Summary Report of the On-Site Compliance Visit to the Five-Year Integrated Master's Degree Programme in Pharmacy Provided by University College Cork

Approved by PSI Council 15 September 2016

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

and

Part 3, Rule 8 of the Pharmaceutical Society of Ireland (Education and Training) (Integrated Course) Rules 2014 [S.I. No. 377 of 2014]

Contents

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 approval of the programmes of education and training of pharmacists in Ireland.

The present accreditation concerns the accreditation of the 5-year fully integrated Master of Pharmacy degree delivered by the School of Pharmacy, University College Cork against the PSI's Accreditation Standards for the fully integrated Masters 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 Institute confirming that a graduate fully demonstrates the competencies necessary to enter the register of Pharmacists held by the PSI.

A paper-based review was carried out in June 2015 and the PSI Council, at its 17 September 2015 meeting, approved the recommendations of the accreditation team that the Five-Year Fully Integrated Master's Degree Programme in Pharmacy provided by University College Cork be recognised and approved for an initial period of two (2) years with a review on-site visit at or towards the end of the first year of delivery subject to three specified conditions being met by 31 December 2015.

This is the report of the on-site compliance visit to UCC in February 2016.

ii. Process of review

The visit

The on-site compliance visit took place in UCC on 16 and 17 February 2016. The accreditation team held a preparatory meeting on 15 February, in advance of the on-site visit.

The accreditation team

The PSI accreditation team comprised:

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. Nicola Tyers	Director of The Pharmacy Training Company, and Former Head of Pre-registration, General Pharmaceutical Council, UK. [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].
Professor Jason Last	Associate Dean, Director of Education Development and Academic Affairs, University College Dublin School of Medicine & Medical Science. [Panel Category: Healthcare non-pharmacist member].
Mr. Mark Brennan	Director of Pharmacy Education and Deputy Head of School for the School of Pharmacy at the University of Lincoln. [Panel Category: Pharmacy academic with experience of developing and/or accrediting pharmacy degree programmes (International academic)].
Dr. Éilís Ryan	Community Pharmacist. [Panel Category: Pharmacist practising in Ireland]
Ms. Emer Browne	Former student member of the National Forum for Pharmacy Education and Accreditation from 2013 to 2014. [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. Cora O'Connell   Education Manager, PSI

Dr. Matthew Maltby   Education Standards Officer, PSI

Ms. Ingrid Hook   Rapporteur

There were no conflicts 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 aims of the 5-year Master's Degree Programme in Pharmacy at UCC are to deliver an integrated curriculum, by vertically integrating the content, having longitudinal themes and providing a problem-based and experiential work-place focus. Modules in Years 1 and 2 are designed to provide foundations to scientific and pharmaceutical principles and introduce pharmacy professionalism, while Years 3 to 5 have a clinical and patient focus. Organ-systems based modules are introduced in Year 3 and continued and elaborated on in Year 4. Many modules and workshops are co-taught with students from other healthcare professions to underline the importance of interprofessional learning. All Practice of Pharmacy modules throughout the programme are structured around the core competencies of the PSI Core Competency Framework (CCF) and are designed to deliver expected curriculum learning outcomes including professionalism, decision-making, teamwork, communication, health advocacy, leadership, management, scholarship and research, as elaborated in the CCF. The placement modules in Years 4 and 5 are also integrated around the core competencies of the CCF.

iii. Meeting the standards

Standard 1 – The Professional Degree Programme Provider and Mission

The School of Pharmacy (SoP) at UCC has as its mission and educational philosophy a commitment to the development of pharmacists educated to the highest academic, professional and ethical standards, preparing them for critical patient-focused roles in healthcare provision as well as the pharmaceutical industry, creating highly skilled researchers capable of generating new knowledge of ultimate benefit to patients and encouraging life-long learning. This will be achieved by the provision of a spiral and integrated MPharm curriculum. The new mission statement was judged to be more patient-centred and outward facing, with a greater stress on the importance of ethical standards required in the education of pharmacy students and highlighting the professional behaviour aligned to the PSI Core Competency Framework (CCF) upon graduation.

The School of Pharmacy, as part of the College of Medicine and Health (CoMH) has its strategic goals integrated into the strategic plans of the CoMH and the University. Additional goals specific to the SoP include e-learning with novel teaching methods, developing research and postgraduate programmes, developing and implementing a patient-focused MPharm programme, staff development and training in teaching and learning, income generation and promoting the School by engaging with external stakeholders (e.g. the public, alumni).

Staff and students are made aware of the importance of patient safety and the Code of Conduct highlights the importance of this. Pharmacy students must comply with conduct and behaviour standards as laid out in the UCC CoMH Fitness to Practise (FtP) Policy. After the paper-based review the team had required that evidence of the primacy of patient safety be provided. Published procedures now exist and students are introduced to the concept and responsibilities of FtP in Week 1 of Year 1, when the Head of School (HoS) in his presentation to incoming MPharm students, stresses the responsibility of students in the care and safety of patients and the importance of patient confidentiality prior to all placements. In addition, the School now has a Fitness to Practise Committee and developed a Patient Safety Risk Register (held by the School's Administrator) where FtP issues can be logged. Students must declare their FtP on an annual basis during registration and the School assesses and monitors it on a continuing basis. [NB. Such a chronological log of concerns relating to patient safety is separate to those concerns relating to the Affiliation for Pharmacy Practice Experiential Learning (APPEL)-organised activities].

The Team had required clarification as to the understanding by the Head of School and UCC that by awarding the accredited degree, the Head signs the students off as Fit to Practise and to have their names entered in the Register of Pharmacists. Letters received by the PSI Registrar from the Heads of the SoP and CoMH, confirmed that they were cognisant of this.

The original documentation provided by the School, showed the Key Performance Indicators (KPIs) were mainly for research, while the KPIs for teaching were stated to include-: greater demand for MSc courses, enhanced involvement in EU Programmes, receiving teaching awards and obtaining recognition as a centre for CPD delivery. The Team considered these

KPIs to be too brief and agreed that it be a requirement that they be rewritten, to be more specific and include details of metrics, timescales and monitoring, plus placing greater emphasis on student progress and patient-centric outcomes. Subsequent documentation provided by the School detailed KPIs relating to student intakes, progression, retention, awards and patient-centric outcomes and added implementation of a world-leading patient-focused MPharm degree programme, maintaining a demand for this course among secondary school students and an increased demand for the course from international students. Although the Team had originally agreed that monitoring the performance based on research (RQR) within the School and UCC was to be commended, there was a requirement for a full Teaching Quality Review (TQR) with KPIs to be provided. This Quality Review, including the TQR, will be overseen by the UCC Quality Promotions Unit (QPU), which has prioritized the School and which was due in May 2016. The Team agreed and in view of this, an update in relation to the further development of the KPIs by 31 December 2016 and prior to the next on-site visit should be a requirement.

The Team had previously agreed that there was a requirement for the provision of a more fully developed Strategic Plan, taking account of the importance of monitoring students to ensure their achievements are aligned to the CCF. A revised Strategic Plan was submitted which reiterated the School's Mission, its position and strategic goals within the CoMH and UCC, and the importance of research and academic collaboration to drive research-inspired teaching. It also stressed in the School's Educational Philosophy the importance of life-long learning, multi-disciplinary delivery, inter-professional education and initiatives to optimize the delivery of patient-centred care in line with the CCF. KPIs were included and designed to drive progress in research, teaching and income generation. From the documentation provided and discussions with School staff at the on-site visit, the team was pleased with progress in the delivery of the curriculum. It was clear that there is a commitment to excellence in teaching and learning being applied to an increasingly integrated course and excellent vision and leadership in the delivery of all educational activities. The Team agreed that this requirement has been met.

The Team recognized that the establishment, development and implementation of the Affiliation for Pharmacy Practice Experiential Learning (APPEL) initiative is a vital part of the plans for the 5-year integrated degree in all three Schools and a copy of the Consortium Agreement between UCC, RCSI and TCD was submitted. At the on-site visit the Team was informed as to progress in staffing, budget strategy, administration and assured support by UCC. A National Coordinator had been appointed, four staff are employed in the Dublin-based office and Practice Educators were being appointed in each of the Schools. As much of the teaching will require internet access, the IT strategy between the three Schools was currently being evaluated.

Conclusion: The Team was confident that this standard will be met, subject to a **requirement** that an update in relation to the development of the School's KPIs be delivered by 31 December 2016. This is because the School will further develop its KPIs in relation to quality assurance following the outcome of the QR.

Standard 2 – Leadership, Organisation and Governance

The management structures within UCC show the Governing Body as the ultimate authority, with the Academic Council having responsibility for the University's academic affairs and the Academic Board as the senior Standing Committee of Council. There are four Colleges within UCC, one being the College of Medicine and Health (CoMH). Each College is responsible for the transaction of all academic business pertaining to it. Five schools operate within the CoMH, one being the School of Pharmacy which has responsibility for the delivery of the integrated MPharm Degree Programme. The School is managed using a committee structure with the School Board as the main policy and decision-making body and which reports to the CoMH Board. All staff members are members of the School Board. The HoS reports to the Head of College on management matters and to the College Council or Faculty on academic matters. Although the HoS has ultimate responsibility for School management, including finance, support in these aspects is given by the UCC Finance Analyst. UCC School structures do not allow for a Deputy Head.

To ensure patient safety and stress the importance of Fitness to Practise (FtP), Pharmacy students are subject to the University's and CoMH's FtP policies. They are introduced to the expectations and requirements of being a pharmacy student and the pharmacy profession by a presentation by the HoS on entry to the degree programme. Students must also sign a Code of Conduct declaration and obtain Garda clearance prior to entry. Throughout the 5-year programme FtP concepts, including patient safety and dispensing accuracy, are reiterated and assessed annually. When placements in patient-facing situations are undertaken, students are supervised by PSI-registered pharmacists. To underpin patient safety, the School has a Fitness to Practise Committee in association with the UCC FtP Committee. A Patient Safety Risk Register had also been established which is retained by the School Administrator. This register allows for a chronological log of FtP issues to be noted, but, as confirmed at the on-site visit, to date no issues had arisen requiring further action and all declared health-associated issues having been resolved. The Team was informed that mechanisms are in place to ensure that students are fit to go into placements, that they have achieved the required learning outcomes and assessment standards, by repeating assessments if necessary. Students cannot progress to placements until all vaccination programmes have been completed and the College Student Health Service will inform the Head of School of any student non-compliance issues.

The current HoS was considered by the Accreditation Team to be very well-qualified and in a position to give appropriate leadership to the School. A Professor of Clinical Pharmacy Practice was appointed to the position of HoS in 2013 having been a staff member since 2004. He is a PSI-registered pharmacist with extensive pharmacy and research experience, at national and international levels.

To foster teaching, learning and research, the School already has well-established relationships with many other professional units both within UCC and externally. Internal collaborations include teaching of MPharm modules by staff from other UCC schools and departments, as well as co-teaching of pharmacy students with other CoMH students. Such interprofessional learning sessions will continue to be arranged with final year medical students at various Cork university teaching hospitals. The School already has active research collaborations and two joint appointments with university teaching hospitals, as

well as projects with the CoMH, the College of Science, Engineering and Food Science (SEFS), as well as other Schools of Pharmacy in Ireland and the EU. Although the team considered the School to have made good progress in this area it was unclear how teaching would be pharmacy-focused where modules are service-taught. Similarly, the interprofessional education (IPE) and teaching strategy for the programme required clarification. Following discussion at the on-site visit, the Team considered that the strategy required further development to ensure that greater interdisciplinary and interprofessional approaches are in place to equip students for their professional roles. The Team considered that this matter will be addressed as part of a requirement that a revised Teaching and Learning Strategy (see Standard 4) be provided by 31 December 2016.

The School already also has well-established practice-based links with community pharmacies, University Teaching Hospitals and pharmaceutical companies. Such collaborations are further built around student placements during the five years of study, which the School proposes will be coordinated and monitored through APPEL. A number of teacher-practitioners currently teach clinical pharmacy practice to students using AVU equipment, simulated patients and co-teaching with students of other professions.

It was clear to the Team that the Programme complies with the legal and ethical framework for pharmacists both at national and European level and that the University has policies and procedures in place to ensure equality of opportunity which are reflected in the cohort of students entering the degree programme. Students enter the MPharm programme through various routes (Central Admissions Office (CAO), as mature students, Disability Access Route to Education (DARE), the Higher Education Access Route (HEAR) and the overseas student allocation) and related data were supplied. The Team was pleased to note that the School is looking at initiatives which would further support students financially and provide further mitigations in the event of hardship, should these arise.

The School provides student information and data to the PSI in its Annual Report. The Team considered that the data management system in place in the School under the aegis of the University to be robust, with no deficiencies in the central data storage and back-up systems described.

It was clear from the documentation provided that the Head of School has ultimately accountability for the management of the School with responsibility for informing the University and the PSI of any identified risks as well as signing the students off as fit to practise upon graduation. To ensure this, the School has now developed a Patient Safety Risk (FtP) Register, formed a Fitness to Practise Committee which, in conjunction with the CoMH and University FtP Committees, will deal with any FtP issues and competencies. Meeting the FtP requirements is a condition of students passing the annual examinations.

The School provided a Curriculum Plan for all five years of the course, with domains of the CCF mapped to module codes, a list of MPharm modules and module coordinators, module descriptors and a student handbook, as well as a diagram showing horizontal and vertical integration and spirality of disciplines.

Conclusion: The Team was confident that this standard has been met.

The School currently has a core academic staff of 18, 10 of whom are registered pharmacists, as well as 12 cognate academic staff who provide service-teaching. The School also has seven teacher-practitioners and two joint appointments with local hospitals. The University Management Team Operation (UMTO) had sanctioned the appointment of additional Practice Educators (two 0.5 FTE) for appointment in April and October 2016, who will liaise with those in the other schools of pharmacy and APPEL to ensure practice placements are available in sufficient numbers and of appropriate quality in Years 4 and 5 of the new MPharm programme. The Team had previously considered that any failure to appoint new staff in the coming years would increase pressure on existing staff and be a significant risk to the delivery of the new programme. The School was therefore required to develop a Staffing Strategy and subsequently supplied the team with a Resource Statement showing the current and projected Staffing Complement. This highlighted the recruitment of additional staff including: a joint appointment with Medicine of a Professor of Pharmacology; an IT Technologist (0.5 FTE) in June 2016; a lecturer (1 FTE) in October 2016; two lecturers (1 FTE and 0.5 FTE) in October 2017 and a Senior Lecturer (1 FTE) in October 2019.

Although the current core of academic staff co-ordinate most of the modules and provide most of the teaching, the School is still dependent on service-teaching by staff from other departments. To ensure correct pharmacy-orientation of modules, discussions were held with non-SoP staff service-teaching MPharm modules, indicating to them the course requirements for pharmacy students. A greater understanding of student requirements was achieved and many modifications to module contents were made or practicals newly designed. Greater pharmacy-orientation in service-taught modules is exemplified by the introduction of three cases from one "Pharma Family" where teaching is from different angles, more multifaceted and interdisciplinary. Examinations and Boards of Studies also meet annually to ensure correct alignment of modules to the School's mission, while the HoS briefs all members of the Programme Board with regard to curriculum and professional matters pertaining to Pharmacy as well as assessment of pharmacy students. All new curricula of professional programmes delivered within the CoMH, of which Pharmacy is a part, now conform to the requirement of a competency-based, patient-centred approach. The current core staff of the School are those that have successfully delivered the four-year BPharm since 2003. They are research-active, have presented research findings nationally and internationally, published extensively and engage in research-led teaching. Collaboration with health care providers and the pharmaceutical industry ensures that staff maintain their knowledge and competency levels. Nine core staff have completed formal postgraduate training in teaching and learning and have been encouraged to develop novel teaching and learning methodologies (i.e. PebblePad). At UCC, all new teaching positions are required to hold a Certificate of Teaching.

Practice Educators (PE) facilitate placements and provide a structured support to students and tutors (preceptors) during placements. These persons are seen as the conduit between the students and tutors and will liaise with their counterparts in the other HEIs and APPEL to ensure sufficient practice placements are identified, monitored and quality assured. The School's resource statement shows that it will appoint a Practice Educator (two 0.5 FTEs) in

2016. From the documentation provided by the School, it was still unclear to the team whether the current ratio of PEs to students will be sufficient, and how practice placements will be coordinated and administered.

The School currently has seven Teacher-Practitioners (TP) associated with the delivery of the pharmacy programme and two joint appointments at local university teaching hospitals to facilitate the exposure of students to real patient scenarios and pharmaceutical care issues. To enhance the contextual understanding of different areas of pharmacy, the School already has in place visits to community pharmacies, hospital pharmacies with aseptic suites and local pharmaceutical industries. Numerous guest lecturers and patient groups also make presentations to students on their specific areas of expertise.

The School Staffing Complement tabled at the on-site visit indicated Support Staff currently comprised four Administrators (3.5 FTE), i.e. executive assistants, a School Manager and four technical staff (4.0 FTE), three of whom hold doctorates, to oversee laboratory sessions and research projects.

Tutor-pharmacists are PSI-registered pharmacists that arrange and oversee student placements within PSI-registered retail pharmacy businesses and hospital pharmacy departments. Currently 49 practice placements are organised in the Munster area and 70 placements are envisioned for the future. According to the documentation, from January 2017 the delivery and management of these placements will be taken over and coordinated by APPEL. However, oversight and responsibility of this will remain with the three HEIs.   At the time of the paper-based review, while cognisant that APPEL was still in the development phase, the team nevertheless agreed that there be a requirement for details of the measures proposed to ensure that APPEL recruits and trains tutors who meet its specification, and how APPEL plans to increase numbers of practice placement opportunities to service the needs of the three schools of pharmacy, to be provided at a future on-site visit.

The Team was informed at the on-site visit as to the progress with APPEL in staffing, budget strategy, administration and assured support by UCC. A National Coordinator had been appointed, four people were to be employed in the Dublin-based office and a Practice Educator was to be appointed in each of the Schools. In the event of a possible failure of APPEL, the Team was informed of the development by the School of a contingency plan. Nonetheless, the team agreed that the requirement relating to APPEL remain extant with UCC to provide an update by 30 September 2016.

The School of Pharmacy is housed in the purpose-built Cavanagh Pharmacy Building, which comprises four floors and houses equipment, teaching and research facilities. At the time of the on-site visit a tour of the facilities was carried out by a sub-group of the Team who considered the facilities to be bespoke for pharmacy education and with highly-regarded well-funded research facilities. The documentation stated that no deficiencies were identified with regards to infrastructure and equipment. Financially the School has to operate within the budget which it is allocated by the CoMH on an annual basis. Any budgetary requests are channelled through the College Financial Analyst and should any potential problems become apparent through the School's Risk Register, these can be discussed at the CoMH Executive. The Team noted the strong financial commitment on the

part of the University to the development of Pharmacy and the new programme. The School considered the financial resources to be adequate and has the Risk Register in place which, when reviewed periodically by the School Executive, would highlight any potential risks.

Conclusion: The Accreditation Team was confident that this Standard will be met, subject to the **requirement** that an update with details of the measures proposed to ensure that APPEL recruits and trains tutors who meet its specification, and how APPEL plans to increase numbers of practice placement opportunities to service the needs of the three schools of pharmacy be provided by 30 September 2016.

Standard 4 – Curriculum

The 5 year integrated MPharm curriculum was designed to enable students meet the Core Competency Framework for Pharmacists. Originally the Team considered that the course lacked clarity as to its horizontal integration and spiral nature and was uncertain how the introduction of Year 5 was likely to influence this spirality. The team also considered that the module descriptors lacked detail, making it difficult to judge the actual anticipated student experience. The School subsequently provided a new Curriculum Map for all five years, mapping the modules to CCF domains, behaviours and competencies. An updated list of MPharm modules with coordinators was provided, as was the Book of Modules available to students on the website. A diagram intending to show the horizontal and vertical integration of the course, with spirality of disciplines was also supplied. However during the on-site visit the Team considered that further clarity on the spirality of the curriculum would be helpful to students and staff, and agreed it be a requirement that the Teaching and Learning, and Assessment Strategies be rewritten.

The Head of School in his presentation to incoming MPharm students introduces the meaning of professionalism with regard to appearance, behaviour, conduct, and so on, and stresses each student's responsibility as to the confidentiality, care and safety of patients. Although professionalism, legal and ethical behaviour with relevant assessments were already embedded and developed in modules, the new Curriculum Map showed more clearly how they are mapped to the CCF domains. The team was however still uncertain about how students' communication skills in patient care contexts were developed and assessed. Information provided showed that students were encouraged from the beginning of the course to actively listen and to communicate with each other and their peers through oral presentations of class work, group projects, video recorded OTC role-plays, OSCEs and shadow placements. However, the Team considered that in the rewritten Teaching and Learning, and Assessment Strategies there be a requirement to more clearly demonstrate the development of communication skills in patient care contexts.

The curriculum has embraced the emerging roles of the pharmacist within the context of societal and professional changes by including practice modules on the importance of health literacy in patient care as well as the theory and practice of the multidisciplinary nature of public health. The School considers that the contemporary roles of pharmacists are covered in pharmacy practice and pharmacy core skills modules as well as in placements in Years 4 and 5. The changing role of the pharmacist in response to professional changes is addressed in modules that underline the importance and necessity of lifelong learning and of the emerging role of pharmacists. Emerging pharmaceutical care technologies and treatment approaches are introduced to students in modules highlighting emerging drugs, personalised medicine and advanced therapies. In addition, during research projects students are encouraged to explore emerging trends in the practice of pharmacy through directed study. To ensure that the course is more patient-centred, the School now invites representatives from patient-advocate groups (Caring for the Elderly, warfarin, ostomy, stroke) to make presentations and discuss patient problems. The Team felt, that rewriting the School's Teaching and Learning, and Assessment Strategies in line with the requirement above will ensure a greater clarity in articulation around how patients are involved in student learning and assessment throughout the course.

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In the development of the new curriculum many modules were rewritten and developed to provide students with basic scientific principles and an integrated understanding of the main pharmacy disciplines. The documentation stated that the curriculum provided students with horizontal and vertical integration within and across these disciplines. From this the School considered that students would gain the knowledge and experience that would facilitate their understanding of the key regulatory and scientific aspects of pharmacy and allow them to comprehend and be responsive to developments in pharmaceutical services, practice and patient care. In terms of interprofessional learning, a number of lectures in Years 1 and 2 are co-taught with students of other healthcare professions, while in Years 3 and 4 tutorials are held in more structured hospital settings. Some joint continuous assessments are planned. Although the delivery of the curriculum appeared to have moved away from categories of discipline, with some interdisciplinary teaching, the Team was not convinced that the curriculum delivery was truly interdisciplinary. The team agreed that the requirement for the Teaching and Learning, and Assessment Strategies to be rewritten will allow the school to demonstrate more clearly its approach to delivering curricular integration and spirality in a patient-centred context.

Students are told of the importance of assuming responsibility for their own learning needs from their entry to the programme. To help in this, new students are paired with Year 2 Pharmacy students and are assigned an academic SoP staff member as a mentor to support and assess their development and learning. To encourage independent learning, learning from other students and also from more experienced peers, system-based modules are introduced in Years 3 and 4. These include clinical- and practice-based workshops facilitated by experienced practising staff members and teacher-practitioners. Students are asked to critically reflect and summarise the previously supplied documentation during the workshop session, and debate the material with their fellow students.

The new MPharm curriculum was restructured to provide students with a course that enables them to not only meet the CCF requirements but also to expose them to research. This exposure is achieved throughout the course through research-led and informed teaching, research core modules and projects, and peer-research seminars and events. The School also has pharmaceutical industry partners that take students on summer placements, although at present only 6-8 students secure industrial placements. While on their 8-month patient-facing placement in Year 5 students will undertake a research project module (30-credit, 600 hour) in compliance with the NFQ Level 9 degree requirements.

Practice placements are now organised throughout the five year programme. Students themselves organise and complete a compulsory one-day practice placement in community pharmacy during Year 1. Prior to undertaking a placement the student must complete and sign the SoP Student Declaration form which is retained by the School Administrator. They must also give information as to location, name of facilitator pharmacist and complete a placement manual. The School receives tutor feedback via a standardised form.

The three HEIs have collectively agreed that the practice placements will occur in Year 2: two weeks (Semester 2, January - March); in Year 3: two months (During summer vacation July and August); in Year 4: four months (Semester 1, September to December) and Year 5: eight months (Semester 2 and 3, January to August). The organisational issues and quality assurance of these placements will be overseen by APPEL as laid out in the draft consortium

agreement, but the team agreed that it was clear that each School of Pharmacy and HEI remains accountable for the quality of delivery. If the HoS or the FtP Committee consider a student to be unfit/unready for placement, their placement will be deferred until this situation has been resolved. This may result in a student having to repeat a year. All decisions can be appealed through School and UCC procedures.

From the documentation provided, the curriculum is in compliance with the PSI (Education and Training) (Integrated Course) Rules 2014 (S.I. No. 377 of 2014) and on completion of the programme the person can competently practice as a pharmacist (Article 45(2) of Directive 2005/36/EC). Students will receive well over the 3,000 hours (120 ECTS) of training that is directed or supervised by staff of the School and other cognate departments, making the curriculum compliant with Directive 2013/55/EU and Directive 2005/36/EC on the recognition of professional qualifications.

Conclusion: The Team was confident that this Standard can be met subject to the **requirement** that the Teaching and Learning, and Assessment Strategies be rewritten. The Team agreed that it should be a **requirement** that an update be submitted by 31 August 2016 and the completed document by 31 December 2016.

The Team agreed that it should be a **requirement** in conjunction with the drafting of the above strategy documents, that it be made clear how students' communication skills are to be developed and assessed in patient-centred care contexts, that further detail be provided of patient involvement in students' learning, including how students will gain confidence in dealing with patients and also that further detail be provided in relation to the delivery of the curriculum by interdisciplinary teams in a patient-focused manner.

Standard 5 – Teaching and Learning Strategy

A previous condition of accreditation was that a separate Teaching and Learning Strategy Document be provided to the team. The new strategy document stated the undergraduate curriculum is delivered in a spiral and integrated manner, with four thematic areas providing students with the necessary foundation of scientific and professional knowledge on which to scaffold the core skills which will allow them to become competent pharmacy practitioners in line with the CCF. The four main thematic areas covered in the course are: the practice of pharmacy; design and manufacture of medicines/ drug delivery systems; chemistry and medicinal chemistry; actions and uses of drugs, medicines and other products. The course is modular with module descriptors specifying the subject matter, learning objectives and competencies mapped to the intended learning outcomes. At the on-site visit, the Team became aware from discussions surrounding the approaches taken that the documentation provided did not adequately reflect all that is currently undertaken at UCC and required rewriting. The Team also felt that the spirality aspect of an integrated curriculum was not adequately implemented early enough in the programme. As a result, the Team agreed that it be a requirement that UCC review the current Year 2 modules as part of the redrafting process required under Standard 4, with a view to adopting principles of integration as are currently adopted from Year 3.

To create an optimal learning environment for the student and take account of different learning styles, the curriculum includes a blend of teaching strategies. Through assignments, research topics, oral presentations, literature reviews and research projects, the students are expected to have sufficient initiative and motivation to achieve active and self-directed learning and acquire the skills required to become lifelong learners. To emphasise the position of the pharmacist as part of the healthcare team pharmacy course modules are devised and delivered by inter-disciplinary teams, and for some modules pharmacy students are co-taught with students of other related healthcare professions, while in Year 4 students take inter-professional workshops with medical students. The School's assessment strategy includes a number of assessment methods including: formative, continuous and summative for each module across the years to ensure students have achieved their learning outcomes. Some inter-professional assessments are planned for the future. To ascertain teaching and course quality, student feedback is obtained through online surveys, verbal and written feedback and through the staff-student committee.

To gain experience of the practice of pharmacy and appreciate the practical application of professional, legal and ethical standards in a variety of workplace settings, students will undertake visits and placements in community, hospital and in the pharmaceutical/manufacturing facilities during the degree course. The MPharm aims to integrate the placements strategically with the students' course work to contextualise their learning while giving them responsibility for their own learning. The School's teacher-practitioners are involved in teaching clinical pharmacy practice throughout the five-year course using newly installed AV equipment, OTC workshops and OSCE-style sessions. An electronic platform has been introduced for students to map competencies, record reflections and conduct a learning needs analysis. This e-portfolio using the PebblePad system should encourage students to take ownership of their learning and develop a culture of reflective self-assessment to identify and direct their personal learning and assessment

needs. Students will be required to record reflective logs pertaining to modules, over time building a personal portfolio of their learning journey capturing needs and learning accomplishments, simultaneously inculcating a behaviour and culture of continuing educational and professional development. Through the processes of self-analysis and peer review, students will be encouraged to be reflective, develop self-awareness and be mindful of how they engage and communicate with patients. Through the use of videos of role-plays using patient-centred case-studies and scenarios, students should develop their consultation, counselling and communication skills. Additional communication workshops within the programme focussing on difficult situations will further support students in their development of appropriate behaviours around treating others with sensitivity, empathy, respect and dignity in line with the CCF. Prior to practice placements in Year 5 the use of OSCE assessments will require students to competently demonstrate these abilities. Although the Team agreed that procedures were in place in the curriculum to allow students to develop in their consultation, counselling and communication skills, it was still unclear where and how a student develops these skills. As a result, the Team agreed that the requirement under Standard 4 to rewrite the Teaching and Learning and Assessment Strategies will provide enhanced clarity and will reflect the current approaches taken to ensuring student communication skills are suitably developed.

Many members of the core teaching staff in the School are registered pharmacists, ensuring that the course ethos and content is pharmacy-focussed. During the design of the new MPharm programme, discussions took place between SoP and non-SoP staff to clarify the exact requirements of pharmacy students. Contents of modules were redesigned to emphasise and contextualise the pharmacist's role and professional obligations. The teacher-practitioners employed in patient-facing roles who contribute to teaching in a number of pharmacy practice and clinical practice modules, also ensure that the content and context is relevant and current. Practising pharmacists, who frequently visit as guest lecturers to complement the material in specific modules, also illustrate the relevance to the working environment. The Annual Pharmacy Programme Board meetings and curriculum review meetings also facilitate curriculum discussions. The employment of some non-pharmacy staff (Microbiology, Biochemistry) on the new course has allowed for a greater engagement with the new course requirements. More meaningful links with other disciplines were also established by other joint appointments (e.g. Pharmacology, Chemistry), while non-pharmacist staff are now encouraged to become members of School Committees.

It was unclear to the Team if modules were taught by SoP registered pharmacists with contemporary community, hospital or academic experience. Examination of the UCC School of Pharmacy Book of Modules showed that coordination and delivery of these modules was by registered pharmacists on SoP staff. To ensure professionalism and pharmacy practice are taught by pharmacists and to underline the commitment of the University to the new MPharm programme, the employment of Practice Educators (two x 0.5 FTE) is in progress, as well as agreement to fill Lecturer positions in Clinical Pharmacy and Pharmacy in the future. Tutor Practitioners are already part of the SoP staff as experts in experiential learning.

To emphasise the importance of professionalism from the start of the programme, all students must read and sign the Student Declaration which highlights their responsibilities

as well as what is expected of them in respect of the code of conduct and confidentiality. This is re-emphasised prior to undertaking site-visits in community pharmacy and hospital settings. At the start of each academic year students also complete a declaration in respect of health and safety. The Team had previously questioned the adequacy of the monitoring systems in place relating to patient safety or FtP, how the FtP of students was to be monitored and how the School would ensure that once APPEL was in place, that any breaches in the code of conduct would be fed back to the School. The School now has a Fitness to Practise Policy with Terms of Reference, a FtP Committee, Procedures and alignment to the CCF, a SoP Patient Safety Risk Register with FtP monitoring and chronological log (distinct from APPEL), with a link to the UCC FtP policy. An annual report of the students' FtP declarations will be prepared and presented to the School's FtP Committee and any actions taken by the HoS will also be reported to the Committee and logged on the Patient Safety Risk Register. Regarding FtP issues between the SoP and APPEL as per the Consortium Agreement the Governance structures, these are being established.

Conclusion: The Team was confident that this Standard will be met subject to the **requirement** that, as part of the process of drafting the Teaching and Learning Strategy documents required for Standard 4, the current Year 2 modules be reviewed with a view to adopting principles of integration as are currently adopted from Year 3 and also that they more clearly articulate how communication and counselling skills are developed.

Standard 6 – Assessment Strategy

The MPharm programme has been evaluated and approved by the UCC Academic Development and Standards Committee and meets all institutional regulations. It has also been benchmarked against other disciplines within UCC as well as national and international Schools of Pharmacy. The documentation regarding the School's Assessment Strategy indicates that a number of assessment methods are used including: formative (diagnostic and reflective), continuous, summative and professional competency using CAPA scores. Tools used include end-of-semester formal written examinations, mid-term MCQ and short answer examinations, practical, laboratory and calculations-based examinations, marks for performance in laboratory sessions, workshops and site visits, group projects, presentations and OSCEs, placements, final year projects, written papers, oral examinations and self-reflection and peer review. From Year 1, students are introduced to the CCF standards, and are required to maintain and submit a self-reflective e-log of behaviours and competencies via PebblePad. In Years 2 to 5 students will be observed and assessed in laboratories, tutorials, workshops and placements. In Year 3 pharmacy students are co-taught and jointly assessed with medical students. All students are given clear guidance of professional expectations and informed of the assessment formats and procedures. Since many School teaching staff are registered pharmacists they ensure that teaching and assessment takes place in a pharmacy context. For those areas, taught by non-pharmacists, an external examiner with relevant experience will be appointed. Throughout the programme practice skills such as numeracy, accuracy, problem-solving, team-working and communication, are assessed through a range of laboratories, workshops, mid-term and end-of-year written papers. Students undertaking small group projects learn to develop team working and communication skills. To further develop these they regularly make presentations to their peers and undertake role-playing exercises. These skills are assessed when grading projects, workshop exercises and in OSCEs.

Professional outcomes will now include assessment of e-portfolio work with a formal competency assessment being carried out in Year 5 by preceptor pharmacists. This assessment is based on the current model within the National Pharmacy Internship Programme (NPIP). All students will have to achieve a CAPA level 4 in all behaviours prior to being eligible to sit the national Professional Registration Examination (PRE) which will be run on a collaborative basis by the three HEIs. The assessment procedures and progression from year-to-year are documented in the UCC School of Pharmacy Book of Modules, College Calendar and Marks and Standards. In advance of each assessment, students are advised by the assessor on the expected performance and learning outcomes for that specific assessment. To stress the School's commitment to patient safety, the School now has the FtP Patient Safety Risk Register [distinct from APPEL]. Extra criteria have also been added to the University Marks and Standards statements, e.g. for Year 1: "To pass the First university examination and progress to second year, a candidate must: obtain an overall aggregate pass of 50% across all modules and levels; obtain a pass in each of the modules to obtain a value of at least 50 credits; obtain a mark of not less than 45% in any remaining modules and have satisfied the Fitness to Practise requirements". According to their FtP Committee's Terms of Reference, it is empowered to impose one or more outcomes on a student as deemed necessary. The Team considered that despite the information presented, it was unclear how the pass criteria are judged and what happens if a good-performing student

causes an adverse effect in a patient-facing situation.

The University-wide appeals procedures are appropriate and robust. Where a student is not satisfied with the grade awarded and wishes to make an appeal, UCC has procedures and protocols in place. Appeals are sent directly to the University Examinations Appeals Officer and then forwarded to the School. Appeals are examined on an individual basis by an independent panel made up of academic staff from throughout the University, with feedback being obtained from the teaching staff concerned. Students receive copies of all correspondence given as part of the appeals process. Students who fail summative assessments and professional competency/practical assessments within modules, will be offered a review of the examination scripts and marks and can discuss their results with the staff involved.

The College Examination Board enables a transparent review of grades and any inconsistency or trends year-on-year can be identified. Modular grades are discussed annually at the School of Pharmacy Board of Studies meeting. Individual grades and statistical analysis of grades across modules are entered for each assessment element on the DMIS system and presented to the internal and College Examination Board for discussion and approval. *Viva voce* examinations in the final year are conducted by external examiners. Assessment issues highlighted at examination boards are reviewed and resolved by the Module Coordinator, the Teaching and Curriculum (T&C) Committee or the School Board. Any inconsistencies in an individual student record are corrected and any necessary improvements are fed back to the Module Coordinator and to the School T&C Committee for action. Although assessment procedures and protocols, including reports from external examiners, appear robust, it remained somewhat unclear to the team how risks are identified, monitored and acted upon.

Conclusion: The Team was confident that this Standard will be met, subject to the **requirement** of the delivery of an updated Assessment Strategy. This will be undertaken in conjunction with the process of redrafting the strategy documents as required at Standard 4.

Standard 7 – Quality Assurance and Enhancement

The quality assurance mechanisms in place within UCC and the School of Pharmacy ensure the robust development and implementation of the MPharm degree programme. The role of the independent Quality Promotions Unit (QPU) and the School will continue throughout the development and implementation of the degree while the quality assurance role will also be enhanced in the coming years by APPEL.

The School is managed using a committee structure with the ultimate governance and decision-making residing with the School Board. Although the responsibility for the delivery of the MPharm programme resides in the SoP Board, a number of other committees report to the Board, including: Health and Safety, Research and Graduate Studies, Promotion of Pharmacy, Teaching and Curriculum, MPharm Programme Board and School Executive. The Staff Student Committee reports to the Teaching & Curriculum (T&C) Committee while the Fitness to Practise (FtP) Committee reports to the UCC FtP Committee. All curriculum changes/module changes must be approved by the School's T&C Committee, prior to approval by the School Board. From here modifications are reviewed by the T&C Committee of the COMH prior to submission to the UCC Academic Board. The Head of School is ultimately accountable for academic leadership, as well as for the financial and infrastructure management.

The independent Quality Promotions Unit (QPU) and the School monitor quality throughout the delivery of the degree. The School currently assesses attainment of the educational philosophy through a variety of mechanisms including student feedback, student evaluations forms, preceptor evaluation forms and examination grade of registered students. How students are assessed and quality assured by tutors during practice placements appears to remain a challenge. The Team was informed at the on-site visit that tutors will be trained to better understand the required student behaviours, what skills need to be learned and exactly how students should be assessed. The introduction of PebblePad could now allow for more interaction between tutor and student. A full Quality Review (QR) for the School, to be overseen by the QPU, was agreed and results from the May (2016) evaluation are awaited.

Ongoing evaluation of the curriculum will be carried out by staff, students and trainers/preceptor pharmacists, who will all contribute to quality assurance and enhancement processes. Although the individual Schools retain and have responsibility for the QA of their programmes and modules, APPEL has responsibility for overseeing the quality of placements. Explicit, transparent and standardized approaches for the review and evaluation of practice placements need to be agreed by all parties and an instrument for gathering the perspectives of students and preceptors requires co-development. APPEL will have responsibility for operating these processes on behalf of the Schools and will do this by administering the co-developed instrument and analysing data received. Responses to feedback received through APPEL will be agreed by the three institutions and quality improvement initiatives implemented through a collaborative approach. A number of APPEL staff are now in place and the identification of placements and the relevant quality assurance will be of paramount importance for these staff. Despite the information received, it was still unclear to the Team how the three schools of pharmacy are to decide if

the improvement initiatives that are implemented across the three schools have been standardized, and if there is a contingency plan in place if some improvement plans are deemed to have been unsuccessful in one particular school of pharmacy.

Key performance indicators (KPIs) are decided by the School Board, while the UCC Board of Studies evaluates the standard of modules. The KPIs currently used by the School to assess quality of teaching and learning were considered to be too brief and the accreditation team agreed that there is a requirement that they be rewritten. The new KPIs (including those for APPEL) will need to be more patient-centred and include patient encounters over five years of the course, as well as reflective portfolios, patient logs and mapping of students to the CCF and OSCEs. In order to design robust standards, benchmarking will be undertaken against other disciplines within UCC and other national and international Schools of Pharmacy.

Student proficiency, knowledge and understanding are to be tracked via a range of assessment methods, with competency-based assessments included throughout the five years of the MPharm programme. The attainment of core competencies will be formally assessed, primarily by pharmacist preceptors in the practice settings. Demonstration of each behaviour within the required competencies will be evaluated by a summative CAPA in which the student must demonstrate competency at a minimum level 3 (in Year 4). The final appraisal in Year 5 will be completed as part of the principal practice placement. Students on this placement will be required to demonstrate a Level 4 preceptor rating on all applicable competency standards in order to obtain the credits for the relevant module and be eligible to participate in the PRE.

UCC policy ensures that a robust mechanism for external examination is currently in place. External examiners annually review the content of the course and the quality of the graduates to ensure the degree is appropriately focused, relevant and meets standards. The School's T&C Committee and Board annually review the external examiners' reports with their recommendations being considered, discussed and implemented where possible. For Years 4 and 5 the three Schools will appoint joint external examiners to oversee and quality assure the practice placement components of the integrated course. Examiners will be required to work collaboratively to assure and enhance the academic standard of the programme, including the PRE. This will be reviewed further when APPEL is fully operational.

 All proposed material changes will be submitted to the PSI prior to implementation, as per current practice and protocols with the accredited Bachelor degree programme. A documentation management system is in place to record and retain all changes to the professional degree programme and is tracked by the School of Pharmacy on a continual basis.

UCC and the School are committed to a quality delivery of the MPharm programme, with a Teaching Quality Review currently on-going. However, while SoP staff are subject to appraisal, quality evaluation systems for service teaching require clarification. The School and UCC are also accountable for the quality assurance of all practice placements within the course. The QA of these placements will be overseen on behalf of the School by APPEL in coordination with the School's Practice Educator and the other two Schools. The newly

appointed National Coordinator of APPEL will implement appropriate QA mechanisms and the School will work with them to ensure that such processes are initiated. The National Coordinator will oversee the creation and establishment of tutor/preceptor training programmes, which may be done in association with the Irish Institute of Pharmacy (IIOP).

Conclusion: The Team was confident that this standard will be met.

Standard 8 – Students

UCC admission criteria for students entering Pharmacy are clearly laid out. The University has equality procedures in place to ensure non-discrimination of staff and students. The students enter the programme via a number of routes including the majority who enter via CAO, as well as a smaller number of students meeting entry requirements in terms of education and language proficiency. Occasional requests for advanced entry to Pharmacy allows admission only to Year 2 of the programme. Once a student accepts a place, they register and complete a Garda vetting form and their FtP declaration. Each year-group is provided with a handbook which covers topics such as student communication and support, requirements for attendance at lectures/ tutorials and assessment processes, while an induction during the Year 1-orientation highlights aspects of the course, such as: the student code of conduct, fitness to practise and immunization requirements.

University governance of examinations is through Marks and Standards. To progress to the next year of study students must pass all components of all modules and failed elements may not be carried through to the next year. Annually, repeat students are formally notified of the modules they are required to repeat and meet with the Head of School and Year Coordinator at the beginning of the academic year. Support is offered by the relevant Module Coordinator. Appeal procedures are in place. Good communication between staff and students is encouraged and students may raise issues at the Staff Student Committee. The School's Teaching and Learning Strategy is shared with students via Blackboard.

For student support and guidance all UCC Colleges operate a personal mentoring scheme independent of discipline-specific guidance; each Year 1 student is assigned a personal tutor. More discipline-specific issues can usually be dealt with via class representatives, mentors, year and module coordinators or the Staff/Student Committee. More personal issues or issues unresolved using this process might be escalated to the Head of School. In addition to local School support, a range of student services are available within the University. Academics within the School can also direct students if necessary to the relevant UCC student support service. The School has a staff member nominated as Disability Support Officer, who assesses students in terms of needs once they are identified by the University Disability Support Office. One staff member is also assigned to carry out needs assessments of students who enter UCC through the DARE route and follow their progress for the duration of their programme.

In addition to the general orientation address from the UCC President, the University also runs specific orientation sessions for international students and for students who enter the University through the HEAR route, the UCC+ programme. Part of the students' orientation involves working on scenarios as part of a healthcare team with peers from dentistry, medicine, nursing, speech and hearing sciences and occupational therapy. The orientation day also provides an introduction to the VLE for new students. Pharmacy students receive a separate presentation by the Head of School and Year Coordinator, a copy of the first year handbook and a tour of the School facilities.

Students throughout the programme are actively encouraged to seek work experience in relevant professional or voluntary settings to enhance their personal development and leadership abilities. To voice their views or experiences, students are also encouraged to

communicate with relevant year or module coordinators, either directly or via their class representatives. The School's Staff-Student committee which meets twice a year might discuss any identified issues which can then be further resolved by the T & C Committee and the School Board. In order to provide input on the design, implementation and review of the new integrated programme student representatives are invited to attend the relevant parts of the School's T&C Committee meetings and School Board. Any complaints arising are dealt with on a case by case basis and, in addition to the UCC's Complaints procedures, the School Complaints Policy and log for students is now in place which will be reviewed by the SoP Executive, School Board and Student Representatives. How students secure and maintain practice-placements throughout the programme will be a function of APPEL and will need to be monitored. To address any issues a student encounters regarding progress in the course, health, financial, career, etc. the School, as well as UCC, maintains counselling services.

Conclusion: The Team was confident that this Standard will be met.

Being cognisant that the functions of securing and maintaining placements are to remain the functions of APPEL, the Team agreed that these need to be clarified well in advance of the commencement of the first placement and will re-visit this issue at the next on-site visit.

Summary and conclusions

The Accreditation Team agreed to recommend to the Council of the Pharmaceutical Society of Ireland that the recognition and approval of the Five-Year Fully Integrated Master's Degree Programme in Pharmacy provided by University College Cork for an initial period of two (2) years be confirmed with a further focussed on-site visit during the second year of delivery.

Standard 1: The Professional Degree Programme Provider and Mission

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.

Conclusion: The Team was confident that this standard will be met, subject to a **requirement** that an update in relation to the development of the Schools KPIs be delivered by 31 December 2016. This is because the School will further develop its KPIs in relation to quality assurance, following the outcome of the Quality Review, which includes a Teaching Quality Review.

Standard 2: Leadership, Organisation and Governance

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.

Conclusion: The Team was confident that this standard has been met.

Standard 3: Resource

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.

Conclusion: The Accreditation Team was confident that this Standard will be met, subject to the **requirement** that an update with details of the measures proposed to ensure that APPEL recruits and trains tutors who meet its specification, and how APPEL plans to increase numbers of practice placement opportunities to service the needs of the three schools of pharmacy be provided by 30 September 2016.

Standard 4: Curriculum

The curriculum must be planned to deliver an integrated 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.

Conclusion: The Team was confident that this Standard can be met subject to the **requirement** that the Teaching and Learning, and Assessment Strategies be rewritten. The Team agreed that it should be a **requirement** that an up-date be submitted by 31 August 2016 and the completed document by 31 December 2016.

The Team agreed that it should be a **requirement** in conjunction with the drafting of the above strategy documents, that it be made clear how students' communication skills are to be developed and assessed in patient-centred care contexts, that further detail be provided of patient involvement in students' learning, including how students will gain confidence in dealing with patients and also that further detail be provided in relation to the delivery of the curriculum by interdisciplinary teams in a patient-focused manner.

Standard 5: Teaching and Learning Strategy

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.

Conclusion: The Team was confident that this Standard will be met subject to the **requirement** that, as part of the process of drafting the Teaching and Learning Strategy documents required for Standard 4, the current Year 2 modules be reviewed with a view to adopting principles of integration as are currently adopted from Year 3 and also that they more clearly articulate how communication and counselling skills are developed.

Standard 6: Assessment Strategy

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.

Conclusion: The Team was confident that this Standard will be met, subject to the **requirement** of the delivery of an updated Assessment Strategy. This will be undertaken in conjunction with the process of redrafting the strategy documents as required at Standard 4.

Standard 7: Quality Assurance and Enhancement

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.

Conclusion: The Team was confident that this standard will be met.

Standard 8: Students

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.

Conclusion: The Team was confident that this Standard will be met.

Being cognisant that the functions of securing and maintaining placements are to remain the functions of APPEL, the Team agreed that these need to be clarified well in advance of the commencement of the first placement and will re-visit this issue at the next on-site visit.

The Provider should note that the Council of the Pharmaceutical Society of Ireland regards the report in its entirety as the view of the PSI on the provision, and that the Provider should take all the comments of the team into account in any development of the provision in response to this report.