Summary Report of the Statutory Review of the Five-Year Fully Integrated Master's Degree Programme in Pharmacy provided by Trinity College Dublin

22 June 2015

Approved by PSI Council on 3 December 2015

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in accordance with Article 7(2)(a) of the Pharmacy Act 2007

And

Rule 8 of the Pharmaceutical Society of Ireland (Education and Training) (Integrated Course) Rules 2014 (S.I. No. 377 of 2014)

i.   Introduction

Stemming from the Pharmacy Act 2007 (as amended) and recognised in Directive 2005/36/EC of the European Parliament of the Council on the Recognition of Professional Qualifications, the Pharmaceutical Society of Ireland (PSI, the pharmacy regulator) has responsibility and powers for the recognition and approval of the programmes of education and training of pharmacists in Ireland.

The present accreditation concerns the initial accreditation of the 5-year fully integrated Master of Pharmacy degree delivered by the School of Pharmacy and Pharmaceutical Sciences, Trinity College Dublin (TCD) against the PSI's Accreditation Standards for the fully integrated Master's Degree Programmes in Pharmacy approved by the Council of the PSI on 2 October 2014. Successful completion of the programme leads to the award of the MPharm degree and the Higher Education Institution confirming that a graduate demonstrates the competencies necessary to enter the Register of Pharmacists held by the PSI and that the person is fit to be a registered pharmacist. This is the summary report of that accreditation event.

ii.   Process of review

The meeting

The accreditation meeting took place by video-conference on Monday, 22 June 2015 from 10h00 to 13h00.

The accreditation team

The PSI accreditation team comprised:

Name	Designation at the time of visit
Professor Brenda Costall	Team Leader (Chair). Former Pro Vice-Chancellor for Planning and Resources, Deputy Vice-Chancellor, and Head of School of Pharmacy, University of Bradford, UK. (Panel Category: Pharmacy academic with experience of developing and/or accrediting pharmacy degree programmes (International academic)).
Dr. Norma Ryan	Former Director of the Quality Promotion Unit, University College Cork. (Panel Category: Accreditation expert/HEI Quality Assurance/Regulatory expert).
Mr. Fionán Ó'Cuinneagáin	Former CEO of the Irish College of General Practitioners (ICGP), former member of the Council of the PSI and Chair of the PSI Professional Development and Learning Committee. (Panel Category: Non-pharmacist Patient Advocate/Public Interest/Risk expert).
Dr. Aislinn Joy	Lecturer in Medical Education (MUH), Medical Education Unit, School of Medicine, University College Cork. (Panel Category: Healthcare non-pharmacist member).
Professor Jane Portlock	Professor of Pharmacy Practice, University of Portsmouth. (Panel Category: Pharmacy academic with experience of developing and/or accrediting pharmacy degree programmes (International academic)).
Ms. Norma Harnedy*	National Liaison Pharmacist for Drug Addiction (HSE). (Panel Category: Pharmacist practising in Ireland).
Ms. Meghan Kearney	Community pharmacist. (Panel Category: Recently qualified pharmacist with 0-3 years' post-registration experience (representative of student experience)).
along with	
Dr. Lorraine Horgan	Head of Professional Development & Learning, PSI
Ms. Caroline Mellows	Education Standards Officer, PSI

Dr. Ian Marshall   Rapporteur

*Ms. Harnedy was unable to attend the videoconference but submitted questions and comments prior to the meeting.

There were no declarations of interest.

The standards

The standards for the 5-year integrated Master's degree are arranged under the following headings:

Standard 1 – The Professional Degree Programme Provider and Mission

Standard 2 – Leadership, Organisation and Governance

Standard 3 – Resources

Standard 4 – Curriculum

Standard 5 – Teaching and Learning Strategy

Standard 6 – Assessment Strategy

Standard 7 – Quality Assurance and Enhancement

Standard 8 – Students

The programme

The integrated programme features a newly developed curriculum to support the dispersal of practice placements throughout the five years of the programme, with the first two week shadow placement occurring in the second year and longer 4/6 and 8 month placements commencing at the start of the fourth year and in the second half of the final year of the programme. Placements will occur under the aegis of the Affiliation for Pharmacy Practice Experiential Learning (APPEL), an organisation jointly funded and governed by the three Irish schools of pharmacy.

Meeting the Accreditation Standards

STANDARD 1: THE PROFESSIONAL DEGREE PROGRAMME PROVIDER AND MISSION	Accreditation team's commentary
The Professional Degree Programme Provider must engage in a systematic planning process and have a current strategic plan that facilitates achievement of the Professional Degree Programme Provider's mission, goals and objectives.	
1.1 The mission should include a clear statement of the educational philosophy including how the organisation will foster a culture that: (a) promotes professional behaviour among students, staff and all those contributing to the Professional Degree Programme; (b) is committed to the development of graduates who satisfy the requirements of the Core Competency Framework for Pharmacists; and (c) respects and supports the needs of diverse stakeholders, students, staff and all those contributing to the Professional Degree Programme. 1.2 There should be evidence that the mission, goals and objectives have been reviewed and validated by the Higher Education Institution (HEI) and should be demonstrably congruent with the mission of the HEI and are within the context of societal and professional changes occurring and contemplated .	The mission of the School is to deliver continuous learning in science and practice of pharmacy, supported by innovative teaching and a culture which is aligned with best practice, striving to ensure that staff and students are world-class professionals and leaders in contributing to society. The mission is supported by a draft School Strategy, a Teaching and Learning Strategy and Fitness to Practise Policy and Procedures. The team agreed that the statement was succinct and well-evidenced, showing a culture of best practice in an environment where excellence is valued. The team did note that the School Strategy, together with some other key documents, is still in draft form and has not yet been presented to the Faculty Dean before being brought to the Faculty Executive and presented to the Vice-Provost's Office. The team agreed that it will be a **requirement** that the School provide a definitive version of the School Strategy by 31 December 2015. Overall, the team agreed that the strategic plan, although still in draft format, was appropriate but, given the increasing accent on pharmacists developing clinical skills, the team will look forward to learning of the implementation of plans to develop staffing and leadership in the area of pharmacy practice at the on-site visit; in this respect the team noted two new practice educator appointments, a 0.8 FTE teacher-practitioner and the planned appointment from 2017 of a chair in clinical pharmacy, along with the appointment of an assistant professor in the subject area.

	The mission statement should set out clearly the primacy of patient safety, care and well-being. This must be demonstrated by the existence of: (i) a chronological log of any concerns raised relating to patient safety and well-being that arise as a consequence of the educational process; (ii) clear and published procedures known to all staff and students to immediately review and address such concerns that may impact upon patient safety; (iii) a Fitness to Practise policy known to all staff and students to assure patient safety and public protection at all times; and (iv) an explicit recognition that by awarding a degree accredited by the Council of the PSI, the HEI is confirming that a graduate is fit to apply to have their names entered in the Register of Pharmacists.	Students of the School are expected, both while on placement and in the classroom and laboratories, to demonstrate a high standard of professional behaviour; the team noted that this is congruent with the College's mission. While on placement, students are required to comply with the Code of Conduct for Pharmacy Students of the School, with the disciplinary rules of the placement provider, and with the regulations of the College relating to student conduct. The team was pleased to note that outcomes also included ensuring that practice involves the rational, optimal, effective and safe use of medicines. Thus, when on placement, students are reminded that patients' and clients' interests and safety take precedence over students' education. The team was also pleased to note that the learning outcomes specifically mention patient-centred practice, professionalism and continuous professional development/lifelong learning, all reflected in the educational philosophy described which address competencies within the CCF for pharmacists. The School has committed to the establishment and maintenance of a chronological log by the practice educators of any concerns relating to patient safety and well-being that arise as a consequence of the educational process. The team also noted the strong emphasis on interprofessional working from the start via workshops with the seven other disciplines within the Health Science Faculty, aiming to demonstrate how effective team working and communication can benefit patient care. The team agreed that the commitment to interprofessional learning was a strength of the proposed provision.
1.3	The Professional Degree Programme Provider should have a published statement of its mission and goals and set out its key performance indicators (KPIs) and timescales for their implementation and review. This should include an explanation of how the Professional Degree Programme Provider will monitor and evaluate its performance against the goals and objectives of its strategic plans	The School has a Fitness to Practise (FtP) Policy and Procedure document which is accessible for all students and staff members; students are first introduced to the FtP Policy and Procedures in the Junior Freshman Orientation session in Freshers' week where the link between the Code of Conduct and the FtP processes is outlined. The team noted that FtP issues will be reviewed by the Director of Teaching and Learning and the Junior Dean with the procedure appearing to be quick enough in that students are notified of a hearing five days later. Students will also be removed from the classroom or placement/ the public domain pending the hearing outcome in serious

1.4 The strategic plan must include but need not be limited to:
 	
(a) Its mission and goals with associated KPIs;
(b) The underpinning aims and objectives of the Professional Degree Programme Provider including clearly defined learning outcomes to demonstrate that at the end of the Professional Degree Programme, the graduate is competent to practise pharmacy in a patient-centred, professional and ethical manner, and demonstrates a commitment to lifelong learning;
(c) A statement of the educational philosophy for the Professional Degree Programme and how it:
   (i) supports or assures that graduates will be prepared for entry to the profession of pharmacy including patient-centred practice in line with the Core Competency Framework for Pharmacists as established by the PSI Council from time to time;
   (ii) prepares graduates for practice as pharmacy professionals who will embrace lifelong learning; and
   (iii) provides structured experience of interprofessional working to facilitate team-work in the delivery of patient-centred care.
(d) A commitment to excellence in teaching and learning methods;
(e) A vision for leadership in practice, research and other scholarly activity and educational activities.
	cases in order to protect the public. The team agreed that the School has a well-documented and detailed procedure of how it deals with concerns raised of a student's fitness to practice. Once a year, the Head of School will confirm to the PSI that students who have successfully completed the programme have satisfied the criteria outlined in Rule 20 of the Pharmaceutical Society of Ireland (Education and Training) (Integrated Course) Rules 2014 (S.I. No. 377 of 2014). Overall, the team agreed that the provision was at a very early stage of its development and accordingly it will be a **requirement** that evidence of further progress on patient safety issues and a finalised version of the School Strategy be submitted by 31 December 2015.
	
	The documentation stated that the School has a number of goals and associated key performance indicators (KPIs) for the programme which are designed to ensure compliance with the Accreditation Standards of the Pharmaceutical Society of Ireland, with University Standards for the award of a level 9 qualification in line with Quality and Qualifications Ireland (QQI), and with international norms for qualification in the field. The team noted that the KPIs will be monitored annually by the School Executive Committee, but also was aware that most of the KPIs were expressed in the future tense, implying that they are not in current use. Also, although congruent with the overall KPIs of the HEI, most of the KPIs do not clearly indicate the target goal. The team was of the view that a KPI should state what the specific goal is, e.g. what percentage of students should be retained, how this will be measured, and what percentage is to be achieved to meet the KPI and the objective. The team agreed that it be a **requirement** for 31 December 2015 that more specific and measurable KPIs be developed and submitted, including information on the baseline starting position, and associated timelines for implementation.
	
	As part of APPEL, there will be practice educator pharmacists (2 x 0.5 FTE) assigned solely to TCD. The team agreed that the establishment, development and implementation of the APPEL initiative was a vital part of the plans for the 5-year integrated degree in all 3 Schools and agreed that it should be a **requirement** that progress in developing APPEL should be reported to the PSI on a

1.5	For a newly planned and/or recently established programme, the Professional Degree Programme Provider must provide a comprehensive strategy outlining the planning, development and implementation phases of the programme.	stage-by-stage basis with notice of the finalising of the contract by the end of September 2015, and notice of progress on key appointments to be made by end of January 2016. **The accreditation team agreed that, subject to the satisfaction of the above requirements, this standard was likely to be met**

STANDARD 2: LEADERSHIP, ORGANISATION AND GOVERNANCE	Accreditation team's commentary
There must be clear management structures for the Professional Degree Programme with a schedule of roles and responsibilities, and a defined structure and process to show lines of accountability and authority for all those involved in the delivery of the Professional Degree Programme.	
2.1 The Professional Degree Programme must be planned and delivered by an identifiable organisational unit preferably a School or Faculty of Pharmacy ('the School'), which has responsibility for the Professional Degree Programme and associated resources. Furthermore the Professional Degree Programme must be planned and maintained through transparent processes and must clearly identify who is responsible for what at each stage. 2.2 There must be effective systems in place to ensure that students: (a) do not jeopardise patient safety and only do tasks under appropriate supervision; (b) are monitored and assessed to assure they always work and perform safely; (c) understand what fitness to practise mechanisms apply to them; (d) are not awarded an accredited degree or placed into any part of the programme that involves access to patients, the public or confidential data, if they are considered likely to pose a risk.	The School is led by the Head of School who is supported by the School Executive Committee. The School Committee includes more extensive staff membership as well as student representatives, while the Programme Management Committee (PMC) includes some members of the School Executive and other representatives of the School's staff and students. The Head of School takes ultimate responsibility for the Professional Degree Programme and associated resources, is the budget holder, following devolved authority, and is financially accountable to the Faculty Dean. The team agreed that the Head of the School, who is a registered pharmacist, is appropriately qualified to provide leadership in pharmacy professional education, including research and scholarly activities, and so be in a position to influence the HEI and the School policy in relation to pharmacy. The Head of School is committed to reporting, to the PSI, any changes in resources that are pertinent to the delivery of the Professional Degree Programme; should this arise, evidence of this will be documented and kept on file in the School. In this respect, a financial budget has been developed which factors in the additional costs that are pertinent to the delivery of the new programme. The Head of School is also aware of the obligation to report to the PSI at the point of graduation, a confirmation that each graduate has met the competencies in the CCF. The team noted that Rule 20 of the PSI (Education and Training) (Integrated Course) Rules 2014 requires the Head of School to confirm his or her overall satisfaction that the person concerned is fit to be a registered pharmacist. The Programme Management Committee (PMC), chaired by the Head of School, is/will be responsible for monitoring, reviewing and making recommendations on the development of the Pharmacy (Integrated) programme. This Committee includes at least one representative from the Freshman (Years 1 and 2) years of the programme, at least one

2.3	The Head of the School must be qualified to provide leadership in pharmacy professional education, including research and scholarly activities, and so be in a position to influence the HEI and the School policy in relation to pharmacy. In the event that the Head is not a pharmacist registered in Ireland, there must be an identified pharmacist registered in Ireland who can provide leadership in the practice and profession of pharmacy and have authority for effective advocacy for pharmacy within the HEI and be held accountable for the oversight of practice-based learning. This person must be at a senior level within the School and be registered in the Register of Pharmacists and thereby be familiar with, and subject to, the PSI statutory Code of Conduct.	representative from the Sophister (Years 3 and 4) years of the programme and one fifth year representative of the programme. The team agreed that the documentation provided a comprehensive description of the management and governance structures within the School, with very clear responsibilities described and appropriate student representation with students being nominated by their peers. The School has systems in place to ensure that students do not jeopardise patient safety and only undertake tasks under appropriate supervision; are monitored and assessed to assure they always work and perform safely; understand what fitness to practise mechanisms apply to them; and are not awarded an accredited degree or placed into any part of the programme that involves access to patients, the public or confidential data, if they are considered likely to pose a risk. These include designing the activities undertaken to ensure that they are suited to the knowledge/skills of the students at each stage of the programme, and assessment to ensure that students have demonstrated satisfactory knowledge/skills to progress to subsequent patient-facing activities. The team agreed that the collaboration on a Code of Conduct for Pharmacy Students, based on the PSI Code of Conduct, agreed between TCD, UCC, and RCSI in February 2015 was a positive step both in terms of patient safety and in bringing the three Schools closer together.
2.4	The HEI must support the development of suitable relationships between the School and other academic and service units of the HEI for instruction, research and practice-based and interprofessional learning.	
2.5	External relationships or collaborations with the pharmacy profession must be facilitated to foster the School's teaching, learning and research capabilities. The School should have access to, and arrangements with, HEI affiliated and other healthcare teaching facilities in support of the practice-based and interprofessional learning needs of the Professional Degree Programme [see also Standard 3.6(c)]. Wherever possible, collaborative approaches to	The team was concerned that the ability of a student who had not completed the whole programme to graduate with a Bachelor of Science in Pharmacy degree could cause confusion and misunderstanding with potential for patient safety issues. The accreditation team noted that the accreditation standards for pharmacy degree programmes pertained only to a 5-year, and not a 4-year, course of studies. The accreditation team agreed that it would be a **requirement** that students should be advised by the Provider of this matter on entry to the course. Confirmation of this **requirement** will be sought by **30th September 2015**.

practice-based placements must be used in conjunction with other HEIs in the State offering a pharmacy degree programme.	The team was pleased to learn of the support of the College for the School's strong emphasis on the importance of interprofessional learning (IPL) from a very early stage in the curriculum. This is a Faculty of Health Sciences-wide initiative. Thus, in May 2015, the Faculty Executive agreed to advertise for an Assistant Professor in Interprofessional Learning, who will support the Schools across the Faculty with the academic development, expansion, co-ordination and implementation of the IPL programme currently in place in the Faculty. The team agreed that the School and Faculty should be **commended** for its strong emphasis on the importance of interprofessional learning.
2.6 The Professional Degree Programme must comply with the principles of equality, diversity and fairness and meet all the requirements of National and European law as it relates to the education, training and qualification required for registration as pharmacists.	
2.7 As part of the statutory annual reporting process to the PSI, the School must submit data on student intake, student numbers, student achievement and progression through the Professional Degree Programme with the School's commentary and analysis. The School must maintain a reliable, accurate and workable management information system in support of this.	A partnership agreement has been signed recently between the School and St James's Hospital, Dublin, which paves the way for greater synergies and collaboration between the two institutions in high quality clinical care, education and research. Other such partnerships are currently under development. A dedicated Centre for the Practice of Pharmacy has been developed in the School to facilitate undergraduate teaching. This includes professionals with specialist knowledge in community, hospital, industrial and forensic pharmacy, with external speakers being invited to contribute in a number of programme modules. The team agreed that there was good evidence provided of the external relationships and continuing development of these, with good evidence provided of agreements with the collaborating institutions.
2.8 The Head of School has an obligation to report to the PSI:	
(a) on key issues including any changes in resources that are pertinent to the delivery of the Professional Degree Programme; and (b) at the point of graduation, a confirmation that each graduate has met the competencies in the CCF. In order to do this, the School must maintain, in accordance with any policy as approved by the PSI Council from time to time or	**The accreditation team agreed that, subject to the satisfaction of the above requirements, this standard was likely to be met**

| any legislative provisions, an ongoing record of 'fitness to practise' matters and any other matters that could have a material impact on future fitness to practise when the student/graduate in the future is practising as a pharmacist. | |

STANDARD 3: RESOURCES	Accreditation team's commentary
The School must have sufficient allocated resources, financial, physical and staff, and have developed and documented contingency plans to cover any deficiencies that may arise in order to ensure the effective delivery of a Professional Degree Programme that continues to meet the 'Accreditation Standards of the five-year fully integrated Master's degree programmes in pharmacy' as approved by the PSI Council from time to time.	
3.1 Academic Staff	
The School must have a sufficient number of core academic staff and other teaching staff including professionally qualified staff such as teacher-practitioners, practice educators and tutor pharmacists, appropriately qualified, experienced and expert in pharmaceutical sciences and pharmacy practice. There must be an appropriate mix of academic staff practising as pharmacists in clinical practice including senior staff who can influence policy within the School and contribute to curriculum design and development, assessment design and development, and course management and coordination activities. This staff, full-time and part-time, must: (a) provide the majority of teaching and learning support for the Professional Degree Programme. Where 'service-teaching' is identified as essential, there shall be a robust means of managing its integration into the Professional Degree Programme and ensuring that the teaching is oriented towards pharmacy;	The teaching of each module will primarily be carried out by academics within the School, supported by external lecturers who have been invited to give lectures in their specialist areas. The programme will also use lecturers from within the College, whose specialist knowledge or expertise complements that of the Pharmacy staff. Physiology, Biology, Microbiology, Biochemistry, Statistics, and some Mathematics are taught on the course by academic staff from the School of Medicine (Departments of Physiology and Clinical Microbiology), School of Natural Sciences, School of Biochemistry and Immunology and the School of Genetics and Microbiology. Module co-ordinators and academic staff responsible for discrete module elements liaise with and support external contributors in all aspects of their teaching and contact with students. The team agreed that the staffing was appropriate in terms of quality but had some concerns in relation to the balancing of the staffing profile for the delivery of a modern, integrated, clinically-focussed pharmacy degree. The team agreed that it be a **requirement** for 31 December 2015 that the School provide a Staffing Strategy to demonstrate the integration of the academic part of the new programme with the workplace-based learning and ensure contiguity with the CCF. As part of APPEL, there will be Practice Educator pharmacists (2 x 0.5 FTE) assigned solely to TCD from September 2015. The Practice Educators will meet the requirements of the PSI in relation to placing students, monitoring these placements on an on-going basis (including site inspections) and acting as the College's interface with APPEL. The team agreed that the Practice Educator posts were crucial for the development and implementation of the new programme but was concerned that the appointees will have an onerous task in a short period of time before the first experiential placements occur. The team noted that the accreditation standards require each of the three HEIs

(b) individually and collectively, demonstrate a commitment to the mission of the School and to the goals and objectives of the Professional Degree Programme and a continuing commitment to be effective teachers;

(c) provide the academic direction for all teaching and learning support or assessment provided by individuals from outside the School;

(d) liaise with any staff from outside the School involved in teaching to support the adaptation of examples used in teaching and learning to contemporary pharmacy context and to ensure that it is patient-centred;

(e) be provided with the resources, support and academic environment which allows staff members to maintain their knowledge at the leading edge of pharmaceutical, biomedical, and social sciences and clinical pharmacy practice;

(f) be encouraged and supported to engage in scholarship and research which is disseminated nationally and internationally;

(g) have access to an organised professional development programme open to all teaching staff members consistent with their respective responsibilities. This programme must provide opportunities to develop teaching, learning and assessment skills and the use of new learning technologies. As well as applying to both full-time staff and part-time staff of the HEI, this requirement also applies to all those contributing to teaching, learning and

to retain individual responsibility for, and oversight of, APPEL activities. The team agreed that the support staff complement appeared appropriate although it was not clear if the complement was being enhanced to deal with the extra demands of the new programme and agreed to seek clarification on this and the additional administrative support that will be available through APPEL to oversee the coordination and administration of all practice placements from Years 2 to 5, at the time of the on-site visit. The team also agreed that there was a requirement for the on-site visit for details of the measures proposed to ensure that APPEL recruits and trains tutors that meet its specification, and how APPEL plans to increase numbers of practice placement opportunities to service the needs of the three schools of pharmacy.

The team noted that the School was in sound financial health and that there had been some front-loading of financial support that would need to be reconciled by 2019-20. The School's contingency plans are aligned to the College Risk Management Policy which applies across the College to all activities and all areas including major infrastructural and research projects. The team noted that TCD is currently revising its process to develop risk registers across the College. A pilot process is currently in place, which is due to end in June 2015. On the foot of this, contingency plans can be developed. The team agreed that it will be a **requirement** for 31 December 2015 that contingency plans be made available to assure the continued running of the programme, at least for students enrolled in the programme, in case of any financial difficulty. The team agreed that the facilities described in the documentation were impressive, with adequate teaching and lab space (including an aseptic suite facility) outlined. A new e-Learning Suite will allow video/audio recording which will be appropriate for the eLearning part of the programme. However, the team was unsure if any expanded facilities would be required to meet the needs of the five-year degree, and how the model pharmacy and observation areas will be used for teaching and look forward to learning more about this at the time of the on-site visit

assessment. The programme for tutor pharmacists must be amenable to flexible delivery and meet the requirements as approved by the PSI Council from time to time. Evidence of the impact of professional development programmes should be demonstrated.	**The accreditation team agreed that, subject to the satisfaction of the above requirements, this standard was likely to be met**
3.2 Practice Educators The School must have a sufficient number of Practice Educators, in joint appointment positions with practice placement sites as practicable, who will provide the specialised teaching on the interface between the learning within the schools and that within the workplace and who will provide support to the students on placement and to their tutors.	
3.3 External Experts The School should ensure that relevant input from external specialist lecturers is provided to enhance the students' contextual understanding of specific areas.	
3.4 Support Staff The School must have a sufficient number of support staff suitably qualified/trained and experienced to support its operation. This staff must have access to an organised development programme open to all support staff consistent with their respective	

responsibilities. Evidence of the impact of this programme should be demonstrated.

Technical staff should be suitably qualified and trained and proficient in the operation and maintenance of scientific instrumentation and other equipment. Technical staff should take an active role in the preparation and delivery of laboratory practice sessions and projects and practice sessions and projects.

3.5   Tutor pharmacists

Pharmacists acting as tutors for the practice-placement elements of the programme must be of sufficient number, appropriately qualified and experienced and be professional role models with the knowledge, skills, attitudes and behaviours to effectively mentor, monitor and evaluate students.

3.6   Infrastructure and Financial Resources

(a) The School must have the financial resources necessary to accomplish its mission and goals;
(b) The School must ensure that accommodation (including teaching rooms and laboratories), equipment, library facilities, IT (including appropriate interactive distance learning technology/VLE), subject specific IT specialist software (for example dispensing software), clinical skills facilities and other resources available to it are sufficient for the effective

delivery and assessment of the planned Professional Degree Programme to the numbers of students in each year of the Professional Degree Programme and overall, and that the accommodation, equipment and facilities are safe to use and are properly maintained in a safe condition; properly taking account of the other teaching and research commitments of the School; (c) There must be policies and procedures to ensure that training establishments for the practice-placement elements of the Professional Degree Programme are appropriate for the delivery of this element of the Professional Degree Programme and meet any requirements as approved by the PSI Council from time to time, including any requirements relating to consistency of approaches to placements; (d) The School should have contingency plans, developed and documented, to cover any deficiencies in infrastructure, equipment or personnel that may arise in order to ensure the effective delivery of the Professional Degree Programme.	

STANDARD 4: CURRICULUM	Accreditation team's commentary
The curriculum must be planned to deliver an integrated Master's degree programme learning experience that combines and co-ordinates all components in a logical and cohesive manner with clearly articulated linkages between and across units within years and between years. The Professional Degree Programme must be planned as a whole to deliver graduates who have the knowledge, skills, attitudes and behaviours to meet the Core Competency Framework for Pharmacists necessary for entry to the profession of pharmacy and to assure the accountability of the profession to society.	
4.1 The curriculum must be progressive in dealing with issues in increasingly complex and inter-related ways so that graduates meet the Core Competency Framework for Pharmacists as established by the PSI Council from time to time and that they can practise safely and effectively according to the statutory Code of Conduct for pharmacists, and any other guidance and requirements as approved by the PSI Council from time to time. 4.2 Sufficient time should be allocated over the whole period of the Professional Degree Programme to enable the formation of an appropriate ethical and professional approach to practice and this process should begin early in the first year. From the beginning, the Professional Degree Programme must be delivered in an environment which places study in a professional and academic context and requires students to conduct themselves professionally. Appropriate assessment of the development of	The submission included a curriculum map outlining the structure of the curriculum, along with the module learning outcomes, syllabus, assessment procedures and alignment of the curriculum to the Core Competency Framework (CCF). Although the team acknowledged that there is a strong emphasis on professionalism and ensuring that students meet the CCF and the Code of Conduct requirements, it had some difficulty in discerning a logical sequencing of the modules, including the progression and inter-relationships of the taught units, how integration of science and practice/clinical pharmacy is achieved, and how the programme will make students ready for the future pharmacist roles which are likely to be emerging in the next ten years. Thus, it was not clear how students are taught consultation skills, clinical examination skills, and prescribing skills in readiness for the increased clinical focus of pharmacy practice. Nor was it clear as to how the progression within the programme will ready students for an experiential placement occurring at the start of Year 4. The team agreed that it will be a **requirement** for 31 December 2015 for the School to demonstrate how integration of science and practice/clinical pharmacy is achieved. The team noted that an ethical and professional approach is introduced in Year 1 in the pharmacy practice modules and throughout the programme to year 5, including a gradual progression from direct teaching e.g. of communication skills, through to a demonstration of ethical and

	professionalism should take place throughout the Professional Degree Programme.	professional behaviour in the OSCEs in year 5. There is intended to be a strong emphasis on ethical and professional practice in the practice placement assessed by the tutor pharmacist to assure Competence Assessment and Performance Appraisal (CAPA) Level 4 is achieved. The team did also note, however, that ethical and professional approaches to practice must be woven throughout the entire programme and not just isolated in the practice of pharmacy modules. Similarly, the team noted that the pharmacy practice teaching has been incorporated into case studies in the pharmacology modules in Years 1-3 and that much of the success of the clinical teaching will rest on these Pharmacology and Clinical Therapeutics modules. The team will look forward to learning at the site visit how the School plans to move towards the new agenda for pharmacists and their education, including preparation for the future roles of pharmacists in healthcare provision. The team also agreed that research-led teaching is strong in the School and considered that the curriculum would benefit from greater consideration of policy development and developments in pharmacy services. The team agreed that there is a strong thread of CPD throughout the programme, with CPD recording and reflection introduced in Year 1 to embed the concept of life-long learning and student responsibility for their own learning from the outset. The current academic staff complement in the School includes pharmacists who practice in both patient-facing (teacher-practitioners) and non-patient facing (academic and research pharmacists) roles. Additionally, academic staff members include basic and clinical pharmacologists, chemists, biochemists and medical doctors. The interdisciplinary team approach within the School provides a foundation which is built upon by the interprofessional learning component, jointly run by several Schools within the Faculty of Health Sciences, including medicine, nursing, physiotherapy, occupational therapy, nutrition and dietetics. The team recognised the potential strengths in the interdisciplinary team described, and of the interprofessional learning element of the programme, but could not find consistent evidence in the submission or from the programme structure of an integrated approach to the teaching of the subject matter apart from the experiential learning in practice settings being clearly integrated into the academic elements of the programme. Thus, although there was evidence of an interdisciplinary approach, it was not clear to the team from
4.3	The curriculum should embrace the scope of contemporary pharmacy practice responsibilities to patient-centred care as well as the emerging roles of the pharmacist within the context of societal and professional changes occurring and contemplated.	
4.4	The curriculum must be designed, delivered and regularly reviewed to keep abreast of advances arising from policy and research and development in medical and pharmaceutical science and services. The scientific base of the curriculum must be of adequate depth, scope and quality and sequenced appropriately to provide both a foundation and continuing support for the intellectual and clinical objectives of the Professional Degree Programme.	
4.5	The curriculum must be delivered by interdisciplinary teams in order that the subject matter of the degree is integrated, and delivered in a patient-focussed manner. The student must be provided with the knowledge and experience that will facilitate an understanding of the key regulatory and scientific aspects of drug discovery, and the manufacture, preparation, quality control, distribution, actions, interactions and use, including, the evidence-based use, of medicines by patients and including health screening, health promotion,	

	pharmaceutical care and the interprofessional nature of health and social care services.	the strategy how the School planned consistently to deliver the academic element in an integrated manner that would allow students to see and understand the linkages between the different disciplines comprising the subject of modern pharmacy. Accordingly, the team would wish to see greater clarity of the philosophical approach to integrative teaching.

4.6	The curriculum must be designed to ensure that, from the early stages of the Professional Degree Programme through to the advanced practice experiences, students are encouraged to assume and are assisted in assuming, responsibility for their own learning, including assessment of their learning needs. Students should also be encouraged to participate and be assisted in participating in the education of others.	Oversight, management and quality assurance of the three principal professional placements will be under the aegis of the APPEL. Additionally, there are other short practice-based experiences throughout the course which serve as experiential learning, reinforcing and informing students' knowledge and encouraging reflection on their competency-based learning needs through *CCF Live*. A 2-week placement is undertaken in semester 2, year 2, with the first substantial experiential learning placement undertaken at the beginning of year 4. Finally, students undertake the second major experiential learning placement during the last 8 months of year 5. This 8-month placement must be undertaken in a patient-facing environment under the supervision of a preceptor pharmacist. As this 8-month placement cannot be undertaken in the same establishment as the shorter placement in year 4, experience of different practice settings is facilitated. The team agreed that it will be a **requirement** by 31 December 2015 that an explanation be provided how the pre-placement activity/learning will prepare the students for placements, how readiness for placement will be assessed, and how students deemed to be unready for placement will be managed.
4.7	The Curriculum should be guided by, but not limited to; the indicative syllabus shown in Appendix B of this document[1] and it should take account of, and be responsive to, developments in pharmaceutical science and services and in pharmacy practice.	
4.8	The curriculum must provide appropriately comprehensive training in research methods applicable to scientific and health research in order to meet the CCF and it must include practice research. In addition, the Professional Degree Programme must include a significant research component that meets the requirements of a level 9	The team agreed that there was a detailed and comprehensive mapping of the School's curriculum to the requirements of legislation, detailing the relevant minimum national and European legal

[1] The indicative syllabus exists as a general guide to an appropriate scope of curriculum content for the Professional Degree Programme. It is not intended to define a contemporary pharmacy programme.

	degree programme on the National Framework of Qualifications.	requirements, and the recommendations for the Advisory Committee on Pharmaceutical Training (1995) as relevant to the curriculum.
4.9	There must be a continuum of structured and quality assured practice-placement experiences throughout the curriculum from introductory to advanced, and across the main practice settings of community, hospital and industry, that are of adequate scope, intensity, structure and duration to support achievement of the CCF. The structure of these practice-placement experiences must meet the PSI Council policy as approved from time to time. These experiences must integrate, apply, reinforce and advance the knowledge, skills, attitudes and behaviours developed through the other components of the curriculum.	**The accreditation team agreed that, subject to the satisfaction of the above requirements, this standard was likely to be met**
4.10	The curriculum must comply with the various minimum legal requirements at national and European level (see Appendix C).[2] The curriculum must take account of the recommendations of the Advisory Committee on Pharmaceutical Training (European Commission, 1995)[3].	

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[2] To include the Schedule of the Pharmaceutical Society of Ireland (Education and Training) (Integrated Course) Rules 2014 (S.I. No. 377 of 2014)

[3] In this respect, a curriculum compliant with the European Credit Transfer and Accumulation System (ECTS) meets the total hours requirement of these recommendations.

STANDARD 5: TEACHING AND LEARNING STRATEGY	Accreditation team's commentary
The Teaching and Learning Strategy must be designed to deliver a curriculum that produces graduates that meet the Core Competency Framework for Pharmacists as established by the PSI Council from time to time.	

5.1   The Teaching and Learning Strategy must:

(a) be structured to provide an integrated experience of relevant   science and pharmacy practice, a balance of theory and practice and the development of independent learning skills;

(b) take account of the predicted preferred learning format of the intended audience as well as the most effective methods to demonstrate competency against the required learning outcomes;

(c) emphasise the contribution of the pharmacist in the pharmaceutical industry and the pharmacist in the healthcare team, including the clinical skills that enable the critical review of patient pharmacotherapies and, where appropriate, during the Professional Degree Programme, teaching and learning should be organised so that students can learn with and from students of other related healthcare professions;

(d) include practical experience of working with patients, carers and other health care professionals. The intellectual and professional demands of the practice experience should increase as the student progresses through the Professional Degree Programme and the

A variety of teaching and learning approaches is used throughout the degree course, selected according to the learning outcomes to be achieved, and the level of the programme the student is in. The programme in TCD falls into three periods; the Freshman years (years 1 and 2) and the Sophister years (years 3 and 4), followed by the fifth and final year of the programme. Standards of both personal maturity and academic application will evolve over the course of a student's undergraduate study at TCD. As students from Year 1 are considered to be adults attending university, it is expected that they will take a measure of responsibility for their own learning. This is reflected in reading and guided study supplied in various modules. As the students progress, they are expected to assume an increasing personal responsibility for their learning. The complexity of the material also increases over the course of the programme, progressing from Junior Freshman basic sciences through to integrated patient care activities in the Sophister years, and experiential patient-facing periods during the final year. The programme was stated to emphasise the application of theoretical knowledge in practice, and includes extensive case-based learning and practical components. Significant practice-based experiential learning has been distributed throughout the programme, along with sessions for debriefing and discussion incorporated into the programme after each such experience in order to consolidate students' practice-based learning and further integrate it with the underpinning theory. From the outset of the programme, students are encouraged to determine and take responsibility for their own learning needs. Thus, throughout the programme, students maintain a reflective e-portfolio in which they record personal learning cycles in order to develop their capacity to identify learning needs through self-appraisal, planning appropriate action, undertaking self-directed learning and

teaching and learning strategy must articulate how this will be achieved (for example, off-site placements, learning sessions involving patients, carers and/or health professionals and simulations);

(e) articulate how experiential and practice-based learning and the input of tutor pharmacists is integrated within the Professional Degree Programme and how it contributes to the overall outcomes of the Programme;

(f) correspond to contemporary and potential future requirements of pharmacy practice, featuring a variety of teaching and learning approaches appropriate to stated learning outcomes, and be in step with current healthcare developments and provision, reflective of changing client and service needs and so ensure that graduates meet the CCF to be eligible to apply for registration as pharmacists. Approaches should include a combination of didactic, non-didactic, experiential and direct observational activities, including the development of appropriate clinical skills. Adult education principles should be introduced in the latter stages of the Professional Degree Programme and, in particular, to underpin the practice-placement elements;

(g) facilitate the development of the student's consultation, counselling and communication skills (as referred to in the CCF) and this should be underpinned by the theoretical basis within

evaluating its impact, with reflection and documentation throughout. In addition, the programme incorporates an increasing proportion of self-directed learning activities as the students progress from the Freshman years to Sophister level. The team agreed that, despite the comments under Standard 4 and the various associated requirements in advance of the on-site visit, the School had made substantial efforts to produce an integrated and progressive course. It is expected that the range of preferred learning formats of the intended student body will vary, and hence the teaching and learning strategy seeks to accommodate such predicted variations. The team agreed that the methods employed take account of general theories of preferred learning styles including visual, auditory and kinaesthetic, at individual and group level, and noted that evidence-based teaching and learning is apparent in the use of problem-based teaching (through case-based learning). The team was also pleased to see the plans for amendment of the teaching and learning strategy to account for the findings of recent studies of second level education. Throughout the programme, emphasis is placed on the contribution of the pharmacist within the healthcare team, including the clinical skills that enable the critical review of patient pharmacotherapies. The team noted the variety of experiences outlined which highlight the application of the pharmacists' skills as part of the healthcare team. The contribution of the pharmacist in the regulatory setting and the industry setting are also adequately described. External practising pharmacists are invited to offer insight of their contribution to the multi-disciplinary team in the workplace. The documentation explained that the importance of pharmacists' collaboration with other members of the team to optimize patient care is a recurrent theme throughout the programme as described in the commentary to Standard 5.1.c. The team regarded this as a strength of the strategy.

Students gain first-hand structured experience of practice throughout the programme, including contact with patients. There is a structured progression from simple tasks undertaken in isolation, to multi-faceted problem-solving in complex cases. The team agreed that a structured, guided practical experience of working with patient, carers and healthcare professionals is apparent throughout and guided by *CCF-Live* and demonstrated in years 4 and 5 to CAPA level 3 and 4

the social and behavioural science content of the Professional Degree Programme;

(h) encourage students to take responsibility for their own learning both within the Professional Degree Programme and as a basis for later continuing professional development;

(i) place emphasis upon the development of leadership skills, problem-solving skills, and the justification of decisions made both on an individual and team-based basis and the impact of such decisions on patient safety;

(j) ensure that teaching and learning take place alongside and with reference to research and other scholarly activities in order that all students develop critical, analytical skills, an understanding of research methods and to support evidence-based decision-making and practice;

(k) ensure that the students recognise the importance of working as part of a multidisciplinary team.

5.2   Notwithstanding the requirement to ensure a balance of   pharmacist input across the programme, the Teaching and Learning Strategy must provide that, where no pharmacist is appointed within an area of academic expertise, there are robust mechanisms in place to ensure that teaching and

respectively. The programme is designed to facilitate experiential learning throughout, commencing at an early stage. Experiential practice-based learning will be facilitated in the principal professional placements managed by the APPEL in years 2, 4 and 5, and students will be supported to gain further practice-based patient-facing experience during years 1-3 in the form of additional experiential learning linked to *CCF Live*, in order to ensure that even if students' early placements are in non-patient facing environments all students will nonetheless have gained patient-facing practice experience each year.   Experiential periods in years 1–4 are supported by formative learning before and after the placement, with targeted periods of reflection (*CCF Live* 1-3, reflective e-portfolio), and each placement is followed by a structured discussion session in which students are 'debriefed', allowing them to share their experience and consolidate the knowledge gained. Knowledge and skills gained in experiential learning components are then incorporated into subsequent campus-based clinical skills, dispensing and patient care, and medicines provision and patient care activities. Again, the team was aware that the timely implementation and early effective functioning of APPEL will be crucial to the success of this aspect of the provision and that the accord between the experiential and academic learning will require some skilful interactions.

Pharmacy law, ethics, professionalism and pharmacy practice are taught almost entirely by registered pharmacists with the School having a number of full-time and part-time practising registered pharmacist academic staff and teacher-practitioners. A minority of aspects of pharmacy practice (*e.g.* industrial experience or operation of a pharmaceutical company) may be taught by non-pharmacist members of staff. However, professionalism in the general sense is an ethos that permeates all teaching and learning. The team agreed that this represented a strength of the teaching team. However, although the team noted the strong emphasis on pharmacist input to the programme and its management, it could not find evidence of any specific pharmacy-orientated training for non-pharmacist members of teaching staff and agreed that there will be a

learning in modules/course units in that area take place in a pharmacy context. 5.3 The Teaching and Learning Strategy must ensure that pharmacy law, ethics, professionalism and pharmacy practice are taught predominantly by pharmacists with appropriate contemporary experience of practice, drawn preferably from within the School. 5.4 The Teaching and Learning Strategy must develop a culture of professionalism in which all teaching staff can lead by example, collegiality, civility and respect among students and staff and this must be underpinned by a clear and realistic student code of conduct that is explained, communicated and enforced to assure professional behaviour. This must be supported by Fitness to Practise procedures that address causes for concern raised about students (see Standard 2).	**requirement** for 31 December 2015 that the School indicate a strategy for non-pharmacist members of teaching staff receiving pharmacy-oriented training. The School is committed to upholding the principles of the Student Charter which is designed to foster a harmonious and respectful environment. A Code of Conduct for Pharmacy Students, based on the PSI Code of Conduct, has jointly been developed by the Schools of Pharmacy in TCD, UCC and RCSI. The School has a related Fitness to Practise (FtP) Policy which incorporates detailed procedures aligned with the FtP procedures of the College as a whole. The link between the Code of Conduct for Pharmacy Students and the FtP processes is clearly outlined for students. The team agreed that the School's commitment to the promulgation of professionalism represented a strength of the planned provision. **The accreditation team agreed that, subject to the satisfaction of the above requirements, this standard was likely to be met**

STANDARD 6: ASSESSMENT STRATEGY	Accreditation team's commentary
The Assessment Strategy must ensure that all graduates demonstrate the competencies set out in the Core Competency Framework for Pharmacists as established by the PSI Council from time to time. The strategy must align with the teaching and learning strategy (see Standard 5) and use effective and validated diagnostic, formative and summative assessment methods that are reviewed at frequent intervals and take account of developments in pharmacy practice within all components of the Professional Degree Programme.	

6.1   The Assessment Strategy must:
 	
    (a) be planned at the Professional Degree Programme level to include a range of methods, at each level of study, appropriate to assess the progressive attainment of all competencies set out in the CCF and the process of professionalisation and should include a formal assessment of the student at the end of year five by the tutor pharmacist;
    (b) include clearly defined marking criteria and the pass criteria must reflect safe and effective practice. All assessments must take account of patient safety and any evidence of unsafe practice must result in failure. Condonation and compensation should not normally be applied and, if used, the graduate must still demonstrate all competencies as set out in the CCF;
    (c) be framed by Institutional regulations for the Professional Degree Programme that are appropriate for an award that is both academic and professional in nature;
    (d) provide clear guidance to students relating to assessment of stated professional and learning
	The course modules are designed by the Programme Management Committee (PMC), which exercises control over the content, delivery methods and modes of assessment of each of the modules in the programme. A range of assessment methods, including diagnostic, formative and summative assessments, undertaken individually or in groups, in the form of multiple choice questions, essay-style examination answers, laboratory exercises and reports, literature searches, observation of teamwork and problem-solving, role play, case studies, OSCEs, class quizzes, oral presentations, dissertations, research tasks and project reports, reflective journals, wikis, peer evaluation and novel strategies such as crosswords, online simulations and class development of teaching/learning material, is employed at each level of the programme for the determination of development and acquisition of the CCFs. The attainment of core competencies in years 4–5 will be formally assessed by pharmacist preceptors in the practice settings. The team noted that varied assessment methods are used from the first year which allows a holistic approach to evaluating student performance. Essential skills such as pharmaceutical calculations, problem-solving and critical-thinking are assessed throughout the course. Communication skills, patient care matters, therapeutics and the preparation of drugs are built from a basic level to complex throughout the course. The OSCEs are designed to ensure that all of the skills are assessed in the one scenario. Knowledge of pharmacy law is evaluated throughout the programme using a variety of formative and summative assessment modalities, including written

outcomes, with objective reporting on assessments;

(e) position knowledge, understanding and competence development in a pharmacy context. Notwithstanding the requirement to ensure a balance of pharmacist input across the programme, should there be no pharmacist within an area of academic expertise there must be robust mechanisms in place to ensure that assessment in modules/course units in that area takes place in a pharmacy context;

(f) emphasise the contribution of the pharmacist in the healthcare team and the pharmacist in the pharmaceutical industry and where appropriate, during the Professional Degree Programme, the student is assessed alongside and together with students of other related health professions;

(g) demonstrate a holistic approach and include, for example, mechanisms which measure cognitive learning, mastery of essential practice skills, ability to communicate effectively, team-working, numeracy and use of data in problem-solving;

(h) develop students as self-directed learners underpinned, where possible, by participation in peer review and assessment;

(i) include a formal examination of pharmacy law towards the end of the Professional Degree Programme;

(j) address pharmaceutical calculations in all years of the Professional Degree Programme;

examinations, practical coursework and tests, CAPAs, group activities, OSCEs, reflective e-portfolio activities and case-based MCQs. A terminal formal examination of pharmacy law will be incorporated in the PRE. The PRE will incorporate a multi-station OSCE, jointly developed and examined by the Schools of Pharmacy in TCD, UCC and RCSI. The cases in the OSCE can be based on any element of the curriculum over the five years of the integrated programme, but there will be specific alignment of individual stations to the domains of the PSI's Core Competency Framework for Pharmacists.

Processes are in place, and procedures and practices evolved, to ensure the integrity of the assessment process. The initial responsibility for ensuring reliability of assessment scores lies with the module co-ordinator. All written examination components are assessed by anonymous marking. Module marks are collated into year marks for review at the Court of Examiners. Meetings will be held to review assessment scores for Years 1-3, then separately to review the Year 4 and Year 5 (MPharm) marks and grades. The process is subject to external review on an annual basis. A College-wide appeals process is in place which the team agreed represented a strength of the provision.

(k) include a final formal summative objective structured clinical examination as part of the statutory professional examination at the end of year five that seeks to assess in an integrated manner the performance of students based on the curriculum delivered over the five years of the Professional Degree Programme. 6.2 The Assessment Strategy must be supported by a robust and transparent appeals process that is fully documented and communicated to students. 6.3 There must be rigorous processes for review, monitoring and evaluation of all elements of the assessment strategy that identify and take account of inconsistencies and so ensure fairness and reliability. Such processes should incorporate external scrutiny of student assessments.	

STANDARD 7: QUALITY ASSURANCE AND ENHANCEMENT	Accreditation team's commentary
All processes and activities related to the Professional Degree Programme must be clearly defined, documented, executed and controlled in accordance with a system of Quality Management which assures and demonstrates consistency, reproducibility and transparency of operations. There must be evidence that this process is being used to enhance the quality of the provision.	
7.1 There must be clear management structures for the Professional Degree Programme with information about roles and responsibilities, lines of accountability and the authority to act for all those involved in education and training. 7.2 The School must describe how it assesses attainment of the educational philosophy of the Professional Degree Programme (see Standard 1.1). 7.3 The Professional Degree Programme Provider must be able to demonstrate a rigorous evaluation of the Professional Degree Programme and how outcome data and research into best practice are used to achieve continuous monitoring, risk minimisation, development and enhancement of the Professional Degree Programme. The views and experiences of the students, staff (full-time and part-time), tutor pharmacists, employers, service users and the PSI on the quality of the Professional Degree Programme must be considered. Wherever appropriate, students, staff (full-time and part-time), tutor pharmacists, employers and service users should be represented	Governance structures are already in place for the delivery of the programme at both institutional and School level with Quality Review Procedures in place for degree programmes that comply with requirements at a national, College, School and Programme level and from Course to Module level. At School level the Programme Management Committee (PMC) has responsibility for monitoring, reviewing and making recommendations on the development of the programme. Matters arising from this committee will be brought to the School Executive for consideration and ultimate approval before circulation to the School Committee. The School, through the Head, will inform the PSI of any on-going changes relevant to the running of the programme. Students will be notified of any updates to the student handbook, a copy of which will be made available through the School's website. All changes to the curriculum will in the first instance require approval by the PMC and ultimately approval by the School Executive, School Committee and, if necessary, University Council. Following approval by these committees, the PSI will then be notified of changes prior to implementation. Module, year and course (for the 5th year) co-ordinators are in place for the programme who will report directly to the Director of Undergraduate Teaching and Learning (DUTL) and in the fifth year of the programme to the Director of Postgraduate Teaching and Learning as the programme is rolled out. Each year co-ordinator will be tasked with having an oversight role with regard to timetabling,

on committees and other groups that have responsibility for the design, implementation and review of the programme.

7.4 Key performance indicators (KPIs)must be established and monitored to ensure ongoing compliance with these 'Accreditation Standards for the five-year fully integrated Master's degree programmes in pharmacy' as approved by the PSI Council from time to time, and to meet the standards for the National Framework of Qualifications for a level 9 qualification. Where issues are identified that impact on compliance with the Accreditation Standards, immediate corrective action must be taken and notified to the PSI.

7.5 There must be a reliable means of reviewing each student's proficiency over the period of the Professional Degree Programme, to include proficiency in practice placements, to provide robust evidence of each student's performance over a sustained period. The award of an accredited degree is conditional on demonstration of sustained achievement of an appropriate level of professional performance. Fitness to practise mechanisms for students must be in operation and routinely reviewed.

7.6 The Professional Degree Programme Provider must establish and operate a rigorous system for the external examination of the Professional Degree

assessments, module integration and student progression. The submission indicated that the approach to external examinership for years 4 and 5 will be different from the traditional approach in that the co-delivery of practice placements during these years will necessitate a collaborative process for external examinership between the three Schools. The team agreed that the documentation provided an excellent description of a high quality management structure and that comprehensive consideration had been given to the appointment and roles of external examiners

Professional practice placements will be organised through APPEL and will be overseen centrally by a shared governance structure, 'the Board of the APPEL', which will comprise the Heads of the Schools of Pharmacy, while RCSI will employ the National Coordinator and the operational support of the APPEL. However, the team will be seeking confirmation from the Provider in advance of the on-site visit that, despite the advent of APPEL, the Institutions will retain the ultimate responsibility for the quality of placements. In this respect, the team was also aware that the role of the trainers/preceptors is crucial. It is not yet clear how they will relate to the three HEIs, how they will be trained and how they will be quality assured; the team, being cognisant that these will be the functions of APPEL albeit with the ultimate responsibility for quality lying with each of the schools of pharmacy for their own degree programme, nevertheless agreed that all of these aspects need to be clarified well in advance of the first placement. As for Standard 1, the team agreed that it be a **requirement** for 31 December 2015 that more specific and measurable KPIs be developed and submitted, including information on the baseline starting position, and associated timelines for implementation.

The accreditation team agreed that, subject to the satisfaction of the above requirement, this standard was likely to be met

Programme. This system must include explicit policies and regulations covering the appointment, terms of office and role of the external examiners.

7.7   All proposed material changes to the Professional Degree Programme must be documented and submitted prior to implementation to the PSI for approval in line with the statutory requirements. The Professional Degree Programme document management policy must record and retain all changes to the Professional Degree Programme as accredited over time. This is to enable the retrieval of the programme of study undertaken by each student at any time, including post- graduation.

7.8   There must be appropriate mechanisms in place to assure and enhance the quality of all practice placements including:

   a)   the process to select, assess, accredit and appoint tutors and training establishments;

   b)   tutor development and support structures;

   c)   appropriateness of training establishments;

   d)   organisational support for the tutoring process; and

   e)   the allocation of students to training establishments.

There must be appropriate support for students including processes to monitor, review and take necessary corrective action. There must also be appropriate levels of collaboration with regard to the quality assurance of practice placements between the School and the other Schools of Pharmacy in the State so as to facilitate and maximise the benefits of practice placements as a critical national resource.	
7.9 There must be appropriate mechanisms to monitor performance of all staff and the School should provide evidence as to how this is carried out and how this links to the quality enhancement through a development programme (see Standard 3).	

STANDARD 8: STUDENTS	Accreditation team's commentary
There must be processes at HEI and School level to assist prospective students in their application to the Professional Degree Programme, in securing and maintaining placements for the practice-placement elements of the Professional Degree Programme, and to support students' development as learners and as future practising professionals.	
8.1 Entry to and Progression on the Professional Degree Programme Policies and procedures must be in place and regularly assessed for admission to and successful progression through the Professional Degree Programme and these must: (a) be open and available to prospective applicants and ensure non-discrimination as defined by national laws and regulations such as, on the basis of gender, marital status, family status, age, race, religion, disability, sexual orientation, membership of the Traveller community; (b) include a clear statement of the requirements for entry including policies on transfer credit and course waivers, progression and successful completion to align with the CCF, alongside any requirements as approved by the PSI Council from time to time; (c) be open, fair, not impose unreasonable requirements on applicants and incorporate a fair and just complaints and appeals process; (d) include specific and appropriate criteria relating to the requirements for professional standards and Garda vetting and for how any health and immunisation requirements appropriate for the practice setting are met.	The programme is adequately described on various websites and the School Student Handbook is also available to prospective students. Minimum entry requirements are clearly stated to prospective students. However, The team agreed that there be a **requirement** by 31 December 2015 that the College provide a clear statement on requirements for entry, progression, etc., including to highlight the need for all relevant information to be in the public domain for prospective students. The TCD Dignity and Respect policy ensures that the collegiate environment is free from discrimination in keeping with Equality law. A full list of services available to students can be found on the TCD Student Homepage including a comprehensive description of the support mechanisms including the roles and functions of the Dean of Students, Student Learning Development (SLD), the Mature Students' Office, the Trinity Access Programme (TAP), the College Day Nursery, the Centre for Academic Practice and Student Learning. Incoming students are invited to meet their assigned tutors personally at the beginning of their Junior Freshman year. The assigned tutors will follow the students throughout their course. Tutors act in a confidential manner as advisers on both academic and personal problems to provide advice to students where they can, or to put the student in contact with others who may be in a better position to provide help and advice. There is a Pharmacy Orientation day scheduled in the week before the start of the Michaelmas teaching term that includes presentations given by pharmacists practising in a variety of settings and from the Pharmaceutical Society of Ireland. Emphasis is placed on the fact that students are taking the first steps towards entry to a profession, being made aware of the School's Fitness to Practise Procedures, the Pharmacy Student Code of Conduct and the relevant College Regulations. Students are represented on the School Committee, the School Executive Committee and the Course Management Committee. In addition, a Student Forum exists to gather student perspectives. Student surveys of all modules are regularly undertaken. Student survey results are sent to and considered by the Module Coordinator and the Director of Teaching and Learning (Undergraduate),

8.2 **Student Support and Guidance** Appropriate and timely support mechanisms must be in place for students on the Professional Degree Programme including: (a) processes to identify and, where appropriate, provide additional educational, cultural and professional support needs as appropriate; (b) a system of student support including access to a personal tutor or tutors for academic guidance and pastoral care and evidence of school evaluation; (c) support in securing and maintaining placements for the practice-placement elements of the Professional Degree Programme with appropriate supervision and tutor pharmacists who meet the recognition requirements as approved by the PSI Council from time to time (see also Standard 7.8); (d) orientation programmes to both the Professional Degree Programme and the School's expectation of students as members of the professional community. This orientation should include the learning environment, especially where innovative/virtual learning is incorporated into the delivery methods; (e) mechanisms to ensure that the views and experiences of students on the quality of the Professional Degree Programme are considered. Wherever appropriate students should be represented on committees and other groups that have responsibility for the design,	who reports student surveys to the Programme Management Committee where appropriate action is decided. The Director of Undergraduate Teaching and Learning and/or the module coordinator provide feedback to the student classes. The team agreed that there was a comprehensive student support provision with a well-developed personal tutor system. A suitable orientation programme was described, along with appropriate student representation on School Committees and giving feedback. The team noted the appropriate complaints procedure and noted the encouragement given to undertake vacational employment/experience, along with potential participation in a range of extracurricular activities. Finally a range of impressive counselling, health and other support services were described all of which the team regarded as a strong feature of the submission. **The accreditation team agreed that this standard was likely to be met**

implementation and review of the Professional Degree Programme;

(f) a student complaints policy, including the procedures to be followed and clarity regarding students' rights to 'due process'. The provider must maintain a chronological record of student complaints. There should be an introduction to this policy included in the orientation sessions;

(g) alongside formal practice placements and those required in line with PSI Council policy on the dispersal of practice placements throughout the five years, students are encouraged to undertake vacational employment/placement or work experience in a variety of relevant professional settings in order to set learning in the context of pharmacy practice and to inform career choice;

(h) development of support structures that encourage active engagement in relevant or appropriate extra-curricular activities, travel and/or volunteer work/paid work so as to enhance personal growth and development, and to increase awareness and understanding of varied socio-economic and cultural factors as determinants of health and well-being;

(i) encouragement of active engagement with relevant pharmaceutical students' representative associations at HEI, national and international levels, and other groups and committees which may be external to pharmacy, in order to develop individual professional and leadership qualities and foster pharmaceutical and other links at all levels;

(j)	access to counselling in relation to poor progress, learning difficulties, impairment and disability issues, including any health or social problems and career pathway counselling.	

Summary and Conclusions

The team agreed to recommend to the Council of the Pharmaceutical Society of Ireland that the Five-Year Fully Integrated Master's Degree Programme in Pharmacy provided by Trinity College Dublin be recognised and approved for an initial period of two years with a review site visit at or towards the end of the first year of delivery.

There were no conditions however several requirements and points of clarification are due to be addressed with details submitted to the PSI within the identified timeframes.