing an appropriate level of resource to deliver a sustainable MPharm degree that meets the requirement of these standards.

3.2 The staff complement must be appropriate for the delivery of all parts of the MPharm degree.

3.3 MPharm degrees must be delivered in premises that are fit for purpose.

Standard 4: Managing, developing and evaluating MPharm degrees

The quality of the MPharm degree must be managed, developed and evaluated in a systematic way

Criteria to meet this standard

4.1 There must be systems and policies in place to manage the delivery of the MPharm degree, including the periods of experiential and inter-professional learning.

4.2 There must be agreements in place between everyone involved that specify the management, responsibilities and lines of accountability of each organisation, including those that contribute to periods of experiential and inter-professional learning.

4.3 The views of a range of stakeholders – including patients, the public and supervisors – must be taken into account when designing and delivering MPharm degrees.

4.4 Feedback from student pharmacists must be built into the monitoring, review and evaluation processes.

4.5 Systems and policies must be used in such a way that the MPharm degree is evaluated on the basis of evidence and that there is continuous improvement in its delivery.

4.6 MPharm degrees must be revised when there are significant changes in practice, to make sure provision is relevant and current.

Standard 5: Curriculum design and delivery

The MPharm degree curriculum must use a coherent teaching and learning strategy to develop the required skills, knowledge, understanding and professional behaviours to meet the outcomes in part 1 of these standards. The design and delivery of MPharm degrees must ensure that student pharmacists practise safely and effectively.

Criteria to meet this standard

5.1 There must be a curriculum and a teaching and learning strategy for the MPharm degree, which set out how student pharmacists will achieve the learning outcomes in part 1.

5.2 The component parts of the MPharm degree must be linked in a coherent way. This must be progressive with increasing complexity until the appropriate level is reached.

5.3 Everyone involved must work together to deliver the MPharm degree.

5.4 The learning outcomes must be delivered in an environment which places study in a professional and academic context and requires students to conduct themselves professionally.

5.5 An MPharm degree must be delivered in an environment that uses research to support learning and teaching.

5.6 The MPharm degree curriculum must include practical experience of working

with patients, carers and other healthcare professionals. Student pharmacists must be exposed to an appropriate breadth of patients and people in a range of environments (real-life and simulated) to enable them to develop the skills and the level of competency to achieve the relevant learning outcomes in part 1 of these standards. This experience should be progressive, increase in complexity and take account of best practice.

5.7 During the MPharm degree, there must be an inter-professional learning plan. Student pharmacists must engage with inter-professional education (IPE) through a progressive strategy based on **the Centre for the Advancement of Interprofessional Education's *Interprofessional Education Guidelines*** (CAIPE, 2017). IPE must mirror practice and must focus on interaction with other health and social care professionals. Engagement with students from other health and care professions must begin at an early stage, progressing to more complex interactions to enable students to develop the skills and level of competency they need to achieve the relevant learning outcomes in part 1 of these standards.

5.8 Academic regulations must be appropriate for a degree that is both academic and professional and may lead to further professional training. As a general principle, all assessments must be passed. This means that condonation[7], compensation[8], trailing[9], extended re-sit opportunities and other remedial measures should be extremely limited and justifiable, if they are permitted at all. Academic regulations may be more stringent than for other programmes. This may include higher-than-usual pass marks for assessments that demonstrate the knowledge and skills essential to safe and effective pharmacy practice.

5.9 Higher-education institutions must have procedures to deal with concerns – including fitness to practise procedures – and must tell the GPhC about any hearing outcomes (apart from warnings or when no action was taken) imposed on students.

5.10 Student pharmacists must not receive an accredited MPharm degree if there are any outstanding student fitness to practise concerns about them.

5.11 In the event of programme closure or withdrawal, higher-education institutions must have a documented process in place

[7] When a 'pass' is awarded even though the standard for a pass has not been reached, usually when the margin of failure is small.
[8] Allowing failure by a small margin in a limited number of assessments on the basis of a satisfactory overall performance.
[9] Being able to start the next year of study when one or more assessments from the previous year have not yet been passed.

to manage the programme closure or withdrawal.

5.12 Higher-education institutions must be open with the GPhC about matters affecting an accredited MPharm degree. Under the Pharmacy Order 2010 schools of pharmacy must assist the GPhC in its work by providing information upon request.

5.13 Higher-education institutions must raise relevant issues proactively with the GPhC.

Standard 6: Assessment

Higher-education institutions must demonstrate that they have a coherent assessment strategy which assesses the required skills, knowledge, understanding and behaviours to meet the learning outcomes in part 1 of these standards. The assessment strategy must assess whether a student pharmacist's practice is safe

Criteria to meet this standard

6.1 There must be an assessment plan for the MPharm degree.

6.2 Higher-education institutions must demonstrate that their assessment plan:

- a is coherent
- b is fit for purpose, and
- c makes sure that assessment is robust, valid and reliable, and includes diagnostic, formative and summative assessment

6.3 Assessment plans for the MPharm degree must assess the outcomes in part 1 of these standards. The methods of assessment used must be:

- a appropriate to the learning outcomes
- b in line with current and best practice, and
- c routinely monitored, quality assured and developed

6.4 Assessment must be fair and carried out against clear criteria. The standard expected of students in each area to be assessed must be clear; and students and

everyone involved in assessment must be aware of this standard. An appropriate standard-setting process must be used for summative assessments done during the MPharm degree.

6.5 Patient safety must always come first, and higher-education institutions must assess whether a student pharmacist is practising safely.

6.6 Pass criteria for all assessments must reflect safe and effective practice.

6.7 It must be clear what standard-setting methods are used during the MPharm degree.

6.8 Higher-education institutions must have in place effective management systems to plan, monitor and record the assessment of students. These must include the monitoring of experiential and inter-professional learning, during the MPharm degree, against each of the learning outcomes.

6.9 Higher-education institutions must support students to improve their performance by providing regular and timely feedback and by encouraging students to reflect on their practice.

6.10 Assessment must make use of feedback collected from a variety of sources, which should include other members of the pharmacy team, peers, patients, and supervisors.

6.11 Examiners and assessors must have the appropriate skills, experience and training to carry out the task of assessment.

6.12 Higher-education institutions must ask external examiners to report every year on the extent to which assessment processes:

a are rigorous

b are set at the correct standard

c ensure equity of treatment for students, and

d have been fairly conducted

6.13 The responsibilities of the external examiners must be clearly documented.

6.14 Assessment regulations must be appropriate for MPharm degrees that lead to professional registration. That is, they must prioritise professionalism, patient safety, and safe and effective practice.

Standard 7: Support and development for student pharmacists and everyone involved in the delivery of the MPharm degree

Student pharmacists must be supported in all learning and training environments to develop as learners and professionals during their MPharm degrees

Everyone involved in the delivery of the MPharm degree should be supported to develop in their professional role

Criteria for meeting this standard

Support for student pharmacists

7.1 There must be a range of systems in place during the MPharm degree to identify the support needed by students, and to support them to achieve the outcomes in part 1 of these standards. They must be based on a student's prior achievement and be tailored to them. Systems must include:

- a induction
- b effective supervision
- c an appropriate and realistic workload
- d personal, study skills and academic support
- e time to learn
- f access to resources, and
- g remediation, if needed

7.2 Student pharmacists must have support available to them covering academic, general welfare and career advice.

7.3 Student pharmacists must have access to pharmacy professionals who are able to act as role models and mentors, giving professional support and guidance.

7.4 There must be clear procedures for student pharmacists to raise concerns. Any concerns must be dealt with promptly, with documented action taken where appropriate.

Support for everyone involved in the delivery of the MPharm degree

7.5 There must be a range of systems in place to support everyone involved in the delivery of the MPharm degree to develop in their professional role.

7.6 Training must be provided for everyone involved in the delivery of the MPharm degree.

7.7 Everyone involved in the delivery of the MPharm degree must have:

- a effective supervision
- b an appropriate and realistic workload
- c mentoring
- d time to learn
- e continuing professional development opportunities, and
- f peer support

7.8 There must be clear procedures for everyone involved to raise concerns. Any concerns must be dealt with promptly, with documented action taken where appropriate. Serious concerns about the programme and the impact on students must be actively raised with the GPhC.

Foundation training year

Introduction

The foundation training year takes place after students graduate with their MPharm degree (unless they have opted to participate in a 5-year MPharm with integrated training). It consolidates their initial learning and education.

It offers on-the-job, practical training in a clinical setting or settings. The training enables trainees to build upon their pharmacy knowledge, understanding, skills and behaviours, and previous experience, and apply them to enhance their knowledge and skills in preparation for registration.

During this year trainees will complete at least 90 hours of supervised practice specifically related to prescribing.

This is to strengthen their competence and allow them to achieve their independent prescriber annotation when they register.

Foundation training will be delivered by the statutory education bodies, employers and higher-education institutions, all working together. The precise nature of this collaboration will be decided between these organisations and will be approved by the GPhC.

The statutory education bodies will be responsible for foundation trainees in their respective jurisdictions. The table below sets out the respective responsibilities for quality assurance, quality management and quality control.

Table 5: Responsibilities for quality assurance, quality management and quality control

Organisation or group	Responsibility	Achieved by	Activity
GPhC	Quality assurance	Setting and quality assuring the standards	Setting standards and quality assuring the management of education
Statutory education bodies and their partners	Quality management	Overseeing the delivery of the foundation year	Designing, managing and monitoring the foundation year
Employers, designated supervisors and dedicated prescribing partners	Quality control	Day-to-day delivery of the foundation year	Supervising, mentoring and proving feedback to trainees

Standard 1: Selection and admission

Trainees must be selected for and admitted onto the foundation training year on the basis that they are being prepared to practise as a pharmacist

Criteria to meet this standard

1.1 The principles of equality, diversity and fairness must be built into selection processes. Selection processes must be fair and give all applicants an opportunity to demonstrate their ability and suitability to be a trainee pharmacist.

1.2 Everyone involved must actively aim to identify and reduce discrimination in selection and admission processes. As a minimum, every year, the admissions profile must be analysed by protected characteristics, as defined in the Equality Act 2010. Documented action must be taken if that analysis shows that the admissions process may be disadvantaging trainees.

1.3 Selection processes must give applicants the guidance they need to make an informed application.

1.4 Selection criteria must be explicit. They must include:

a having graduated with an MPharm degree, or having successfully completed all the required elements of a 5-year MPharm degree with the integrated foundation training year to allow them to start training

b meeting professional entry requirements – that is, suitability to practise as a pharmacist[10]

c taking account of the sector or sectors they need and want to gain experience in to achieve the learning outcomes

[10] ***Standards for pharmacy professionals,* 2017**

Standard 2: Equality, diversity and fairness

The foundation training year must be based on, and promote, the principles of equality, diversity and fairness; meet all relevant legal requirements; and be delivered in such a way that the diverse needs of all trainees are met

Criteria to meet this standard

2.1 Systems and policies must promote the principles and legal requirements of equality, diversity and fairness.

2.2 Systems and policies must be in place to allow everyone involved to understand the diversity of the trainee body and the implications that has for delivery.

2.3 Systems and policies must be in place to allow everyone involved to understand the diversity of the trainees' circumstances and experiences and the implications that has for trainee support and development.

2.4 Every year, there must be a review of trainee performance broken down by protected characteristics, as defined in relevant equality and human rights legislation. Documented action must be taken to address differences where they are found.

2.5 Everyone involved must be trained to apply the principles and legal requirements of equality, diversity and fairness in their role.

2.6 Programme design and delivery must ensure trainee pharmacists understand their legal responsibilities under equality and human rights legislation and proactively seek to learn about and understand communities and cultures.

Standard 3: Resources and capacity

Resources and capacity must be sufficient to deliver the learning outcomes in these standards

Criteria to meet this standard

3.1 There must be robust and transparent systems for securing an appropriate level of resource to deliver a sustainable foundation training year that meets the requirement of these standards.

3.2 The staff complement must be appropriate for the delivery of all parts of the foundation training year.

3.3 The foundation training year must be delivered in premises which are fit for purpose.

Standard 4: Managing, developing and evaluating foundation training programmes

The quality of the foundation year must be managed, developed and evaluated in a systematic way

Criteria to meet this standard

4.1 There must be systems and policies in place to manage the delivery of the foundation training year in all training environments.

4.2 There must be agreements in place between everyone involved that specify the management, responsibilities and lines of accountability of each organisation.

4.3 The views of a range of stakeholders – including patients, the public and employers – must be taken into account when designing and delivering the foundation training year.

4.4 Feedback from trainee pharmacists must be built into the monitoring, review and evaluation processes.

4.5 Systems and policies must be used in such a way that the foundation training year is evaluated based on evidence and that there is continuous improvement in its delivery.

4.6 The foundation training year must be revised when there are significant changes in practice, to make sure provision is relevant and current.

Standard 5: Foundation year design and delivery

The programmes for the foundation training year must develop the required skills, knowledge, understanding and professional behaviours to meet the outcomes in part 1 of these standards by using a coherent training strategy. The design and delivery of the foundation training year must ensure that trainee pharmacists practise safely and effectively

Criteria to meet this standard

5.1 There must be a training plan (or plans) for the foundation training year, which sets out how trainee pharmacists will achieve the learning outcomes in part 1.

5.2 The learning outcomes must be delivered in an environment which places training in a professional context and requires trainees to conduct themselves professionally.

5.3 Trainee pharmacists must be exposed to an appropriate breadth of patients and people in a range of environments. This experience should be progressive, increase in complexity and take account of best practice.

5.4 Everyone involved must work together to deliver the foundation training year.

5.5 There must be systems in place for everyone involved to communicate regularly on the progress of trainees.

5.6 Trainees must pass all assessments and be declared competent before being signed off.

5.7 Everyone involved must have procedures to deal with concerns – including fitness to practise procedures – and must tell the GPhC about any hearing outcomes (apart from warnings or when no action was taken) imposed on trainees.

5.8 Trainee pharmacists must not be signed off if there are any outstanding trainee fitness to practise concerns about them.

5.9 Everyone involved must be open with the GPhC about matters affecting the foundation training year. Under the Pharmacy Order 2010 they must assist the GPhC in its work by providing information upon request.

5.10 Everyone involved must raise relevant issues proactively with the GPhC.

Standard 6: Assessment

Everyone involved must demonstrate that they have a coherent assessment strategy which assesses the required skills, knowledge, understanding and behaviours to meet the learning outcomes in part 1 of these standards. The assessment strategy must assess whether a trainee pharmacist's practice is safe

Criteria to meet this standard

6.1 There must be an assessment plan for the foundation training year that leads to professional registration.

6.2 Agreements must be in place between everyone involved that describe the roles and responsibilities in the assessment of trainees.

6.3 Everyone involved must demonstrate that their assessment plan:

- a is coherent
- b is fit for purpose, and
- c ensures that assessment is robust, valid and reliable, and includes diagnostic, formative and summative assessment

6.4 Assessment plans for the foundation training year must assess the outcomes in part 1 of these standards. The methods of assessment used must:

- a be appropriate to the learning outcomes
- b be in line with current and best practice
- c be routinely monitored, quality assured and developed
- d deliver consistency across all trainees, regardless of their experience to date
- e consider the trainee's evidence portfolio demonstrating their competence and how they meet the learning outcomes

6.5 Assessment must be fair and carried out against clear criteria. The standard expected of trainees in each area to be assessed must be clear; and trainees and everyone involved in assessment must be aware of this standard.

6.6 Patient safety must come first at all times and everyone involved must assess whether a trainee pharmacist is practising safely.

6.7 Pass criteria for all assessments must reflect safe and effective practice.

6.8 Everyone involved must have effective management systems in place to plan, monitor and record the assessment of trainees.

6.9 Everyone involved must support trainees to improve their performance by providing regular and timely feedback and by encouraging trainees to reflect on their practice.

6.10 Assessment must make use of feedback collected from a variety of sources, which should include other members of the pharmacy team, peers and patients.

6.11 Everyone involved must have the appropriate skills, experience and training to carry out the task of assessment.

Standard 7: Support and development for trainee pharmacists and everyone involved in the delivery of the foundation training year

Trainee pharmacists must be supported in all learning and training environments to develop as learners and professionals during their initial education and training

Everyone involved in the delivery of the foundation training year should be supported to develop in their professional role

Criteria for meeting this standard

Support for trainee pharmacists

7.1 There must be a range of systems in place during the foundation training year to identify the support needed by trainees and to support them to achieve the outcomes in part 1 of these standards. They must be based on a trainee's prior achievement and be tailored to them. Systems must include:

- a induction
- b effective supervision
- c an appropriate and realistic workload
- d personal support
- e time to learn
- f access to resources, and
- g remediation, if necessary

7.2 Trainee pharmacists must have support available to them covering general welfare.

7.3 Trainee pharmacists must have access to pharmacy professionals who are able to act as role models and mentors, giving professional support and guidance.

7.4 There must be clear procedures for trainee pharmacists to raise concerns. Any concerns must be dealt with promptly, with documented action taken where appropriate.

Support for everyone involved in the delivery of the foundation training year

7.5 There must be a range of systems in place to support everyone involved in the delivery of the foundation training year to develop in their professional role.

7.6 Training must be provided for everyone involved in the delivery of the foundation training year.

7.7 Everyone involved in the delivery of the foundation training year must have:

- a effective supervision
- b an appropriate and realistic workload
- c mentoring
- d time to learn
- e continuing professional development opportunities, and
- f peer support

7.8 There must be clear procedures for everyone involved to raise concerns. Any concerns must be dealt with promptly, with documented action taken where appropriate. Serious concerns about the programme and the impact on trainees must be actively raised with the GPhC.

Standard 8: The foundation training year

The foundation training year must focus on the professional practice of pharmacists and must contribute to the delivery of the learning outcomes

Criteria to meet this standard

8.1 There must be 52 weeks of practical training designated as 'the foundation training year'. During these, trainees must complete at least 90 hours of supervised practice directly related to independent prescribing (period of learning in practice).

8.2 Everyone involved must work together to define the delivery and quality assurance of the foundation training year.

8.3 Training may take place in one or more sectors of practice.

8.4 Trainee pharmacists must follow a training plan or plans during periods of the foundation training year. This must have a clear purpose to enable trainees to meet the learning outcomes in part 1 of these standards.

Standard 9: The foundation training year supervision

Trainee pharmacists must be supervised by a designated supervisor and a designated prescribing practitioner during the foundation training year to help them meet the learning outcomes

Criteria to meet this standard[11]

9.1 There must be agreed systems, used by everyone involved, for co-ordinating trainees' supervision, overseeing their progress and signing them off as being fit to practise at the end of the final period of the foundation training year.

9.2 Trainee pharmacists must have a designated supervisor, who, working with everyone involved, is responsible for co-ordinating their supervision, overseeing their progress and signing them off. The designated supervisor must be a pharmacist.

9.3 During the period of learning in practice specifically relating to prescribing, the trainee must be supervised by a designated prescribing practitioner[12].

9.4 Trainee pharmacists may be supervised by a range of healthcare professionals, other than their designated supervisor and designated prescribing practitioner, in a variety of settings. There must be agreed appropriate training and experience in line with the independent prescribing standards for registered pharmacists.

[11] The designated supervisor and the designated prescribing practitioner referred to in the standard can be the same person.

[12] Designated prescribing practitioners must be fit to carry out that role and must have

systems for supervision in place in all practice environments to make sure safe, person-centred care is delivered at all times.

9.5 All supervisors must be trained and appropriately experienced to act as supervisors. Everyone supporting trainees must take into account the GPhC's guidance. People carrying out assessments of the foundation training year or being involved in trainees' sign-off must be appropriately trained, qualified and competent to assess the competence of trainee pharmacists.

9.6 The designated supervisor and the designated prescribing practitioner, or their delegates, must have regular developmental and documented meetings with a trainee pharmacist during the foundation training year.

9.7 During the period of learning in practice, trainees must only carry out tasks at which they are competent, or are learning under supervision to be competent, so that patient safety is not compromised.

9.8 If there are concerns that a trainee pharmacist may be failing to meet the learning outcomes for the foundation training year, an action plan must be put in place.

9.9 Sign-off confirms that a trainee has achieved all the learning outcomes in part 1 of these standards. The decision to sign off a trainee must be made by more than one person and be based on evidence. As a minimum, if they are not the same person, the designated supervisor and the designated prescribing practitioner must both be involved in the decision to sign off a trainee. The designated prescribing practitioner must provide a formal confirmation once they are satisfied of the trainee's competence in prescribing. Other healthcare professionals involved in co-ordinating trainees' supervision, overseeing their progress, or in supervising them can be involved in signing them off. Agreed mechanisms for sign-off must be defined, including the roles and competences of those involved.

Glossary

Table 6: glossary

Term	Definition
Accreditation	The processes by which an MPharm degree is reviewed for quality assurance purposes to make sure that the course of education or training meets the relevant GPhC standards, accreditation criteria and training policies.
Applicant	A person applying to enrol onto an MPharm degree or a foundation training year.
Compensation	Allowing failure by a small margin in a limited number of assessments on the basis of a satisfactory overall performance.
Condonation	When a 'pass' is awarded even though the standard for a pass has not been reached, usually when the margin of failure is small.
Designated supervisor	The designated supervisor is responsible for having oversight of the trainee's training and for signing off the trainee's competence at the end of the foundation training year. They should be a source of advice and guidance, and will work with practice partners to support the trainee in meeting the learning outcomes in these standards.
Designated prescribing practitioner	A healthcare professional with an annotation or automatic right to prescribe – for example a medical practitioner, pharmacist, nurse, physiotherapist or paramedic – who will mentor and supervise the pharmacist during the foundation training year. The designated prescribing practitioner will provide a formal confirmation once they are satisfied of the trainee's competence in prescribing.
Employer	A person or an organisation who directly employs the trainee.
Examiner	An individual who has a formal role in the course in evaluating the knowledge or competence of a student.
Experiential learning	During the MPharm degree, a period of practical experience of working with patients, carers and other healthcare professionals taking place in a range of environments (real-life and simulated).

Term	Definition
Foundation training year	The period of 52 weeks in which a trainee pharmacist carries out practical learning and training activities under supervision.
Formative assessment	A form of assessment that is ongoing, developmental and continuous and is used to give feedback and support to the student/trainee on their progress towards the learning outcomes.
Healthcare professional	An individual who is approved to practise in a healthcare speciality or discipline by the relevant regulatory body in the UK.
Higher-education institution	A school of pharmacy that delivers an accredited MPharm degree and so is responsible for the design, delivery and quality management of the accredited MPharm degree. A higher-education institution that is involved in the foundation training year.
Inter-professional learning	During the MPharm degree, a period of engagement with students from other health and care professions that mirrors practice.
Period of learning in practice	The period of learning in practice specifically relates to prescribing. It consists of at least 90 hours of supervised practice directly related to independent prescribing.
Protected characteristics	The nine protected characteristics as listed in the Equality Act 2010: age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief; sex; and sexual orientation.
Sign-off	Formal confirmation that the trainee has met the learning outcomes of the foundation training year.
Statutory education bodies	NHS Education for Scotland (NES), NHS England,for Health Education and Improvement Wales (HEIW), and the Northern Ireland Centre for Pharmacy Learning and Development (NICPLD).
Student pharmacist	An individual who is studying on an MPharm degree.
Supervision	Overseeing trainees, using agreed systems, in all practice environments to make sure safe, person-centred care is delivered. During the foundation training year, the designated

Term	Definition
	supervisor and the designated prescribing practitioner are responsible for ensuring safety during the trainee's progression.
Summative assessment	A form of assessment used to measure whether the student/trainee has achieved one or more learning outcomes.
Trailing	Being able to start the next year of study when one or more assessments from the previous year have not yet been passed.
Trainee pharmacist	An individual who is undertaking their foundation training year.

References

Legislation and standards

The Pharmacy Order (Department of Health, 2010)

The Pharmacy (Northern Ireland) Order (Department of Health, Social Services and Public Safety, 1976)

The Code of Ethics and Standards (Pharmaceutical Society of Northern Ireland, 2016)

Standards for Pharmacy Professionals (GPhC, 2017)

Standards for the education and training of pharmacist independent prescribers (GPhC, 2019)

Education procedures for the initial education and training of pharmacists and pharmacy technicians (GPhC, 2013)

Revalidation Framework (GPhC, 2018)

Guidance

Demonstrating professionalism online (GPhC, 2020)

Female genital mutilation: mandatory duty for pharmacy professionals to report (GPhC, 2019)

Guidance on experiential learning, placements, laboratory work and other face-to-face interaction on MPharm degrees and OSPAPs ('experiential learning') **(GPhC, 2020)**

Guidance on MPharm admissions **(GPhC, 2020)**

Guidance on tutoring and supervising pharmacy professionals in training (GPhC, 2018)

Guidance on tutoring for pre-registration pharmacist tutors (GPhC, 2018)

Guidance on managing fitness to practise concerns in education and training (GPhC, 2020)

In practice: Guidance for pharmacist prescribers (GPhC, 2019)

In practice: Guidance on consent (GPhC, 2018)

In practice: Guidance on maintaining clear sexual boundaries (GPhC, 2020)

In practice: Guidance on patient confidentiality (GPhC, 2018)

In practice: Guidance on raising concerns (GPhC, 2017)

In practice: Guidance on religion, personal values and beliefs (GPhC, 2017)

Joint statement on conflicts of interest (GPhC, 2017)

Joint statement on the professional duty of candour (GPhC, 2014)

Interprofessional education guidelines (Centre for the Advancement of Interprofessional Education, 2017)

UK Quality Code for Higher Education (Quality Assurance Agency for Higher Education, 2018)

Useful organisations

General Pharmaceutical Council (GPhC)

British Pharmaceutical Students' Association (BPSA)

Health Education and Improvement Wales (HEIW)

NHS England

NHS Education for Scotland (NES)

Office for Students

Office of the Independent Adjudicator (OIA)

Pharmaceutical Society of Northern Ireland (PSNI)

Pharmacy Schools Council

Professional Standards Authority (PSA)

Royal Pharmaceutical Society (RPS)

Quality Assurance Agency (QAA)

Universities UK (UUK)

Appendix 1: Requirements for the initial education and training of pharmacists

This document provides standards for the initial education and training of pharmacists.

For students and trainees studying in Great Britain, there are four routes to registration as a pharmacist[13] and annotation as an independent prescriber:

Route 1: An initial four-year Master of Pharmacy (MPharm) degree followed by the foundation training year

- a four-year MPharm (part of which may be studied overseas)
- the foundation training year
- the GPhC's registration assessment[14]

Usually, this route to registration must be completed in eight years[15].

Route 2: A five-year Master of Pharmacy (MPharm) degree including a pharmacy foundation degree followed by the foundation training year

- a two-year, part-time foundation degree (comprising Year 1 of an MPharm degree plus work experience and study skills)
- years 2-4 of an MPharm degree
- the foundation training year
- the GPhC's registration assessment

Usually, this route to registration must be completed in nine years.

[13] The time limit for completing a route to registration may be adjusted, in proportion, for periods of part-time education or training, and for other legitimate, documented reasons. The registration process includes health and good-character checks.

[14] From 2020, the registration assessment will be delivered online until further notice.

[15] ***Education procedures for the initial education and training of pharmacists and pharmacy technicians***

Route 3: A five-year Master of Pharmacy (MPharm) degree including a preparatory year followed by the foundation training year

- a preparatory year (Year Zero/Foundation Year/Health Foundation Year)
- years 1-4 of an MPharm degree, delivering the learning outcomes in part 1 of these standards
- the foundation training year
- the GPhC's registration assessment

Usually, this route to registration must be completed in nine years.

Route 4: A five-year Master of Pharmacy (MPharm) degree) including the foundation training year

- a five-year MPharm degree, including blocks of the foundation training year
- the GPhC's registration assessment

Usually, this route to registration must be completed in eight years.

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