



Accreditation Policy:  
National Pharmacy Degree Programmes  
(MPharm)

Version	Updates	Updated By	Date
1.0	Approved by Council		September 2019
1.1	Annual reporting process updated for approval by RPP Ctee	Andrea Boland	1 December 2021

## Contents

Introduction .....	4
National Pharmacy Degree Programmes: (MPharm) .....	4
Accreditation Standards .....	5
Accreditation .....	5
First time accreditation .....	5
Continued accreditation.....	6
Compliance visit .....	6
Evaluation Reports .....	6
Accreditation .....	8
Conditions .....	8
Management of Conditions.....	9
Deferrals.....	9
Management of Deferrals .....	10
Council Refusal .....	10
Indicative Timeline .....	11
Complaints .....	12
Accreditation Teams.....	12
Accreditation Visit Schedule.....	14
Annual Reporting.....	14
Notification of Changes .....	15
Accreditation Fees.....	16
Monitoring and Review .....	16

## Introduction

The Pharmaceutical Society of Ireland (PSI) is a public body established in law to protect the health, safety, and wellbeing of patients and the public by regulating pharmacists and pharmacies in Ireland.

Among its functions, the PSI promotes and ensures high standards of education and training for pharmacists. One of the ways the PSI achieves this is by determining the standards for pharmacist education and approving and keeping under review national pharmacy degree programmes through an accreditation process.

This document outlines the accreditation policy and process and what can be expected on an accreditation visit.

The PSI has issued four documents to support the accreditation process:

- Accreditation Standards for the Integrated Pharmacy Degree Programmes (Accreditation Standards)
- Guidance to accompany the Accreditation Standards
- Self-Assessment Report Form
- First Time Application for Accreditation

The documents are accessible on the PSI website.

## National Pharmacy Degree Programmes: (MPharm)

National pharmacy degree programmes in Ireland are governed by the [Pharmaceutical Society \(Education and Training\) \(integrated Course\) Rules 2014 as amended](#). These programmes are Level 9 (in the National Framework of Qualifications (NFQ)), five year MPharm degree programmes, comprising of experiential learning placements throughout the five years of education and training. In particular, statutory experiential learning placements are undertaken in Year 4 (4 months) and Year 5 (8 months) of the programme. Candidates who successfully complete an accredited MPharm are eligible to apply for [registration](#) with the PSI.

## Accreditation Standards

The pharmacy programmes are governed by the PSI's Accreditation Standards. Each programme must be compliant with the PSI standards.

Further information on the Accreditation Standards is available on the PSI website.

## Accreditation

There are two types of accreditation processes:

- First time accreditation
- Continued accreditation

### First time accreditation

If a university, or equivalent higher education institution, proposes to offer a Master's degree programme in pharmacy (MPharm), it must:

- Make an application to the Registrar
- Demonstrate the proposed programme conforms to the Accreditation Standards by submitting a Self Assessment Report

The institution may be asked to provide additional information following on from consideration of the application.

A visit will be carried out to the institution by approved 'visitors' known as the accreditation team. A first time accreditation visit seeks to assure that the pharmacy programme meets the accreditation standards. This is a detailed visit and is typically 2-3 days in duration.

The PSI Council will consider an application for first time accreditation within a period of 120 days from the date the application was received.

Accreditation can be granted for a period of not greater than 5 years.

## Continued accreditation

A continued accreditation visit seeks to review whether an accredited pharmacy programme continues to meet the Accreditation Standards.

An accreditation team will visit the institution. These visits are typically 1-2 days in duration.

A Self-Assessment Report (SAR) must be submitted by the institution in advance of a continued accreditation visit.

Accreditation can continue to be granted for a period not greater than 5 years.

## Compliance visit

Once a programme is accredited, the PSI Council may also direct for a compliance visit to be carried out. The purpose of a compliance visit is to provide assurance that the programme continues to meet the Accreditation Standards and/or any conditions which may have been set by the PSI Council. A compliance visit may occur at the discretion of the PSI Council, for example, in response to a recommendation of the accreditation team, an annual report submission, should a concern arise, or as a condition of accreditation. Compliance visits are notified.

Compliance visits typically last 1 day and may involve a smaller accreditation team (3-4 members).

Documentation to be submitted by the institution in advance of a compliance visit may include, but is not limited to:

- Annual reports since accreditation
- Update on any recent material changes to the programme
- Update in respect of any conditions which were previously set by the Council

Following a compliance visit, an accreditation team will make a recommendation to the PSI Council, as outlined in the section below on evaluation reports.

## Evaluation Reports

Following each accreditation or compliance visit, a report shall be drafted in a prescribed format, by the accreditation team.

The evaluation report is an evidence-based report and shall note whether, in the opinion of the accreditation team, the minimum standards have been met, will be met subject to condition(s), or have not been met. The evaluation report will also include commentary on areas of good practice and give qualitative feedback to programme providers.

The accreditation teams for first time accreditation, continued accreditation, and compliance visits may make any of the following recommendations to the Council of the PSI in their report:

### Accreditation

- Grant its recognition and approval for the proposed Masters degree in pharmacy
- Continue to grant its recognition and approval for the Masters degree in pharmacy

### Conditions

- Grant its recognition and approval for the proposed Masters degree in pharmacy subject to certain conditions that they shall specify
- Continue to grant its recognition and approval for the Masters degree in pharmacy subject to certain conditions that they shall specify

### Deferral

- Defer its decision on the recognition and approval for the proposed Masters degree in pharmacy pending the resolution, to the satisfaction of the Council, of such issues of concern arising from their visit and consultation, touching upon the requirements of these Rules that they shall specify
- Defer its decision on the continued recognition and approval for the Masters degree in pharmacy pending the resolution, to the satisfaction of the Council, of such issues of concern arising from their visit and consultation, touching upon the requirements of these Rules that they shall specify

### Refusal

- Refuse to grant its recognition and approval for the proposed Masters degree in pharmacy on the basis of reasons which they shall specify

- Refuse to continue to grant its recognition and approval for the Masters degree in pharmacy on the basis of reasons which they shall specify

The institution shall be offered the opportunity to correct any errors of fact in the evaluation report, and may also provide a response to the considerations of the accreditation team. A meeting between the institution and a member of the accreditation team may be scheduled, if necessary, to provide clarification on any recommendations and conditions. The Council shall review and consider the report of the accreditation team, and any response from the institution when making their final determination.

A copy of the report is provided to the institution and will be published by the PSI.

The evaluation report(s) from preceding years may also be made available to accreditation teams at the time of continued accreditation visits.

## Accreditation

In instances where the accreditation team recommends to the PSI Council to grant its recognition and approval or continue to grant its recognition and approval of a Master's degree in pharmacy, the evaluation report will be forwarded to the institution. The institution will be requested to report on any factual inaccuracies. The institution will also be invited to respond to the report. In cases where factual inaccuracies are reported, the PSI will liaise with the accreditation team to finalise the report. Once finalised, the report, and any response, will be considered by the PSI Council.

## Conditions

In some instances, an accreditation team may recommend to the PSI Council to grant its recognition and approval or continue to grant its recognition and approval of a Master's degree in pharmacy, subject to certain conditions. An accreditation team may recommend certain conditions for any issue(s) or area(s) of concern that they have in relation to the programme. An accreditation team should only recommend conditions when these issue(s) or area(s) of concern are significant, and where the accreditation team would not be happy to recommend the programme for accreditation should these matters not be satisfactorily addressed by the institution.

In instances where conditions are recommended by an accreditation team, the evaluation report will be forwarded to the institution who will be requested to report on any factual inaccuracies. In cases where factual inaccuracies are reported, the PSI will liaise with the accreditation team until the report is finalised. The institution will also be invited to respond to the report, indicating how it will address any proposed conditions, where relevant. Once finalised, the evaluation report and any response from the provider will be considered by the PSI Council.

### Management of Conditions

The PSI will follow-up on any conditions which are set by the Council, and may do so in consultation with the Chairperson and/or other members of the accreditation team to ensure that the conditions are satisfactorily addressed. The PSI Council will consider the evidence supplied by the institution.

Any action taken in circumstances where Accreditation Standards are not deemed to be satisfactorily addressed will be at the discretion of the PSI Council and taken in line with the [Pharmaceutical Society \(Education and Training\) \(integrated Course\) Rules 2014 as amended](#).

### Deferrals

In some instances, an accreditation team may recommend to the PSI Council to defer its decision on the recognition and approval of, or on the continued recognition and approval of a Master's degree in pharmacy, pending the resolution, to the satisfaction of the Council, of such issues of concern, touching upon the requirements of the Pharmaceutical Society (Education and Training) (integrated Course) Rules 2014 as amended. The issues of concern shall be specified.

An accreditation team may recommend 'Deferral' in circumstances where they identify any issues of concern of such significance that they would be unwilling to recommend the programme for accreditation until the concerns have been satisfactorily addressed by the institution.

In instances where a deferral is recommended by an accreditation team, the evaluation report will be forwarded to the institution who will be requested to report on any factual inaccuracies. In cases where factual inaccuracies are reported, the PSI will liaise with the accreditation team until the report is finalised. The institution will also be invited to respond to the report indicating how it will address any areas of concern. Once finalised, the evaluation report and response from the institution will be considered by the PSI Council.

## Management of Deferrals

Where the Council determines to 'defer' the accreditation or continued accreditation of a programme, the PSI will follow-up on any areas of concern and may do so in consultation with the Chairperson, and/or other members of the accreditation team, to ensure that the concerns are satisfactorily addressed. The PSI Council will consider the evidence supplied by the institution.

## Council Refusal

If the Council proposes to refuse the accreditation or the continued accreditation of a pharmacy programme, it shall notify the institution. The notification will include:

- A statement of the proposal of the Council
- A statement setting out in detail the reasons on which the said proposals are based
- A statement that the institution has the right to make representations to the Council in response to the notification, within such reasonable period of time as specified by the Council

The Council shall consider any representations it receives, and either confirm or alter its proposal to refuse to accredit/reaccredit a programme. The Council shall determine whether additional time may be provided to an institution, to address concerns, should it consider it appropriate.

## Indicative Timeline

Below is an indicative timeline for accreditation visits:



Please note that the timelines indicated are approximate and may vary. In instances where the PSI Council defers a decision on the accreditation of a programme, or proposes to refuse to grant the accreditation of a programme, it may be necessary to extend the timelines above.

## Complaints

If a member of an accreditation team or an institution wishes to make a complaint or raise a concern about any aspect of the accreditation process, they should adhere to the following process:

- **Member of an accreditation team:** Members of an accreditation team should approach the Chairperson in the first instance. If the individual feels that the Chairperson cannot/will not address their complaint/concern, the individual should contact the PSI Education Manager or PSI Head of Education and Registration. Similarly, if the complaint/concern relates to the Chairperson, the individual should contact the PSI Education Manager or PSI Head of Education and Registration. If the complaint/concern relates to an employee of the PSI, the individual should contact the Registrar of the PSI.
- **Institution:** If an institution has a complaint/concern about a member of the accreditation team or the accreditation process, it should contact the PSI Education Manager or PSI Head of Education and Registration. If the institution feels that the PSI contact person cannot/will not address their complaint/concern, or the complaint/concern relates to a PSI contact person, the institution should contact the Registrar of the PSI.
- **Institution Staff Member/Student:** If a member of staff or student from an applicant institution has a complaint/concern about a member of the accreditation team, the accreditation process, or a representative from the PSI, the individual should contact the Head of School or may approach the PSI Education Manager or the PSI Head of Education and Registration directly. If the complaint/concern is not resolved in a satisfactory manner, the Head of School, staff member, or student should contact the Registrar of the PSI.

All complaints will be dealt with on a case-by-case basis.

## Accreditation Teams

The PSI will establish an accreditation team once it receives an application for accreditation or continued accreditation. The role of the accreditation team is to evaluate the programme on behalf of the PSI and make a recommendation to the PSI Council on whether or not it should accredit the programme. Therefore, it is important the accreditation teams have the appropriate knowledge, skill and expertise to undertake this role.

Accreditation teams are typically comprised of 5-6 members, including a Chairperson. The PSI will also appoint a deputy Chairperson. The deputy Chairperson will be required to fulfil the role and responsibilities of the Chairperson in instances where the Chairperson is unable to do so.

The team may include representatives from the following sectors:

- Patient advocate/ Public interest representatives
- Accreditation/Quality Assurance/Regulatory/Risk/Governance/Teaching and Learning experts
- Pharmacy academics with experience in developing and/or accrediting pharmacy degree programmes
- Experience in academic management roles such as Head of School/Head of Faculty/Head of Department
- Experience in programme management roles such as programme manager/programme leader
- Experience in student leadership roles e.g. Dean of students, or equivalent
- Pharmacists practicing in Ireland with recent experience acting as a tutor pharmacist (preceptor/senior preceptor)
- Non-pharmacy healthcare practitioners involved in the development and/or delivery of regulated health practitioner education and training
- Specific expertise, as needs may arise

The team may be accompanied by a rapporteur.

Accreditation teams are independent from the PSI. However, members of the PSI may also attend accreditation visits for the purposes of providing context, legislative and administrative support to the accreditation team members.

Candidates to the accreditation teams are nominated to a panel following an open expression of interest process. This occurs when required and at least once every five years. Candidates with the most relevant experience will be nominated to the panel.

Candidates must abide by the *PSI Roles, Responsibilities and Conduct of Accreditation Team Members* which includes *PSI Guidelines on Conflicts of Interest for Members of the Accreditation Team* and the *PSI Confidentiality Undertaking*. Candidates must complete and return all relevant forms prior to participating on an accreditation team. The maximum term that any individual may hold on an accreditation team is five consecutive years at the same institution.

All accreditation team members are provided with full training and induction with regard to the legislation, the Accreditation Standards, and PSI policies and procedures prior to engaging in any accreditation activity on behalf of the PSI.

### Accreditation Visit Schedule

The schedule for an accreditation visit may vary.

A proposed schedule will be sent to the institution 4 weeks in advance of the visit.

The visits typically involve discussion sessions with:

- Executive leadership of the Institution
- Students
- Teaching faculty
- Inspecting the institution's facilities or the facilities of any associated bodies (e.g. clinical facilities, experiential learning placements)

### Annual Reporting

Once a programme is accredited, the institution is obliged to provide a report to the Registrar of the PSI on an annual basis.

This report is due by October of each year and is required to report on any changes to the programme, its delivery, assessment, and any other matters which may be considered relevant to the Accreditation Standards. Such matters may include but are not limited to:

- Strategic changes
- Changes in senior level management/leadership/recruitment
- Changes to key personnel involved in the effective delivery of the programme
- Changes to infrastructural or financial resources
- Outputs of quality assurance processes
- External examiners reports
- Curriculum map

The report must also provide data on

- Student intake
- Student achievement and progression
- Student fitness to practice issues, or equality and diversity matters arising

The annual report is reviewed by the Chair of the most recent accreditation visit to the institution, or member of that team, and will issue a brief commentary to the Registrar.

The annual report and response from the Chair, and/or member(s) of the accreditation team as appropriate, will be considered by the Registrar and the Regulatory and Professional Policy Committee (RPP). The RPP Committee exercises oversight of the annual reporting process on behalf of the Council of the PSI.

In instances where matters of concern are highlighted in the annual report, those matters will be considered and if possible, resolved by the Chair and/or member(s) of the accreditation team and the institution. Any communication between the Chair and the institution will be facilitated by the PSI. If matters of concern cannot be resolved by the Chair, and/or member(s) of the accreditation team, and the institution, the Registrar will consider the matters of concern raised and may:

- attempt to resolve the matter with the institution prior to it being considered by the RPP Committee, and/or
- request the RPP Committee to consider the matters of concern directly and advise on what action, if any, is appropriate.

The annual report(s) from preceding years may also be made available to accreditation teams at the time of continued accreditation visits.

### Notification of Changes

At any stage during the approved accreditation period of a programme, an institution is required to notify the PSI of any proposed material change to its programme, to the delivery of the programme, or to the institution which might reasonably be considered relevant to the continued recognition and approval of the programme. The institution should include in its notification, an explanation as to how it would enable the requirements and conditions, upon which recognition and approval has

been granted, to continue to be met. Failure to notify PSI may, at the discretion of the PSI Council, result in one of the following outcomes:

- Continue to grant its recognition and approval for the Masters degree in pharmacy subject to certain conditions that it shall specify
- Defer its decision on the continued recognition and approval for the Masters degree in pharmacy pending the resolution, to the satisfaction of the Council, of such issues of concern touching upon the requirements of the Pharmaceutical Society (Education and Training) (integrated Course) Rules 2014 as amended that they shall specify
- Refuse to continue to grant its recognition and approval for the Masters degree in pharmacy on the basis of reasons that it shall specify.

### Accreditation Fees

The PSI does not currently apply a fee to institutions applying for accreditation. Twelve months' notice will be provided prior to the introduction of a fee.

### Monitoring and Review

The PSI, as part of quality assurance practices, will regularly monitor and review its accreditation policy and processes to help ensure they remain fit for purpose. As part of its monitoring and review processes, the PSI will survey accreditation team members and institutions who apply to the PSI for accreditation and will amend, where necessary and where legislation allows, its accreditation policy and procedures. These surveys will be confidential. A report on the findings of the survey will be published on the PSI website.

Similarly, the PSI endeavours to ensure the accreditation teams it establishes have the appropriate knowledge, skill and competencies to undertake this role. As part of its monitoring and review process, the PSI will require accreditation teams to partake in a team evaluation exercise. The team evaluation will be a survey-based exercise focusing on the performance of the accreditation team. Its purpose is to indicate any additional information and training the PSI should introduce to assist accreditation teams in their role and help ensure the effectiveness of the accreditation process.