Evaluation Report of the Five-Year Fully Integrated Master's Degree Programme in Pharmacy

University College Cork (UCC)

February 2020

Contents

Introduction

This document should be read in conjunction with the relevant PSI Accreditation Standards as published on the PSI website at www.psi.ie .

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 report concerns the ongoing accreditation of the five-year fully integrated Master of Pharmacy degree delivered by the School of Pharmacy, University College Cork (UCC) against the relevant PSI Accreditation Standards that were 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 confirmation by the Higher Education Institute (HEI) that a graduate fully demonstrates the competencies necessary to apply to enter the register of pharmacists kept by the PSI.

In June 2017 the PSI Council had approved and recognised the programme provided by UCC for a period of three (3) years, commencing June 22, 2017 and expiring June 22, 2020.

To be further approved and accredited by the PSI Council and in accordance with the Pharmacy Act 2007, University College Cork (UCC) School of Pharmacy submitted the following document to the PSI for consideration:

- Self-Assessment Report (SAR)

The SAR was supported by additional documentation and evidence, details of which can be found in Appendix 1.

A preparatory meeting for the onsite accreditation visit at UCC took place on 4 February 2020.

The onsite accreditation visit took place at the UCC School of Pharmacy (SoP) on 5 February and 6 February 2020. The full agenda for the onsite accreditation visit is available in Appendix 2.

Accreditation Team

Name	Role	Affiliation
Professor Jason Last	Chair - Chairperson and Education/Accreditation Expertise	University College Dublin (UCD)
Professor Colin Davidson	Subject Matter Expertise	University of Central Lancashire (UCLAN), UK
Professor Chris Langley	Subject Matter Expertise	Aston University, UK
Dr Norma Ryan	Quality Assurance Expertise	Self-Employed Higher Education Consultant
Emer Gibbons	Community Pharmacist/Tutor Pharmacist	Hickey's Pharmacy

The accreditation team was supported by;

Damhnait Gaughan	Head of Education and Registration	PSI
Ciara Dooley	Education Manager	PSI
Andrea Boland	Education Standards Officer	PSI
Matthew Maltby	Rapporteur	

Declarations

Dr Norma Ryan worked as a fulltime staff member in UCC, from 1978 and retired in 2012 and worked part-time for UCC on preparations for UCC institutional reviews until middle 2013.

Recommendation of the Accreditation Team to the PSI Council

> Continue to grant its recognition and approval for the Masters degree in pharmacy

Summary of Commendations

The accreditation team commends:

- the College appointment of a Vice Dean in Interprofessional Learning (Standard 2)
- the awareness of IPL and its importance amongst the student body (Standard 4)
- the school's commitment to ensuring its programme equips students with a forward-thinking and innovative perspective (Standard 5)
- town-hall meetings as an important forum for staff/student dialogue (Standard 8)
- the sense of community and belonging within the School supported by an effective and active mentorship system (Standard 8)

Summary of Recommendations

The accreditation team recommends:

- efforts continue to be made to improve the staff:student ratio (Standard 1)
- peer observation of teaching be incorporated into staff appraisal cycles (Standard 3)
- further development of interprofessional learning opportunities (Standard 4)
- the current leadership skills development and activities be more clearly and explicitly signposted to students across the programme (Standard 5)
- that UCC ensures there is feedback to students on all assessments and there is more explicit signposting of student feedback to ensure it is understood as such (Standard 6)
- staff performance and workload reviews take place more frequently, with a view to guarding against excessive workloads and assessing professional development (Standard 7)
- exploring the potential to deliver First Aid and resuscitation training to students prior to the commencement of placements (Standard 7)

Summary of Conditions

Not applicable

Evaluation of the Master Degree in Pharmacy (MPharm) Against the Accreditation Standards

Standard 1: The Professional Degree Programme Provider and Mission	Accreditation Team's Commentary
1. **The Professional Degree Programme Provider must engage in a systematic planning process and have a current strategic plan that facilitates achievement of the Professional Degree Programme Provider's mission, goals and objectives.** 1.1 The mission should include a clear statement of the educational philosophy including how the organisation will foster a culture that: (a) promotes professional behaviour among students, staff and all those contributing to the Professional Degree Programme; (b) is committed to the development of graduates who satisfy the requirements of the Core Competency Framework for Pharmacists; and (c) respects and supports the needs of diverse stakeholders, students, staff and all those contributing to the Professional Degree Programme. 1.2 There should be evidence that the mission, goals and objectives have been reviewed and validated by the Higher Education Institution (HEI) and should be demonstrably congruent with the mission of the HEI and are within the context of societal and professional changes occurring and contemplated. The mission statement should set out clearly the primacy of	University College Cork (UCC) has delivered Pharmacy programmes since 2003. The School of Pharmacy (SoP) is housed within the purpose-built Cavanagh Building and together with the Schools of Medicine, Dentistry, Nursing, Public Health and Clinical Therapies is a School within the College of Medicine and Health (CoMH). As is indicated in the CoMH strategy provided by the SoP for the purposes of accreditation, there is a clear cascade and consistency between CoMH and SoP of educational philosophy, mission, goals and objectives. Those of the SoP are steered by the overarching principles of the UCC Strategic Plan 2018/22 in the form of six thematic strands; - Global research. - Civic and community engagement. - Research-based teaching. - Employability. - Sustainability. - Inter-and transdisciplinarity. These themes act as key drivers to delivering the '*connected curriculum*' which is central to UCC's Strategic Plan. The SoP continues to develop its specific strategy, in keeping with the College plan which is to be launched in March 2020. The Head of School (HoS) in his dual role as Dean of Undergraduate Studies and HoS is well placed to link Strategy at a school and institutional level. The governance structures of the CoMH require all constituent Schools within it to further principles of connectedness and sustainability, themes which permeate the SoP's strategic planning at all levels and which were reflected in the HoS's presentation to the accreditation team during the onsite visit. The MPharm Programme mirrors these principles and is designed in such a way that it promotes professionalism amongst students and teaching staff, with a clear basis in the requirements of the Core Competency Framework (CCF), and is responsive to the need of its wide range of stakeholders, including students, teaching staff, the pharmacy profession and patients. The CCF is embedded within

	patient safety, care and well-being. This must be demonstrated by the existence of: (i) a chronological log of any concerns raised relating to patient safety and well-being that arise as a consequence of the educational process; (ii) clear and published procedures known to all staff and students to immediately review and address such concerns that may impact upon patient safety; (iii) a Fitness to Practise policy known to all staff and students to assure patient safety and public protection at all times; and (iv) an explicit recognition that by awarding a degree accredited by the Council of the PSI, the HEI is confirming that a graduate is fit to apply to have their names entered in the Register of Pharmacists.	the MPharm curriculum and is central to its continued development as the SoP shifts its focus towards a consolidation of the programme over the coming years. Patients are at the centre of the MPharm programme. For the purposes of the accreditation visit, the SoP provided a visual representation of the patient journey which illustrates how modules in each of the five years of the MPharm programme link to the CCF and how patient care is a central tenet of the programme in its entirety. In order to safeguard patient-centredness and patient safety, the SoP maintains a log of Fitness to Practise (FtP) concerns, supported by clearly signposted and published guidance and procedures that are frequently highlighted throughout students' academic progress through the School. FtP procedures are clear, and the accreditation team are satisfied that no conflicts of interest would arise in the event of the SoP instigating the relevant process. During the onsite visit, the HoS provided clear evidence of the students being familiar with mechanisms available in the event of raising concerns in relation to unsafe practice encountered during the course of experiential placements. Mechanisms are also embedded within APPEL protocols to allow for student 'whistle-blowing' and it was evident from a discussion with Years 4 and 5 students (undertaking experiential placements at the time of the onsite visits) that they were familiar with the appropriate channels to raise such concerns. This addresses a concern that emerged during the onsite visit undertaken by the PSI accreditation team in 2019.
1.3	The Professional Degree Programme Provider should have a published statement of its mission and goals and set out its key performance indicators (KPIs) and timescales for their implementation and review. This should include an explanation of how the Professional Degree Programme Provider will monitor and evaluate its performance against the goals and objectives of its strategic plans	Following successful completion of the MPharm programme of study, the SoP explicitly confirms to the Pharmacy regulator that its graduates are fit to apply to be entered in the Register of Pharmacists, thus fit to practise pharmacy in the State. The SoP's current strategy ends in 2020. To support the roll-out of the new CoMH strategy in March 2020, the SoP is currently developing its own, which will remain consistent with the pedagogy, mission and objectives of the CoMH. Key Performance Indicators (KPI) underpin and clearly link to the strategies thus far published. In response to feedback from the accreditation team following its compliance visit in 2019, KPIs have also been developed to allow for quality assurance to be appropriately undertaken of teaching establishments (TE) providing experiential learning placements. The KPIs are monitored on a regular basis to enable appropriate actions to be taken should performance demonstrably fall below optimum levels.

1.4	The strategic plan must include but need not be limited to:
	
	(a) Its mission and goals with associated KPIs;
	
	(b) The underpinning aims and objectives of the Professional Degree Programme Provider including clearly defined learning outcomes to demonstrate that at the end of the Professional Degree Programme, the graduate is competent to practise pharmacy in a patient-centred, professional and ethical manner, and demonstrates a commitment to lifelong learning;
	
	(c) A statement of the educational philosophy for the Professional Degree Programme and how it:
	   i. supports or assures that graduates will be prepared for entry to the profession of pharmacy including patient-centred practice in line with the Core Competency Framework for Pharmacists as established by the PSI Council from time to time;
	   ii. prepares graduates for practice as pharmacy professionals who will embrace lifelong learning; and
	   iii. provides structured experience of interprofessional working to facilitate team-work in the delivery of patient-centred care.
	
	(d) A commitment to excellence in teaching and learning methods;
	
	(e) A vision for leadership in practice, research and other scholarly activity and educational activities.
		KPI 7 specifies that the taught student/academic staff ratio should remain at 18:1. During the 2020 onsite accreditation visit, the accreditation became aware that currently the student/academic staff ratio is somewhat higher, currently lying at 20:1. The team are of the opinion that the KPI of 18:1 is somewhat high. The HoS of the SoP agrees: having benchmarked UCC against similar SoPs, it is clear that this is the case. The accreditation team recommends that measures are taken to redress this and bring the UCC SoP more in line with other Schools offering similar Pharmacy programmes. The accreditation team acknowledges that recruiting to newly created permanent teaching posts might lie beyond the direct influence of the SoP. However, the team would welcome efforts being made in this direction, which might include a review of the relevant KPI.
		
		The UCC SoP is committed to ensuring its teaching staff provide excellence in teaching and that the staff utilise the most effective and appropriate teaching methods. All new permanent members of staff appointed are recommended to complete a Postgraduate Certificate in Teaching and Learning in Higher Education, within three years. All School staff are active in supervising postgraduate research students in-line with the School's re-focus on maintaining its research output and there are considerable opportunities for the development of staff in terms of management and leadership. Early career teaching staff are assigned a mentor from within the School and during the 2020 accreditation visit, the HoS, as well as several staff members, confirmed that performance management is undertaken every two years in the form of a formal discussion with the HoS.

1.5	For a newly planned and/or recently established programme, the Professional Degree Programme Provider must provide a comprehensive strategy outlining the planning, development and implementation phases of the programme.	
Compliance with Standard:		The accreditation team is satisfied that this standard has been met
Commendations		
Recommendations		The accreditation team recommends; - efforts continue to be made to improve the staff:student ratio
Conditions		

Standard 2: Leadership, Organisation and Governance	Accreditation Team's Commentary

2. There must be clear management structures for the Professional Degree Programme with a schedule of roles and responsibilities, and a defined structure and process to show lines of accountability and authority for all those involved in the delivery of the Professional Degree Programme.
 	
2.1 The Professional Degree Programme must be planned and delivered by an identifiable organisational unit preferably a School or Faculty of Pharmacy ('the School'), which has responsibility for the Professional Degree Programme and associated resources. Furthermore the Professional Degree Programme must be planned and maintained through transparent processes and must clearly identify who is responsible for what at each stage.
 	
2.2 There must be effective systems in place to ensure that students:
 	
   (a) do not jeopardise patient safety and only do tasks under appropriate supervision;
 	
   (b) are monitored and assessed to assure they always work and perform safely;
 	
   (c) understand what fitness to practise mechanisms apply to them;
 	
   (d) are not awarded an accredited degree or placed into any part of the programme that involves access to patients, the public or confidential data, if they are considered likely to pose a risk.
	The governance structures within UCC are robust, transparent and clearly articulated. The SoP is a clearly defined School within the CoMH and retains full responsibility for the development, implementation and ongoing delivery of the MPharm programme. As evidenced in the organogram, Institutional Management Structures provided by the SoP prior to the accreditation visit, governance structures cascade from the UCC Governing Body, which retains ultimate oversight of the operation of the University. At a College level, standing committees (College Executive, College Council, Teaching and Curriculum, Research and Graduate Studies, Student Affairs and Fitness to Practise (FtP) Committees) meet fortnightly, and membership is drawn from each School within the CoMH. The SoP Head of School (HoS) sits on the CoMH Executive, while other members of staff sit on other College committees to represent the School on these decision-making bodies. Planning proceeds in a systematic and structured manner, with clear escalation points for decision-making.
	
	At School level, governance is exercised by bodies that mirror those of the CoMH. The School Board is the primary decision-making entity of the SoP, with relevant and appropriate committees reporting upwards. FtP and Social Research Ethics Committees meet within the SoP as required, but report directly in to the CoMH functions, to prevent conflicts of interest arising. Lines of responsibility and accountability are clearly defined.
	
	FtP protocols within UCC and the SoP are published on the School website. Students are subject to the UCC FtP Policy and they are regularly made aware of their responsibilities. FtP declarations are signed, and students are subject to Garda Vetting procedures prior to enrolment on the MPharm programme. The APPEL consortium's FtP protocols reflect UCC's FtP requirements. Students may only undertake tasks under the appropriate level of supervision whilst undertaking experiential placements and the assigned supervisors are integral to the monitoring and assessment of student practice, in patient-facing and non-patient facing contexts. Should FtP concerns be raised, the SoP maintains a confidential log, with procedures in place for the consideration of any issues emerging so appropriate actions can be taken. This supports the HoS completing the required FtP declaration at the point of graduation.
	
	Students are subject to the SoP Code of Conduct and also the APPEL Code of Conduct during their experiential placements to ensure that professionalism and an ethos of professional behaviour is maintained throughout students' progress through the programme.

| 2.3 | The Head of the School must be qualified to provide leadership in pharmacy professional education, including research and scholarly activities, and so be in a position to influence the HEI and the School policy in relation to pharmacy. In the event that the Head is not a pharmacist registered in Ireland, there must be an identified pharmacist registered in Ireland who can provide leadership in the practice and profession of pharmacy and have authority for effective advocacy for pharmacy within the HEI and be held accountable for the oversight of practice-based learning. This person must be at a senior level within the School and be registered in the Register of Pharmacists and thereby be familiar with, and subject to, the PSI statutory Code of Conduct. | Patients and their safety are central to the UCC programme. Taught modules have patient safety elements clearly embedded within, and these are clearly and explicitly aligned to the PSI CCF. There are considerable opportunities throughout the programme for students to become familiar with the risks associated with unsafe practice and thus, patient safety and the awareness of its criticality becomes inculcated as a matter of course from the first day of the first year of the programme. The Head of the SoP is a registered pharmacist and has been in post since 2013. Since 2018, the HoS has undertaken a dual role of HoS and Dean of Undergraduate Studies (UCC). The arrangements appear to function well; whilst maintaining oversight and responsibility for the SoP (hence the MPharm programme), the HoS is in a position of influence within the broader UCC strategic bodies.

As a prominent figure within the CoMH and also the university, the HoS has been able to highlight to the wider academic body recent developments within the SoP as the MPharm programme has been implemented. Ties between the SoP and the other CoMH constituent schools are strong and this has enabled the SoP to implement its ongoing strategy for developing and enhancing its programme of interdisciplinary teaching, interprofessional learning (IPL) and research. The CoMH has recently appointed a Vice Dean for Interprofessional Learning; this foregrounds the importance and significance of IPL throughout the university as a whole. The accreditation team view this appointment as a specific strength of the UCC provision. It is envisaged that this appointment will continue to ensure that IPL is further embedded within UCC and that the SoP will be in a strong position to enhance its IPL provision for the MPharm programme. |
| 2.4 | The HEI must support the development of suitable relationships between the School and other academic and service units of the HEI for instruction, research and practice-based and interprofessional learning. | |
| 2.5 | External relationships or collaborations with the pharmacy profession must be facilitated to foster the School's teaching, learning and research capabilities. The School should have access to, and arrangements with, HEI affiliated and other healthcare teaching facilities in support of the practice-based and interprofessional learning needs of the Professional Degree Programme [see also Standard 3.6(c)]. Wherever possible, collaborative approaches to practice-based placements must be used in conjunction with other HEIs in the State offering a pharmacy degree programme. | The MPharm programme at UCC integrates a range of experiential learning placements into the MPharm programme in all years. Those taking place in Years 2, 4 and 5 are administered by the APPEL consortium with UCC SoP oversight. Additionally, the SoP continues to develop links and collaborations with organisations that provide input to the programme, both in terms of accommodating off-site visits to practice settings in community and hospital pharmacies, industry and role-emerging practice contexts, and guest lecturers, seminars and workshops incorporated into the MPharm structure of modules. Collaborative approaches are firmly embedded within the SoP, and cross-disciplinary research initiatives within and out with the university provide additional and valuable insights into modern, progressive and future-oriented pharmacy practice for students.

The University is committed to ensuring equality of opportunity and fair access, with the relevant policies in place at an institutional level. Students enter the pharmacy programme through a number of routes, including Central Admissions Office (CAO), as mature students, Disability Access Route to Education (DARE), the Higher Education Access Route (HEAR) and an allocation of international students. Relevant policies ensure that where suitable and practicable, reasonable adjustments can be |

2.6	The Professional Degree Programme must comply with the principles of equality, diversity and fairness and meet all the requirements of National and European law as it relates to the education, training and qualification required for registration as pharmacists.	made to ensure students with a registered disability are able to undertake learning and practise safely, cases being assessed by the SoP in conjunction with the UCC Student Health and Occupational Health Services on a case by case basis accordingly. The School has also been awarded the Athena Swan (Bronze Level) award for its efforts in equality, diversity and inclusivity.
2.7	As part of the statutory annual reporting process to the PSI, the School must submit data on student intake, student numbers, student achievement and progression through the Professional Degree Programme with the School's commentary and analysis. The School must maintain a reliable, accurate and workable management information system in support of this.	The SoP maintains secure integrated data systems for managing and monitoring student data, including intake, attrition and progress information. These are governed by UCC-wide policies and protocols and are backed-up and stored accordingly, in-line with current best practice. This ensures the SoP is able to provide the regulator, the Pharmaceutical Society of Ireland (PSI), with the required student data as part of its annual reporting obligations.

The HoS is cognisant of his obligation to report issues and changes which may have a material (or other) impact on the successful delivery of the MPharm programme. The SoP maintained Risk Register supports this. |
| 2.8 | The Head of School has an obligation to report to the PSI:
(a) on key issues including any changes in resources that are pertinent to the delivery of the Professional Degree Programme; and

(b) at the point of graduation, a confirmation that each graduate has met the competencies in the CCF. In order to do this, the School must maintain, in accordance with any policy as approved by the PSI Council from time to time or any legislative provisions, an ongoing record of 'fitness to practise' matters and any other matters that could have a material impact on future fitness to practise when the student/graduate in the future is practising as a pharmacist. | As a result of the systems currently in place (data management and FtP log), the HoS is able to confirm to the PSI at the point of graduation each student's fitness to practise and that each graduate meets the competencies outlined in the PSI CCF. |
| **Compliance with Standard:** | | The accreditation team is satisfied that this standard has been met |

Commendations	The accreditation team commends: - the College appointment of a Vice Dean in Interprofessional Learning
Recommendations	
Conditions	

Standard 3: Resources	Accreditation Team's Commentary
3. 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	UCC is a state-funded university and operates within closely monitored financial resources. In recent years, financial constraints beyond the control of UCC have come to bear and these have filtered down to the SoP in terms of academic appointments and promotion of existing teaching staff. However, the school has become increasingly agile in its approach and during the 2020 onsite visit, it was clear to the accreditation team that the School staff are fully committed to meeting the challenges and continuing to deliver an MPharm programme which is at the forefront of pharmacy training.
3.1 Academic Staff The School must have a sufficient number of core academic staff and other teaching staff including professionally qualified staff such as teacher-practitioners, practice educators and tutor pharmacists, appropriately qualified, experienced and expert in pharmaceutical sciences and pharmacy practice. There must be an appropriate mix of academic staff practising as pharmacists in clinical practice including senior staff who can influence policy within the School and contribute to curriculum design and development, assessment design and development, and course management and coordination activities. This staff, full-time and part-time, must:	The University is strongly committed to the development of Pharmacy and the MPharm programme – the SoP continues to be closely involved with other CoMH programmes to advise on best practice in developing and delivering progressive, integrated approaches to professional programmes. The experience of developing and implementing the integrated MPharm programme means that the SoP is at the forefront of UCC's Connected Curriculum strategy. These collaborations have also yielded much in terms of the CoMH perspective on establishing, developing and evolving IPL opportunities. During the MPharm programme, students engage with students of dentistry, medicine, and speech and language therapy amongst others, in lectures, workshops and group activities that support the development of an enhanced sense of the wider healthcare team. The team noted on their tour of the purpose-built Cavanagh Building, in which the SoP is accommodated, that it is a modern teaching and research environment. The building houses practical laboratories, computer aided laboratories, a model pharmacy, lecture theatres and lecture rooms, as well as research space. There is an ongoing review of resources and a proposed programme of remodeling to ensure that less well-utilized areas of the building are more efficiently and appropriately deployed, expanding the current facilities to keep pace with plans for expansion of student numbers on the MPharm programme.
(a) provide the majority of teaching and learning support for the Professional Degree Programme. Where 'service-teaching' is identified as essential, there shall be a robust means of managing its integration into the Professional Degree Programme and ensuring that the teaching is oriented towards pharmacy;	The SoP has a core academic staff of 22.5(FTE). These are in the full range of academic levels, but it is notable that many post-holders are early-career academics. It is a requirement for newly appointed members of staff that they hold or are in the process of obtaining an appropriate teaching qualification. Whilst many of the SoP staff do hold teaching qualifications, the accreditation team is of the opinion that in order to further support members of staff in their teaching and to facilitate the sharing of best teaching practice, observation of teaching might be incorporated into the current cycle of staff appraisal, which currently takes place every two years (see Standard 7).
(b) individually and collectively, demonstrate a commitment to the mission of the School and to	During the onsite accreditation visit, the high level of staff commitment to delivering the MPharm programme was very apparent; the staff were characterized by the HoS as agile and it was noted by

the goals and objectives of the Professional Degree Programme and a continuing commitment to be effective teachers;

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

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

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

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

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

the accreditation team that workload for staff appears to be tending towards the high side when all activities of staff members are considered holistically. The HoS explained, however, that the School utilizes a workload planning tool that assures that the workload can be maintained at a sustainable level.

During the accreditation visit, the accreditation team was of the opinion that the number of core teaching staff within the School was towards the low side, resulting in a high student/staff ratio. The HoS concurred but highlighted the four recent appointments made to expand the School staff and indicated how continued efforts are being made to secure funding for additional positions to evenly spread teaching hours amongst the core staff. The HoS explained to the accreditation team that the university requires all new posts to be rationalised on the basis of a business case process. The development, consideration and review of such accompanying business cases means that the process of obtaining institutional approval for new School posts might take longer than is desirable.

The core academic staff are complemented by a broad range of teaching staff outwith the School and drawn from an appropriate range of cognate disciplines, a considerable number of Teacher Practitioners, in addition to clinical staff and external experts based within the organisations with which the School has established links. All staff contribute to the development of the MPharm programme and input into module and content design as part of the regular cycle of curriculum review. All content delivered on the MPharm is integrated into the programme overall and thus retains a pharmacy orientation; content delivered by staff outwith the School is developed in conjunction with the module coordinator, and staff drawn from within the SoP, to ensure all 'service teaching' is appropriately pharmacy-focused. The School is supported by an appropriately sized and qualified administrative and technical team.

During the accreditation onsite visit, the accreditation team were impressed with the enthusiasm, commitment and high levels of collegiality between staff members. There is a tangible commitment to delivering the programme to the highest standards and responding to shifts in contemporary pharmacy practice. This sense of community and collegiality extends to include extra-disciplinary members of staff, thus maintaining the appropriate patient focus.

The School nurtures a collegial atmosphere through its highly supportive academic environment. Many of the staff hold postgraduate Certificates in Teaching and Learning in Higher Education: it is a requirement for newly appointed staff members and is required also for the purposes of progression and promotion within the University. As the School realigns its focus with an enhanced emphasis on research, all staff are research active and publish frequently in national and international journals.

requirements as approved by the PSI Council from time to time. Evidence of the impact of professional development programmes should be demonstrated.	The School has a ring-fenced budget for staff professional development and all core staff can avail of CPD opportunities, both online and also managed by the HR function of UCC. This provides opportunities for the relevant senior members of the School to proactively develop and enhance their leadership and management capabilities.
3.2 Practice Educators The School must have a sufficient number of Practice Educators, in joint appointment positions with practice placement sites as practicable, who will provide the specialised teaching on the interface between the learning within the schools and that within the workplace and who will provide support to the students on placement and to their tutors.	Within the framework of the APPEL consortium, the School maintains two 0.5 FTE Practice Educator (PE) roles. The PE roles liaise with Training Establishments (TE), provide students with guidance and support prior to, during, and after, their experiential practice placements in Years 2, 4 and 5, ensure that preceptors and supervisors are appropriately trained and accredited, and also undertake appropriate levels of quality assurance (QA) in relation to the TEs. Additional funding has been secured to establish an additional 0.5FTE PE role in Cork and a further 0.5FTE PE/Practice support Pharmacist in Dublin. This is a unique organization and feedback from students in relation to their interactions with APPEL and the support afforded to them as they undertake their experiential learning places is wholly positive.
3.3 External Experts The School should ensure that relevant input from external specialist lecturers is provided to enhance the students' contextual understanding of specific areas.	The APPEL consortium was established between the three HEIs in the State providing MPharm programmes with the explicit remit of managing the experiential learning placements and ensuring that preceptors are appropriately qualified, registered, trained and accredited to do so. All experiential placements available to students within all three HEIs are sourced by APPEL, and tutor pharmacists, preceptors and supervisors engaging with the students are trained and accredited by APPEL according to predefined criteria. Prior to the onsite visit, the accreditation team were provided with an APPEL report that details the levels and frequency of training required before a tutor pharmacist can undertake the preceptor role within a TE. Preceptors supervising students undertaking their Year 4 and 5 placements assess student behaviours against the CCF and as such constitute an integral element of the overall assessment of students as they progress towards graduation. APPEL has been able to source an extensive number of placements in a full spread of geographic locations and practice settings, which assures the accreditation team that engagement with the profession continues to be undertaken profitably and in an appropriate manner.
3.4 Support Staff The School must have a sufficient number of support staff suitably qualified/trained and experienced to support its operation. This staff must have access to an organised development programme open to all support staff consistent with their respective responsibilities. Evidence of the impact of this programme should be demonstrated. Technical staff should be suitably qualified and trained and proficient in the operation and maintenance of scientific instrumentation and other equipment. Technical staff should take an active role in the preparation and delivery of laboratory practice sessions and projects and practice sessions and projects.	As indicated above, the SoP operates financially under stringently controlled processes overseen by the broader university protocols. The State funds part of the budget, with further funding derived from other sources. The recent economic climate has presented both the University and the School with some measure of financial challenge. However, the UCC process for business planning and budget allocation outlined by the HoS during the on-site accreditation visit gives assurances that the infrastructure and other resources are appropriately budgeted and proactively planned. The ongoing

3.5	**Tutor pharmacists** Pharmacists acting as tutors for the practice-placement elements of the programme must be of sufficient number, appropriately qualified and experienced and be professional role models with the knowledge, skills, attitudes and behaviours to effectively mentor, monitor and evaluate students.	regular monitoring of the School and APPEL Risk Registers support this and enable a suitably robust approach to contingency planning.
3.6	**Infrastructure and Financial Resources** (a) The School must have the financial resources necessary to accomplish its mission and goals; (b) The School must ensure that accommodation (including teaching rooms and laboratories), equipment, library facilities, IT (including appropriate interactive distance learning technology/VLE), subject specific IT specialist software (for example dispensing software), clinical skills facilities and other resources available to it are sufficient for the effective delivery and assessment of the planned Professional Degree Programme to the numbers of students in each year of the Professional Degree Programme and overall, and that the accommodation, equipment and facilities are safe to use and are properly maintained in a safe condition; properly taking account of the other teaching and research commitments of the School; (c) There must be policies and procedures to ensure that training establishments for the practice-placement elements of the Professional Degree Programme are appropriate for the delivery of this element of the Professional Degree Programme and meet any requirements as	

approved by the PSI Council from time to time, including any requirements relating to consistency of approaches to placements; (d) The School should have contingency plans, developed and documented, to cover any deficiencies in infrastructure, equipment or personnel that may arise in order to ensure the effective delivery of the Professional Degree Programme.	
Compliance with Standard:	The accreditation team is satisfied that this standard has been met
Commendations **Recommendations** **Conditions**	The accreditation team recommends that; - Peer observation of teaching be incorporated into staff appraisal cycles

Standard 4: Curriculum	Accreditation Team's Commentary
4. 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. 4.1 The curriculum must be progressive in dealing with issues in increasingly complex and inter-related ways so that graduates meet the Core Competency Framework for Pharmacists as established by the PSI Council from time to time and that they can practice safely and effectively according to the statutory Code of Conduct for pharmacists, and any other guidance and requirements as approved by the PSI Council from time to time. 4.2 Sufficient time should be allocated over the whole period of the Professional Degree Programme to enable the formation of an appropriate ethical and professional approach to practice and this process should begin early in the first year. From the beginning, the Professional Degree Programme must be delivered in an environment which places study in a professional and academic context and requires students to conduct themselves professionally. Appropriate assessment of the development of professionalism should take place throughout the Professional Degree Programme.	The UCC programme has been developed to train pharmacy practitioners who are committed to continuous reflective development and who acquire an in-depth knowledge of the science, and the skills and competencies underpinning professional practice in all contexts. The UCC curriculum is designed to achieve its outcomes through a learning experience that is incrementally integrated horizontally and vertically, taking Harden's integration framework in which integration is conceptualised as a continuum in which programme content spirals throughout (Harden, 2000), yielding a holistic understanding and demonstration of the competencies and behaviours required of the practising pharmacist. The course content is increasingly integrated vertically and horizontally as students progress through the programme. The SoP provided the Module Handbook prior to the on-site accreditation visit; all modules of the MPharm programme are outlined with details showing the credit weighting, content description, mode of assessment, module learning objectives and learning outcomes. The content in Year 1 is discipline-specific, and delivered in conjunction with teaching staff from within the relevant disciplines. It is interdisciplinary in nature and has been developed in a manner to retain Pharmacy specificity and focus, yet retaining an integrative aspect, which is then broadened and deepened during subsequent years of the programme. From Year 2, course content adopts a systems approach, and it is at this point that the curriculum becomes increasingly integrated, the systems perspective allowing clinical, practice and professional elements of pharmacy to be explored and developed. The School has developed the Pharma Family, a virtual family of all ages, whose maladies increase in their complexity and multimorbidity as the years of the course progress. The Pharma family, by means of a range of increasingly complex case studies, allows knowledge to be synthesized and applied with a view to arriving at the best outcome for the virtual patient. The accreditation team noted the strength of this approach, as it effectively reinforces and integrates knowledge from across the disciplines. Modules throughout introduce and develop aspects of pharmacy across the full spectrum of practice, embracing all practice settings and are designed to equip students with the knowledge and skills to enter practice across the range, including role-emerging practice and research. Professionalism is emphasized throughout the programme and students are obliged to sign the UCC and APPEL Codes of Conduct which underscore the importance of professional behaviour. Prior to the

4.3	The curriculum should embrace the scope of contemporary pharmacy practice responsibilities to patient-centred care as well as the emerging roles of the pharmacist within the context of societal and professional changes occurring and contemplated.	statutory experiential learning placements in Years 4 and 5, preparatory workshops highlight professionalism and how a lack of professionalism might manifest.

The SoP has developed several visual representations of the MPharm which demonstrate clearly and succinctly how each module of the programme develops the competencies and behaviours of the CCF, and how these relate to the patient journey. Modules are clearly mapped to the CCF and there are transparent and explicit links between the course content presented in each module to that in others throughout. |
| 4.4 | The curriculum must be designed, delivered and regularly reviewed to keep abreast of advances arising from policy and research and development in medical and pharmaceutical science and services. The scientific base of the curriculum must be of adequate depth, scope and quality and sequenced appropriately to provide both a foundation and continuing support for the intellectual and clinical objectives of the Professional Degree Programme. | The taught components of the programme are interspersed with a range of experiential placements and patient encounters which reinforce and enhance the content taught formally within the SoP. Experiential placements begin in Year 1 with introductory site visits to community pharmacy, hospital and industry settings. Throughout the programme, the experiential placements expand in scope and duration, leading towards the longer statutory placements of Years 4 and 5 (four- and eight-months duration respectively). Patient-facing and patient-encounter experiences are also features of the programme and ensure that students are able to regularly locate their learning outcomes within contemporary practice contexts in which the patient is the centre. The SoP continues to develop links with patient advocate groups for the purposes of guest lectures, workshops and events which address specific themes of direct relevance to pharmacy practice. The accreditation team find this aspect of the UCC programme to be a strength and the School's aspiration to expand the spectrum of patient encounters will enrich the programme further. |
| 4.5 | The curriculum must be delivered by interdisciplinary teams in order that the subject matter of the degree is integrated, and delivered in a patient-focussed manner. The student must be provided with the knowledge and experience that will facilitate an understanding of the key regulatory and scientific aspects of drug discovery, and the manufacture, preparation, quality control, distribution, actions, interactions and use, including, the evidence-based use, of medicines by patients and including health screening, health promotion, pharmaceutical care and the interprofessional nature of health and social care services. | The content of each module on the programme is overseen by a designated module coordinator, who is accountable for all aspects of its design, delivery, assessment, review and further development. There are clear procedures in place for this process: student feedback, external examiner judgments and assessment outcomes are integral to module review and refinement. The Teaching and Curriculum Committee comprises staff members across all disciplines and stakeholders of the SoP with one of its responsibilities being to respond to the evolution in pharmacy policy and practice by maintaining a curriculum that is up to date and reflects contemporary practice. |
| 4.6 | The curriculum must be designed to ensure that, from the early stages of the Professional Degree Programme through to the advanced practice experiences, students are encouraged to assume and are assisted in assuming, responsibility for their own learning, including assessment of their learning needs. Students | In keeping with a recent shift in the SoP's focus towards research, much teaching and module content is research-led. All SoP staff are active researchers and students are therefore able to be exposed to the latest developments in pharmacy advances and the latest in cutting edge pharmacy research.

Consistent with the principles of the CCF, students must engage with their learning and their practice reflectively, taking responsibility for their own learning and proactively identifying their specific |

should also be encouraged to participate and be assisted in participating in the education of others.	learning needs. Students submit a reflective portfolio at specified intervals through the programme and course content is routinely assessed via reflective assignments requiring students to bring their own insights to bear. The accreditation team was particularly interested to note the interprofessional learning elements built into the programme. A range of workshops and interactive lectures with students from other Schools within the CoMH are undertaken and provide students with opportunities to learn from, with and about other members of the healthcare team. Planning and delivering these IPL sessions does present the SoP with some scheduling challenges. However, the recent appointment of the Vice Dean of Interprofessional Learning within the CoMH has raised the profile of IPL within the faculty and the School aspires to expand the scope and range of IPL activities in the future, hoping to implement IPL activities at an earlier stage in the programme. In discussions with students during the onsite accreditation visit, the accreditation team noted the awareness of IPL amongst the students; they appear to be extremely enthusiastic to engage further with IPL opportunities and it appears that the importance of IPL within the integrated curriculum and beyond has been effectively instilled within the student body. The accreditation team recommends further development of IPL opportunities as the programme consolidates over the coming years.
4.7 The Curriculum should be guided by, but not limited to; the indicative syllabus shown in Appendix B of this document[1] and it should take account of, and be responsive to, developments in pharmaceutical science and services and in pharmacy practice.	
4.8 The curriculum must provide appropriately comprehensive training in research methods applicable to scientific and health research in order to meet the CCF and it must include practice research. In addition, the Professional Degree Programme must include a significant research component that meets the requirements of a level 9 degree programme on the National Framework of Qualifications.	
4.9 There must be a continuum of structured and quality assured practice-placement experiences throughout the curriculum from introductory to advanced, and across the main practice settings of community, hospital and industry, that are of adequate scope, intensity, structure and duration to support achievement of the CCF. The structure of these practice-placement experiences must meet the PSI Council policy as approved from time to time. These experiences must integrate, apply, reinforce and advance the knowledge, skills, attitudes and behaviours developed through the other components of the curriculum	In order to ensure students are exposed to, and become familiar with, the full range of pharmacy practice contexts, placements are undertaken throughout the programme. Those undertaken in Years 2, 4 and 5 are sourced and managed by the APPEL consortium, with oversight exercised by UCC. All placements in all years are appropriate to students' knowledge and experience and are reinforced through extensive use of reflective assignments which explicitly draw on and reference the tenets of the CCF as a means of inculcating and applying the knowledge, skills and attributes addressed in the curriculum. The APPEL administered placements are subject to a rigorous quality assurance mechanism developed by APPEL in conjunction with the consortium partners; supervisor/preceptor training and accreditation cycles and extensive support frameworks for both supervisors/preceptors and students ensure that placements meet the required structure, quality and other requirements of PSI policy. During the onsite accreditation visit, the HoS confirmed that the MPharm programme complies with the minimum legal requirements at national and European levels.

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

4.10 The curriculum must comply with the various minimum legal requirements at national and European level (see Appendix C).[2] The curriculum must take account of the recommendations of the Advisory Committee on Pharmaceutical Training (European Commission, 1995)[3].	
Compliance with Standard:	The accreditation team is satisfied that this standard has been met
Commendations **Recommendations** **Conditions**	The accreditation team commends: - the awareness of IPL and its importance amongst the student body The accreditation team recommends: - further development of IPL opportunities

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[2] To include the Schedule of the Pharmaceutical Society of Ireland (Education and Training) (Integrated Course) Rules 2014 (S.I. No. 377 of 2014)
[3] In this respect, a curriculum compliant with the European Credit Transfer and Accumulation System (ECTS) meets the total hours requirement of these recommendations.

Standard 5: Teaching and Learning Strategy	Accreditation Team's Commentary
5. The Teaching and Learning Strategy must be designed to deliver a curriculum that produces graduates that meet the Core Competency Framework for Pharmacists as established by the PSI Council from time to time. 5.1 The Teaching and Learning Strategy must: a) be structured to provide an integrated experience of relevant science and pharmacy practice, a balance of theory and practice and the development of independent learning skills; b) take account of the predicted preferred learning format of the intended audience as well as the most effective methods to demonstrate competency against the required learning outcomes; c) emphasise the contribution of the pharmacist in the pharmaceutical industry and the pharmacist in the healthcare team, including the clinical skills that enable the critical review of patient pharmacotherapies and, where appropriate, during the Professional Degree Programme, teaching and learning should be organised so that students can learn with and from students of other related healthcare professions; d) include practical experience of working with patients, carers and other health care professionals. The intellectual and professional demands of the practice experience should increase as the student progresses through the Professional Degree Programme and the teaching	UCC has embraced a not inconsiderable challenge to develop and deliver a curriculum of a fully integrated nature. The Teaching and Learning Strategy within the SoP aims to educate and train pharmacists with an in-depth knowledge of the science, the skills and competencies underpinning the professional practice of pharmacy. The integrated spiral curriculum shows increasing levels of complexity as the student progresses throughout the degree. Multi-disciplinary, interprofessional learning sessions with experiential learning experiences across the programme contextualise the theory into, and for, practice. This curriculum design is holistic and takes the learning needs of students into account. The UCC teaching and learning strategy is grounded in seven principles, explicitly articulated in the SoP Teaching and Learning Strategy document as: 1- Teaching is designed in accordance with learners' needs and is aligned to learning outcomes. 2- Teaching practices are designed to equip the students with relevant and current knowledge of scientific disciplines underpinning the professional practice of pharmacy. Learning practices build the attitudes, behaviours, skills and competencies for future roles. 3- The programme is patient-centred. 4- The teaching and learning within the degree are informed by best educational and professional practice, and evidence-based research. 5- Teaching and learning activities develop from early, primarily didactic delivery to more interactive and small group participative methods that promote individual learning. 6- All teaching staff assume personal responsibility for the quality of their contributions. 7- All teaching staff are encouraged to actively engage in research and publish their findings, which informs research-led teaching. Prior to the onsite accreditation visit, the SoP provided the accreditation team with the Book of Modules, which details all modules and the learning outcomes, content covered and objectives of each for Years 1 to 5 of the programme. Reinforced by the meetings during the onsite visit, it is clear to the team that the programme at UCC balances theory and practice, and is carefully structured to allow for an integrated programme. Content covered in Year 1 is more discipline specific, but nevertheless, staff indicated during the onsite visit that even within the more discipline discrete modules, connections are made with others and students are introduced to the notion of thinking beyond the modules to make linkages with content covered elsewhere. The spiral nature of the curriculum is more tangible from the outset of Year 2, which is structured according to a systems

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

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

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

g) facilitate the development of the student's consultation, counselling and communication skills (as referred to in the CCF) and this should be underpinned by the theoretical basis within the social and behavioural science content of the Professional Degree Programme;

approach and becomes increasingly integrated as teachers from different disciplines contribute with multi and interdisciplinary approaches.

In addition to classroom-based learning sessions, the programme incorporates a range of practice-based practical experiences, including site visits to hospital and community pharmacies during Year 1, a two-week APPEL sourced placement in Year 2, in addition to the experiential placements in Years 4 and 5. The placements expose students to the full range of pharmacy practice settings, including that of the pharmaceutical industry and role emerging practice.

These experiential learning opportunities are complemented by guest lectures, workshops and seminars conducted by invited speakers drawn from across the profession to provide insight into contemporary pharmacy practice. The input from the profession is seamlessly integrated into the programme modules and contributes significantly to students' knowledge of modern (and future) pharmacy practice.

The UCC SoP is focusing more explicitly on research-led teaching and research, and the acquisition and development of research skills feature in the MPharm programme. Students are introduced to research methods from Year 2, which lays the foundations that are built upon in Year 3. They embark on their own research projects in Years 4 and 5, which are mandatory integral elements of the programme. Concurrently, the considerable input of research-active members of staff into module content ensures that the programme remains contemporary and foregrounds advances in pharmacy developments. Of particular interest to the accreditation team is the current research ongoing at UCC around nanotechnology and personalised medication delivery. That this aspect of cutting-edge pharmaceutical research is cascaded to students is evidence that the SoP is committed to ensuring its programme equips students with an appropriately forward-thinking and innovative perspective.

The UCC programme is designed in such a way as to allow each module to be explicitly mapped to the competencies and behaviours of the CCF. This is clearly shown. In order to inculcate a clear sense of appropriate professional pharmacy practice, students are exposed to a wide range of learning opportunities to develop counselling and communication skills, problem-solving skills, entrepreneurial management techniques and suitable methods of managing workloads. During the onsite accreditation visit, the accreditation team were particularly interested to explore how aspects of leadership are developed. It appears from the information provided prior and during the visit that leadership as a specific aspect of professional practice is not explicitly and clearly highlighted as a behaviour being instilled into students; it appears rather more implicit as a facet of other skills such as entrepreneurial management. The accreditation team recommends that the current leadership skills development and activities are more clearly and explicitly signposted to students across the programme.

h) encourage students to take responsibility for their own learning both within the Professional Degree Programme and as a basis for later continuing professional development; i) place emphasis upon the development of leadership skills, problem-solving skills, and the justification of decisions made both on an individual and team-based basis and the impact of such decisions on patient safety; j) ensure that teaching and learning take place alongside and with reference to research and other scholarly activities in order that all students develop critical, analytical skills, an understanding of research methods and to support evidence-based decision-making and practice; k) ensure that the students recognise the importance of working as part of a multidisciplinary team. 5.2 Notwithstanding the requirement to ensure a balance of pharmacist input across the programme, the Teaching and Learning Strategy must provide that, where no pharmacist is appointed within an area of academic expertise, there are robust mechanisms in place to ensure that teaching and learning in modules/course units in that area take place in a pharmacy context. 5.3 The Teaching and Learning Strategy must ensure that pharmacy law, ethics, professionalism and pharmacy practice are taught predominantly by pharmacists with appropriate contemporary experience of practice, drawn preferably from within the School.	Through the use of lectures, workshops, group discussions, practicals and frequent use of the model pharmacy, students become familiar with suitable approaches for maintaining a patient-focused and ethical practice that is in-line with the Pharmacists Code of Conduct. Additionally, because pharmacists are integral members of the healthcare team, the UCC programme incorporates interprofessional learning opportunities to support students in their learning about, with and from other healthcare students in the CoMH. Workshops and seminars taking place from Year 2 develop students' understanding of the pharmacist role in the wider healthcare team and many of these sessions are assessed by means of group assignments which bring pharmacy students into contact with students of medicine, dentistry, speech and language therapy and nursing to foster a collegial and professional sense of the multi-disciplinary team. The recent introduction of the UCC Group Work Policy has placed further emphasis across the University, including the SoP, on the importance of teamwork in student development for their future careers. The SoP has introduced the teamwork peer evaluation e-tool known as the Comprehensive Assessment of Team Member Effectiveness (CATME) as a means of increasing the awareness of students' responsibilities when part of teamwork exercises. CATME is now embedded into several modules as a means of enabling student peer assessment. The teaching and learning strategy at UCC is designed in such a way as to support students taking responsibility for their own learning and from Year 1 incorporates participatory learning approaches which incrementally expand so that from Year 2, students undertake reflective assignments which form part of their assessment to foster an ongoing sense of the active reflective learner. Through the course of the programme, students build up a reflective portfolio that is modelled closely on the continuing professional development (CPD) cycles of the Irish Institute of Pharmacy (IIoP). This serves to both develop the skills necessary for later professional practice, but also instils an appropriate sense of the life-long learner. All modules and all module content on the MPharm maintain a pharmacy focus. During the onsite accreditation visit, discussions with members of the teaching staff highlighted how members of staff from outside the School are supported by module coordinators in the development of course content so that the appropriate level of pharmacy focus is maintained. Modules are developed in tandem with one or more members of the Pharmacy staff retaining overall responsibility for the content and all modules, and changes to modules must be approved by the School's Teaching and Curriculum Committee prior to approval by the School Board. The School of Pharmacy Board also provides a further forum for discussion and consideration of maintaining an appropriate level of pharmacy focus to programme modules.

| 5.4 | The Teaching and Learning Strategy must develop a culture of professionalism in which all teaching staff can lead by example, collegiality, civility and respect among students and staff and this must be underpinned by a clear and realistic student code of conduct that is explained, communicated and enforced to assure professional behaviour. This must be supported by Fitness to Practise procedures that address causes for concern raised about students (see Standard 2). | Pharmacy Law, ethics, professionalism and pharmacy practice are taught within the SoP primarily by members of staff who have a wide experience of practice or continue to practice away from their teaching commitments. Teacher practitioners are prominent in the SoP; the School employs seven who have a wide experience of pharmacy practice in all practice contexts. Additionally, guest speakers from across the profession deliver lectures and workshops on their own fields of expertise to ensure that students are exposed to suitable aspects of contemporary practice experience.

During the onsite accreditation visit, the accreditation team were struck by the great sense of collegiality evident amongst the members of staff. This has been noted in previous reports and the visit in 2020 remains no exception. The School continues to be a close-knit community that fosters amongst staff and students alike a great sense of belonging, respect and warmth. Staff are quite clearly highly committed to delivering the MPharm programme, and it seems that students respond accordingly. During discussions with some of the School current students, they spoke warmly of the School staff, noting their flexibility, approachability and the high levels of support.

Students are bound by a UCC-specific Code of Conduct, which is consistent with that of the profession's regulator, the PSI. During the APPEL administered experiential placements on Years 2, 4 and 5, students are obliged to sign an APPEL specific Code of Conduct which reinforces professionalism, and professional behavior and dress. In the event of transgressions or issues emerging, a defined UCC FtP protocol enables such issues to be investigated and the appropriate action to be taken, including remediation as appropriate. |
| **Compliance with Standard:** | The accreditation team is satisfied that this standard has been met. |
| **Commendations**

Recommendations

Conditions | The accreditation team commends;
- the school's commitment to ensuring its programme equips students with a forward-thinking and innovative perspective.

The accreditation team recommends;
- the current leadership skills development and activities be more clearly and explicitly signposted to students across the programme |

Standard 6: Assessment Strategy	Accreditation Team's Commentary
6. The Assessment Strategy must ensure that all graduates demonstrate the competencies set out in the Core Competency Framework for Pharmacists as established by the PSI Council from time to time. The strategy must align with the teaching and learning strategy (see Standard 5) and use effective and validated diagnostic, formative and summative assessment methods that are reviewed at frequent intervals and take account of developments in pharmacy practice within all components of the Professional Degree Programme. 6.1 The Assessment Strategy must: (a) be planned at the Professional Degree Programme level to include a range of methods, at each level of study, appropriate to assess the progressive attainment of all competencies set out in the CCF and the process of professionalisation and should include a formal assessment of the student at the end of year five by the tutor pharmacist; (b) include clearly defined marking criteria and the pass criteria must reflect safe and effective practice. All assessments must take account of patient safety and any evidence of unsafe practice must result in failure. Condonation and compensation should not normally be applied and, if used, the graduate must still demonstrate all competencies as set out in the CCF; (c) be framed by Institutional regulations for the Professional Degree Programme that are appropriate for an award that is both academic and professional in nature;	Supporting the Teaching and Learning Strategy, the School's Assessment Strategy explicitly sets out to assess that; • students meet the intended learning outcomes for modules and programmes, • students are able to demonstrate all behaviours/competencies within the CCF, and • students comply with the FtP policy and procedures of the University at MPharm level. It has been planned, designed and implemented to include a wide range of methods which include multiple choice quizzes, written and dispensing exams, group projects and presentations (group and individual), posters, research projects and objective structured clinical examinations (OSCEs) and role-plays. This breadth and range of assessment methods enables students to be assessed across the full spectrum of CCF behaviours and competencies on numerous occasions. Modules' learning outcomes are mapped to the competencies and behaviours outlined in the CCF. Therefore, through the assessment of the learning outcomes of individual modules, the attainment of competencies is assessed. In the SoP SAR submitted to the PSI prior to the accreditation visit in 2020, examples are given where module assessments enable the attainment of specific competencies to be directly assessed. All modules, including those with an IPL component are assessed. The assessments retain an appropriate level of pharmacy focus and IPL activities are assessed with methods consistent with the School assessment strategy. In Years 4 and 5, the CCF competency attainment during the experiential learning placements are assessed by preceptors/senior preceptors and following the completion of Year 5, a terminal OSCE-based examination will be used to assess competencies in the form of the pre-registration examination (PRE). Information in relation to all assessments, their nature and scheduling are clearly communicated to students via the Book of Modules in the first instance and via the online systems, ensuring that there is clarity around assessment timings. During the onsite accreditation visit, students highlighted that there have been occasions previously during which assessments have been bunched together. The HoS acknowledged wherever possible, the School aims to avoid such situations and spreads assessments as evenly throughout modules as is practical. All assessments have been developed and implemented in-line with UCC's institutional protocols and changes to the assessment regime may only be implemented through the standard CoMH approval process. This ensures that all assessments meet the relevant criteria and thus, preserves the integrity of the assessment strategy throughout. Marking criteria are clearly defined and transparent, and are

(d) provide clear guidance to students relating to assessment of stated professional and learning outcomes, with objective reporting on assessments;

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

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

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

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

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

published in both SoP Book of Modules and the UCC Marks and Standards document to which the accreditation team had access prior to the onsite accreditation visit. To support the assessments undertaken during Years 4 and 5, during which students undertake APPEL experiential placements, rubrics have been developed and implemented. These are shared across the three consortium partners (UCC, Trinity College Dublin (TCD) and the Royal College of Surgeons in Ireland (RCSI)). Not only do the rubrics support that students' understanding of the criteria against which they are to be assessed, but it also ensures that the criteria are standardized across all consortium partners, even though oversight and responsibility for the marks and standards remain the domain of each individual HEI. Discussions between the accreditation team and UCC Pharmacy students during the onsite accreditation visit indicates that the rubrics for the Years 4 and 5 assessments are helpful in guiding students towards achieving their full potential in these assessments.

Patient safety is judged by the accreditation team to be safeguarded through a rigorous assessment regime. However, there were two points on which the accreditation team sought further clarification during the onsite visit. It was not clear the extent to which students are able to pass modules by compensation. The HoS clarified this, indicating the small number of modules which may be successfully completed by means of compensation. The process by which this is undertaken was explained and it is clear that only a small number of non-core modules may be passed by compensation. These are modules undertaken in Years 1 and 2 and are discipline-specific, the principle emphasis of which is not patient-focused. No modules from Year 3 onwards may be passed through compensation. Any module which is passed by compensation is recorded as such on the student's academic transcript.

Similarly, the accreditation team explored the issue of 'red-flag' stations in the range of OSCE-based assessments undertaken. The SoP does not employ 'red-flag' stations. However following clarification, the accreditation team was assured that the process was sufficiently robust to assure patient safety is conserved and that a student would not be successful if there was competency lacking. Errors which would endanger patient safety are taken extremely seriously, and might result in the incident being logged on the FtP log for further consideration in the framework of a FtP process.

As UCC moves towards completion of Year 5 of the integrated MPharm programme for the first time, preparations are underway for the implementation of the final summative assessment, the PRE. In conjunction with the APPEL consortium partners, the PRE will take the form of a 15 station OSCE. Training for UCC SoP staff has already been undertaken and the stations are currently being developed and blue-printed, with support and input from the other APPEL consortium partners. The assessments will be reviewed by the PRE assessment lead and a team of practising pharmacists who are the

(j) address pharmaceutical calculations in all years of the Professional Degree Programme; (k) include a final formal summative objective structured clinical examination as part of the statutory professional examination at the end of year five that seeks to assess in an integrated manner the performance of students based on the curriculum delivered over the five years of the Professional Degree Programme. 6.2 The Assessment Strategy must be supported by a robust and transparent appeals process that is fully documented and communicated to students. 6.3 There must be rigorous processes for review, monitoring and evaluation of all elements of the assessment strategy that identify and take account of inconsistencies and so ensure fairness and reliability. Such processes should incorporate external scrutiny of student assessments.	relevant experts in their field prior to being finalised. A mock PRE OSCE will be undertaken in June 2020, with the PRE in the framework of the MPharm programme scheduled for September 2020. All assessments are subject to UCC regulations around external moderation. External examiners are selected in line with institutional protocols and their reports are considered by the SoP Exam Board, a process which contributes to the ongoing review and consideration of the assessment strategy, to assure its fairness, validity and rigour. Feedback following assessment is provided to students in accordance with UCC requirements. However, during the onsite accreditation visit and in discussions with SoP students, the issue of feedback not always being provided as promptly and as proactively as it might be was raised. This point was raised by the accreditation team with the teaching staff of the SoP. On occasion, it is not always practical to provide personalised feedback to every student as a matter of course. The accreditation team was assured by the discussions that where students specifically request personal feedback following assessment, it is provided. The team is also conscious that on occasion, general feedback, designed to support and assist a cohort may not be perceived as feedback. The accreditation team recommends that staff explicitly signpost feedback provided verbally to ensure that students are aware that feedback has been provided as required. The appeals process available to each SoP student should they wish to challenge marks awarded is clear and made available to all students online. Students confirmed during the onsite accreditation visit that they are aware of such a process and understand how to initiate it. The process is consistent with UCC institutional protocols and appeals are considered at University level by an independent panel drawn from across the university. Marks arising from assessments are considered three times in each academic year by the SoP Exam Board, which is made up of all SoP staff along with the appointed external examiners. Statistical analyses of each assessment are undertaken. Individual grades are also considered, and notable anomalies are also brought to the attention of the Board for further consideration. Issues arising are brought to the attention of module coordinators for resolution and following the final Exam Board which takes place in the summer, summary reports of the external examiners' reports are produced for consideration by the overarching University Academic Board.

Compliance with Standard:	The accreditation team is satisfied that this standard has been met
Commendations **Recommendations** **Conditions**	The accreditation team recommends: - UCC ensures there is feedback to students on all assessments and there is more explicit signposting of student feedback to ensure it is understood as such

Standard 7: Quality Assurance and Enhancement	Accreditation Team's Commentary
7. All processes and activities related to the Professional Degree Programme must be clearly defined, documented, executed and controlled in accordance with a system of Quality Management which assures and demonstrates consistency, reproducibility and transparency of operations. There must be evidence that this process is being used to enhance the quality of the provision. 7.1 There must be clear management structures for the Professional Degree Programme with information about roles and responsibilities, lines of accountability and the authority to act for all those involved in education and training. 7.2 The School must describe how it assesses attainment of the educational philosophy of the Professional Degree Programme (see Standard 1.1). 7.3. The Professional Degree Programme Provider must be able to demonstrate a rigorous evaluation of the Professional Degree Programme and how outcome data and research into best practice are used to achieve continuous monitoring, risk minimisation, development and enhancement of the Professional Degree Programme. The views and experiences of the students, staff (full-time and part-time), tutor pharmacists, employers, service users and the PSI on the quality of the Professional Degree Programme must be considered. Wherever appropriate, students, staff (full-time and part-time), tutor pharmacists, employers and service users should be represented on committees and other groups that have responsibility for the design, implementation and review of the programme.	The quality assurance mechanisms in place are robust and continue to demonstrably support the ongoing evolution of the MPharm degree as a high-quality, leading-edge programme. Mechanisms are in place at School, College and University level; APPEL supports the assurance of high-quality experiential learning placements through its own measures, which are demonstrably consistent and dovetail with those in place within the HEI. As previously considered in this report under Standard 1, the SoP at UCC is structured in a manner that mirrors that of the CoMH of which it is a part, and also the broader UCC institution. There are well-defined roles and responsibilities, clear lines of reporting and escalation and accountabilities are transparent. The School assesses the fulfilment of the educational philosophy of the programme by means of a range of mechanisms including; - student feedback (directly to staff), - student evaluation forms, - preceptor evaluation forms, - analysis of students' assessment outcomes, - student pass and progressions rates, - students' demonstration of competency within the domains of the CCF, and - the appointment of external examiners and full consideration of their recommendations. In 2016, the SoP established a School Advisory Board (SAB), with the remit to support the ongoing development and implementation of the MPharm programme. Membership of the Board is made up of staff in the School, patients and patient groups, members of the pharmacy profession and other stakeholders. The Board meets regularly and has input into the review and this body continues to have a meaningful impact in maintaining high quality, not solely in terms of attaining the educational philosophy of the programme, but also in terms of driving research and outreach activities. As the SoP has focused more closely on research and research-based teaching on the MPharm programme, it has established a Pharmacy Education Research Group. The Group team has an active research portfolio that is driving research informed educational quality improvements through the programme through a range of seminars at which invited speakers provided insights into recent developments in tertiary-level pedagogy.

7.4	Key performance indicators (KPIs)must be established and monitored to ensure ongoing compliance with these 'Accreditation Standards for the five-year fully integrated Master's degree programmes in pharmacy' as approved by the PSI Council from time to time, and to meet the standards for the National Framework of Qualifications for a level 9 qualification. Where issues are identified that impact on compliance with the Accreditation Standards, immediate corrective action must be taken and notified to the PSI.	The SAB was established following a recommendation from the UCC Quality Enhancement Unit (QEU), a unit independent of the School which requires each university School to engage in a periodic Quality Review every seven years. The QUE supports quality improvement projects and advances the sharing of best practice throughout the university. The School underwent its most recent quality review in 2016, and its findings were provided to the accreditation team prior to the onsite accreditation visit.

As has been considered above under Standard 1, the SoP has implemented, maintains and regularly reviews a set of KPIs to measure and monitor the School's ongoing performance. These are supported and enhanced by KPIs within the APPEL function, which have been specifically developed to assure the quality overall of the experiential learning placements undertaken by students in Years 2, 4 and 5, including the overall appropriateness of the training establishments (TEs). During the onsite accreditation visit, it was clear that the APPEL function is working well and engages productively, |
| 7.5 | There must be a reliable means of reviewing each student's proficiency over the period of the Professional Degree Programme, to include proficiency in practice placements, to provide robust evidence of each student's performance over a sustained period. The award of an accredited degree is conditional on demonstration of sustained achievement of an appropriate level of professional performance. Fitness to practise mechanisms for students must be in operation and routinely reviewed. | proactively and with a high level of collegiality with the SoP staff. It has sourced a number of experiential placements which exceeds minimum requirements and is engaging strategically with the profession to ensure the placements available are sustainable and appropriate. One aspect of interest to the accreditation team during the onsite accreditation visit was the relatively small number of placements available in hospital pharmacies for the Years 4 and 5 placements; 15 hospital-based placements were available this year. The APPEL team explained that efforts are being made to expand the number of hospital placements available and avenues to secure a greater number are being explored. |
| 7.6 | The Professional Degree Programme Provider must establish and operate a rigorous system for the external examination of the Professional Degree Programme. This system must include explicit policies and regulations covering the appointment, terms of office and role of the external examiners. | The APPEL function is a shared resource, established by a consortium of the three SoPs in Ireland. Each HEI has designated Practice Educators whose roles are to support the students prior, during and following placements, to support the relevant preceptors, oversee the quality assurance mechanisms in place and ensure that all relevant procedures are adhered to accordingly. Part of the student/preceptor support mechanism requires visits to be made to training establishments, ensuring visibility of the APPEL support. The regime of TE visits and telephone contact has been extended considerably since the previous PSI onsite compliance visit in 2019. The accreditation team during the 2020 onsite visit expressed satisfaction that the proportion of TEs routinely supported (25% of Year 5 students have been visited, 45% of Year 5 students have been contacted by 'phone) is suitable. The |
| 7.7 | All proposed material changes to the Professional Degree Programme must be documented and submitted prior to implementation to the PSI for approval in line with the statutory requirements. The Professional Degree Programme document management policy must record and retain all | accreditation team is of the opinion that the APPEL function represents a key strength of the UCC MPharm provision and that both the School and APPEL are to be applauded for the continued highly productive engagement and commitment to delivering placements of the highest quality.

Allocation of students to placements is a controlled and timed process. It is conducted online through a designated portal. The process appears well-managed. However, some students reported to the |

	changes to the Professional Degree Programme as accredited over time. This is to enable the retrieval of the programme of study undertaken by each student at any time, including post- graduation.	accreditation team during the onsite visit some concerns around the timing of notifications and also a perceived lack of transparency around the availability of placements in specific locations. The accreditation team ask that APPEL review and reinforce the processes around communication with students to ensure their understanding around the transparency of the allocation process.
7.8	There must be appropriate mechanisms in place to assure and enhance the quality of all practice placements including: a) the process to select, assess, accredit and appoint tutors and training establishments; b) tutor development and support structures; c) appropriateness of training establishments; d) organisational support for the tutoring process; and e) the allocation of students to training establishments. There must be appropriate support for students including processes to monitor, review and take necessary corrective action. There must also be appropriate levels of collaboration with regard to the quality assurance of practice placements between the School and the other Schools of Pharmacy in the State so as to facilitate and maximise the benefits of practice placements as a critical national resource.	A further point raised by students in relation to the APPEL placements is that of First Aid and resuscitation training. During discussions with the accreditation team during the onsite accreditation visit, students highlighted that they have not been provided en masse with First Aid or resuscitation training. Some students have completed it, but this has been provided by their placement provider. The accreditation team raised this with the School during the visit. The SoP acknowledges it has an aspiration to provide this kind of training to all students prior to undertaking the Year 4 placement, but indicated the cost of such training as an impeding factor. Student attainment and progression is assessed by the SoP assessment strategy explicated above under Standard 6. This includes a formal assessment of student proficiency against the CCF competencies by preceptors during the experiential placements in Years 4 and 5. All marks awarded to each student are recorded in the UCC data systems and this enables students' performance to be easily tracked and monitored as they progress through the programme. Clear FtP protocols support this, and ensure that all students awarded the MPharm degree have attained the required standards for eligibility to apply for registration to practise in the State. In-line with legislative requirement, the School notifies the Pharmacy regulator (the PSI) of any proposed changes to the MPharm programme; this takes place prior to the implementation of any changes and forms part of the annual report submitted by the HoS. The most recent examples of these were provided to the accreditation team prior to the onsite accreditation visit. The process for the proposal, approval and implementation of changes to the programme and the subsequent notification to the PSI is as follows, and is in accordance with university-wide protocol:
7.9	There must be appropriate mechanisms to monitor performance of all staff and the School should provide evidence as to how this is carried out and how this links to the quality enhancement through a development programme (see Standard 3).	1. Review of proposed changes by the SOP Teaching and Curriculum committee, 2. Approval of module changes by the SOP Board, 3. Review and approval of the proposed changes by the CoMH Teaching and Curriculum committee, 4. Review and approval of the proposed changes by the UCC - Academic Board, 5. Notification of all major changes to PSI.

	SoP staff performance and workloads are monitored through a performance review every two years. This is a meeting with the HoS and all staff in the School engage with the process. Early career academics are assigned a mentor, and should they express a preference for enhanced levels of performance review, this is arranged on an individual basis. The accreditation team recommends that performance reviews and appraisal might profitably take place more frequently than every two years. Given the current number of staff within the School, care needs to be taken to guard against excessive workload, and thus, more frequent staff appraisals could guard against this more proactively. All staff maintain training logs to record CPD and training undertaken, and the School has ring-fenced a budget of €400 per staff member for training purposes.
Compliance with Standard:	The accreditation team is satisfied that this standard has been met
Commendations **Recommendations** **Conditions**	The accreditation team recommends: - Staff performance and workload reviews take place more frequently, with a view to guarding against excessive workloads and assessing professional development. - Exploring the potential to deliver First Aid and resuscitation training to students prior to the commencement of placements.

Standard 8: Students	Accreditation Team's Commentary
8. 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.	UCC has clear published policies around admission to and progression through the MPharm programme. They are accessible online through the SoP website. Entry routes are non-discriminatory on the basis of gender, marital status, family status, age, race, religion, disability, sexual orientation, membership of the Traveller Community. Entry requirements are clearly stated and requirements for progression and successful completion of the MPharm programme are published in the MPharm Book of Modules and also in the SoP Student Handbook.
8.1 Entry to and Progression on the Professional Degree Programme Policies and procedures must be in place and regularly assessed for admission to and successful progression through the Professional Degree Programme and these must:	The SoP accepts students onto the MPharm via a range of entry routes: - CAO (competitive, points-based) - DARE (students with a registered disability) - HEAR (students from disadvantaged backgrounds) - International entry Each entry route is supported by an attendant appeals policy and process.
(a) be open and available to prospective applicants and ensure non-discrimination as defined by national laws and regulations such as, on the basis of gender, marital status, family status, age, race, religion, disability, sexual orientation, membership of the Traveller community;	The number of students entering the programme via the HEAR and DARE routes are predefined by UCC and are provided with additional support prior to the programme's start. SoP staff members are not made aware of a particular student's entry route onto the programme, thus safeguarding fairness and equality whilst students are registered at UCC. Prior to the start of the programme, students must complete a Garda Vetting process and also comply with the immunization policy of the CoMH. Both policies and accompanying guidance for completing the Garda Vetting process are published on the UCC website.
(b) include a clear statement of the requirements for entry including policies on transfer credit and course waivers, progression and successful completion to align with the CCF, alongside any requirements as approved by the PSI Council from time to time;	Whilst registered on the MPharm programme, students are able to avail of numerous support mechanisms and networks. The accreditation team was aware of the support-oriented environment and the high level of care afforded to student welfare within the School and through the university as an institution. UCC appears to take its duty of care very seriously and it is committed to ensuring all students have opportunities to engage in suitable activities, both curricular and extra-curricular.
(c) be open, fair, not impose unreasonable requirements on applicants and incorporate a fair and just complaints and appeals process;	All students are assigned a mentor, who is a member of staff within the School. The mentor provides a first point of contact for students should any issues arise. Meetings with the mentor are arranged according to need, and additionally, students are encouraged to contact staff by email or phone. Many staff, including the HoS, operate an 'open door' policy and during the onsite accreditation visit, one

(d) include specific and appropriate criteria relating to the requirements for professional standards and Garda vetting and for how any health and immunisation requirements appropriate for the practice setting are met.	student mentioned to the accreditation team that the staff in the School 'go out of their way to really make you feel looked after'. There is a palpable and strong sense of community within the School and the students appear to form a tightly-knit community alongside their teachers which is initiated during the initial orientation once students are registered. Students are aware of the relevant student complaints procedure, but it seemed to the accreditation team that in the first instance students in the School might be inclined to raise issues of this nature directly with the School staff in the first instance.
8.2 Student Support and Guidance	
Appropriate and timely support mechanisms must be in place for students on the Professional Degree Programme including:	The sense of community extends beyond the School staff. APPEL-based PEs are also integral to providing support for students; as highlighted above in Standard 7, students are contacted as a matter of course during their experiential learning placements during Years 4 and 5, many are visited, whether or not issues have been raised and the PEs are instrumental in ensuring that the student placement process runs smoothly and that the majority of students are accommodated in placements according to their (the students) preferences of practice setting. Students are well-informed about the process of making their selections due to information guidance sessions prior to the process beginning.
(a) processes to identify and, where appropriate, provide additional educational, cultural and professional support needs as appropriate;	
(b) a system of student support including access to a personal tutor or tutors for academic guidance and pastoral care and evidence of school evaluation;	Student feedback in relation to the programme is important and several mechanisms ensure that the student voice is accounted for during its ongoing further development. Feedback gathered from SoP students is carefully considered and students are kept informed about specific issues raised in the staff/student committee, an important forum for open and constructive dialogue which takes place on a regular basis. Town-hall meetings also take place once a semester to ensure that students are kept informed of developments within the School and also that students are able to raise issues with staff which impact on the student body within the School as a whole. The accreditation team are particularly impressed with this level of staff/student engagement.
(c) support in securing and maintaining placements for the practice-placement elements of the Professional Degree Programme with appropriate supervision and tutor pharmacists who meet the recognition requirements as approved by the PSI Council from time to time (see also Standard 7.8);	
(d) orientation programmes to both the Professional Degree Programme and the School's expectation of students as members of the professional community. This orientation should include the learning environment, especially where innovative/virtual learning is incorporated into the delivery methods;	Although extremely busy with the MPharm programme, UCC SoP students nonetheless are active within the wider UCC community and beyond. The UCC Pharmacy Society is active and routinely engages with peers from the other HEIs in Ireland. With the support of the School, students recently organized a mental health awareness conference, In Between Two Minds, which attracted over 200 delegates and was judged a resounding success, by students and staff alike. Many students undertake weekend and vacation work in pharmacies, which is encouraged by the School as a means of an ongoing familiarisation with their future chosen profession.

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(e) mechanisms to ensure that the views and experiences of students on the quality of the Professional Degree Programme are considered. Wherever appropriate students should be represented on committees and other groups that have responsibility for the design, implementation and review of the Professional Degree Programme;

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

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

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

(i) encouragement of active engagement with relevant pharmaceutical students' representative

associations at HEI, national and international levels, and other groups and committees which may be external to pharmacy, in order to develop individual professional and leadership qualities and foster pharmaceutical and other links at all levels; (j) access to counselling in relation to poor progress, learning difficulties, impairment and disability issues, including any health or social problems and career pathway counselling.	
Compliance with Standard:	The accreditation team is satisfied that this standard has been met
Commendations **Recommendations** **Conditions**	The accreditation team commends: - Town-hall meetings as an important forum for staff/student dialogue. - The sense of community and belonging within the School supported by an effective and active mentorship system.

Signed: _____   Date:_____5 May 2020_____

(Chairperson)

Appendices

Appendix 1

Documentation provided by University College Cork School of Pharmacy in support of the Self-Assessment Report, submitted for the purposes of PSI accreditation of the five-year fully integrated Master of Pharmacy degree

- 1.0 SoP Strategic Plan 2015-2020
- 1.1 Draft College of Medicine & Health Strategic Plan
- 1.2a Student Declaration Pebblepad
- 1.2b Student Declaration Confidentiality
- 1.3 First year orientation presentation 5 September 2019
- 1.4 Letter of confirmation to PSI explicitly recognising that the HEI is confirming a graduate is fit to apply to have their names entered in the Register of Pharmacists
- 1.5 School of Pharmacy Quality Review Report 2016
- 1.6 Internal Audit Recommendations 2017 (screenshot)
- 1.7 Governance Structure of the School of Pharmacy
- 1.8 Key Performance Indicators
- 1.9 SOP Bi Annual Report to CoMH Executive 20 November 2018
- 1.10 Core Competency Framework mapped to modules
- 1.11 Illustrated Patient Journey Core Competency Framework

- 2.0 Fifth Year Orientation
- 2.1 Curriculum Vitae of Head of School
- 2.2a Procedure for Appointment for Head of School
- 2.2b Job Description for current Head of School
- 2.3 APPEL Report
- 2.4 APPEL Consortium Agreement
- UCC Fitness to Practise Policy and Procedures
- 2.5 School Risk Register

- 3.0 MPharm Resource Statement
- 3.1 Curricula Vitae of School of Pharmacy Academic Staff
- 3.2 Sample of current research grants held by Staff of the School of Pharmacy
- 3.3 Present and Projected Staffing Complement of the School of Pharmacy
- Human Resources Training Plans
- 3.4 Architectural Drawings and Photographs of Cavanagh Pharmacy Building
- 3.5 School of Pharmacy Equipment/Fixed Assets
- 3.6 APPEL Risk Register

- 4.0 List of Modules and Coordinators 2019
- 4.1 Book of Modules
- 4.2 Second Year Preparation for Placement
- 4.3 Fourth Year Preparation for Placement
- 4.4 College Calendar
- 4.5 Timetables Years 1 to 5 2019 2020
- 4.6a APPEL Pre-Placement Preparation Day Presentations
- 4.6b Lecture 1_APPEL Re Introduction Lecture for 2nd Year
- 4.6c APPEL Pre-Placement Preparation Presentations

- 5.0 Pulmonary Revision Crosswords
- 5.1 Sample crosswords to elicit listening and recall PF10125.

- 5.2 Student Code of Conduct and Confidentiality Agreement for Boots Pharmacy visit
- 5.3 Student Code of Conduct and Confidentiality Agreement for Hospital visit
- 5.4 Student Code of Conduct and procedures regarding its communication and application
- UCC Staff Charter
- UCC Student Charter

- 6.0 APPEL Student Placement Agreement
- 6.1 Marks and Standards
- 6.2 Rubric from 4th year placement module
- 6.3 Rubric from 4th year placement module
- UCC appeal structure
- 6.4 Sample Examination Paper PF3010 Cardiovascular and Renal Systems
- 6.5 Case Study Sample from Endocrine I workshop

- 7.0 Spiral Curriculum
- 7.1 Example of APPEL Student Feedback
- 7.2 APPEL KPIs
- 7.3 External Examiner Report (sample) 2019 joint modules with three HEIs
- 7.4 Quality Improvement Plan

- 8.0 School of Pharmacy Recognition of Certified Prior Learning Exemption Policy
- 8.2 Mentoring of Pharmacy Students in UCC
- 8.3 BPharm/MPharm Reference Guide for Professional Behaviour
- 8.4 Orientation programme for incoming first year students
- Information leaflet 1
- Information leaflet 2
- Student Support Services
- UCC student complaints policy

Following the accreditation team's review of the SAR and the accompanying documents, further information was requested. In response, UCC provided the following additional documents prior to the onsite accreditation visit:

- 1. Letter to PSI outlining changes to anticipated deliver of years 4 and 5
- 2a. External Examiner Reports and Academic Unit Responses 2018
- 2b. External Examiner Reports and Academic Unit Responses 2019
- 3. PSI Accreditation Visit January 2019 Action Points for discussion at February 2020 visit
- 3a. On-site compliance visit 2019 - update on APPEL–related matters (updated January 2020)
- 3b. APPEL Policy on Quality Assurance Contacts made during Experiential Learning Placements
- 3c. Example of Supervisor report
- 3d. (i) Feedback Summary 2018-19 Shared Modules
- 3d. (ii) Feedback Summary 2019-20 Shared Modules
- 3e. UCC Academic Strategy - Priority 3 (Assessment Strategy) – 200107
- 4a. Teaching Hours 2016-17 and 2018-19
- 4b. SoP Staff research supervision
- 5. Staff student minutes 2019-20
- 6. Notes on Pass by Compensation
- 7. Extract from University Management Policy regarding Managing Risk

Agenda of the Onsite Accreditation Visit to University College Cork, February 2020

Accreditation Visit for the Five-Year Fully Integrated Master's Degree Programme in Pharmacy provided by University College Cork
In accordance with
Article 7(2) (a)(iv) of the Pharmacy Act, 2007
AGENDA
Wednesday 5 February – Thursday 6 February 2020

Day One: Wednesday, 5 February 2020, University College Cork			
Agenda No	Time/Venue	AGENDA ITEM	STANDARDS
1.	8:30 – 8:45 Boardroom	Private meeting of the Accreditation Team All meetings will take place in the Boardroom, Cavanagh Pharmacy Building, College Road	
2.	8:45 – 10.15	Meeting with Head of School and Team responsible for the programme • Welcome and introductions • Presentation by the Head of School • Overview of programme developments to further evaluate additional progress and developments since the review in 2019, to include planning for 2020/2021. • Overview of the strategic plan for the College as it aligns to the strategy for the School of Pharmacy and Pharmaceutical Sciences and MPharm programme **UCC Attendees:** Prof Stephen Byrne (Head of School) Dr Brendan Griffin (Deputy Head of School) Dr Laura Sahm (Director of MPharm Degree) Ms Noreen Moynihan (School Manager)	1-8 (particular focus on standard 1)
3.	10:15 – 10:30	Private meeting of accreditation team	
4.	10:30 – 11.30	Meeting with the UCC representatives involved in Leadership, Organisation and Governance **UCC Attendees:** Prof Stephen Byrne Professor Caitriona O'Driscoll	Standard 2

		Professor Helen Whelton Head of College of Medicine & Health Dr Michael Cronin Dr Brendan Griffin Ms Noreen Moynihan Dr Laura Sahm Dr Christian Waeber	
5.	11:30 – 11:45	Private meeting of accreditation team	
6.	11:45 – 12:15	Tour of School of Pharmacy Prof Caitriona O'Driscoll Dr Michael Cronin Dr Suzanne McCarthy	
7.	12:15 – 12:45	**Lunch**	
8.	12:45 – 13:45	Meeting with the UCC representatives involved in Resources **UCC Attendees:** Prof Stephen Byrne Ms Aine Foley - College Analyst College of Medicine & Health Dr Brendan Griffin Ms Niamh Healy - HR Partner College of Medicine & Health Ms Noreen Moynihan	Standard 3
9.	13:45 – 14:00	Private meeting of accreditation team	
10.	14:00 – 15:00	Meeting with relevant staff involved in coordination and quality assurance of practice placements with APPEL **UCC Attendees:** Dr Maria Donovan Ms Ruth McCarthy Dr Laura Sahm **APPEL Representatives:** Ms Joanne Kissane, National Director & Co-ordinator of APPEL	
11.	15:00 – 15:15	Private meeting of accreditation team	
12.	15:15 – 16:15	Meeting with the UCC representatives involved in Curriculum **UCC Attendees:** Prof Caitriona O'Driscoll Dr Abina Crean Dr Maria Donovan Dr Eoin Fleming Dr Cormac Gahan	Standard 4

		Dr JJ Keating Dr Laura Sahm Dr Christian Waeber	
13.	16:15 – 16:30	Private meeting of accreditation team	
14.	16:30 – 17.30	Meeting with a representative cohort of current MPharm students: To include students from 1st – 3rd year. Students from different Access routes (including mature learners) and international students to be included here or in session on 6th February, or both. Curriculum integration will be one of the topics that will be discussed. **Attendees:** To be confirmed	

Day Two: Thursday, 6 February 2020, University College Cork			
Agenda No	Time/Venue	AGENDA ITEM	STANDARDS
1.	8:30 – 8:45	Private meeting of the Accreditation Team	
2.	8:45 – 9.45	Meeting with the UCC representatives involved in the Teaching and Learning Strategy **UCC Attendees:** Prof Stephen Byrne Dr Teresa Barbosa Dr Lorraine Bateman Dr Margaret Bermingham Dr Abina Crean Dr Erin Crowley Dr Fatma Farag Dr Eoin Fleming Dr JJ Keating Dr Suzanne McCarthy Dr Michelle O'Driscoll Dr Laura Sahm Dr Christian Waeber Ms Kathleen Williamson	Standard 5
3.	9:45 – 10:00	Private meeting of accreditation team	
4.	10:00 – 11.00	Meeting with the UCC representatives involved in the Assessment Strategy **UCC Attendees:** Prof Stephen Byrne Ms Lisa Buckley Dr Brendan Griffin Dr Abina Crean Dr Kieran Dalton Dr Ken Devine Dr Eoin Fleming Ms Aine Healy Dr JJ Keating Dr Rachel Moloney Dr Kevin Murphy Dr Joey O'Shea Dr Laura Sahm Dr Christian Waeber	Standard 6
5.	11:00 – 11:15	Private meeting of accreditation team	

6.	11:15 – 12:15	Meeting with the UCC representatives involved in Quality Assurance and Enhancement **UCC Attendees:** Prof Stephen Byrne Dr Abina Crean Dr Maria Donovan Dr Brendan Griffin Ms Ruth McCarthy Ms Noreen Moynihan Dr Laura Sahm Ms Mags Walsh – Quality Enhancement Developer	Standard 7
7.	12:15 – 12:30	Private meeting of the accreditation team	
8.	12:30 – 13:00	Lunch	
9.	13:00 – 14:00	Meeting with the UCC representatives involved in Students **UCC Attendees:** Prof Stephen Byrne Dr Margaret Bermingham Dr Eoin Fleming Dr JJ Keating Ms Noreen Moynihan Ms Aisha Murphy Dr Kevin Murphy Dr Katie Ryan	Standard 8
10.	**14:00 – 14:15**	Private meeting of accreditation team	
11.	**14:15 – 15:15**	Meeting with a representative cohort of current MPharm students: To include students from 4th & 5th year. Students from different Access routes (including mature learners) and international students to be included here or in session on 5th February, or both. Curriculum integration will be one of the topics that will be discussed.	
12.	**15:15 – 15:30**	Private meeting of accreditation team	
13.	**15:30 – 15:45**	Meeting with UCC representatives to get on further clarifications (if required). **UCC Attendees:** Prof Stephen Byrne Dr Brendan Griffin Dr Laura Sahm Ms Noreen Moynihan	

14.	15:45 – 16:45	Private meeting of the accreditation team	
15.	16:45 – 17:00	Meeting with the UCC representatives to convey recommendation of the accreditation team. **UCC Attendees:** Prof Stephen Byrne Dr Brendan Griffin Dr Laura Sahm Ms Noreen Moynihan	