Contents

GLOSSARY 1

1. INTRODUCTION 2
   1.1 Background 2
   1.2 Purpose 3
   1.3 Scope 3
   1.4 Flexibility and transferability 4
   1.5 Overall structure 4

2. THE PROGRAMME OF LEARNING 5
   2.1 Stakeholders 6
   2.2 Governance 7
   2.3 Inclusivity 7
   2.4 Outcomes 8

3. TRAINING AND LEARNING REQUIREMENTS 12
   3.1 Experience requirements 12
   3.2 Supervision requirements 12
   3.2.1 During period of provisional registration 12
   3.2.2 During foundation training programme 13

4. RECOMMENDED LEARNING TO MEET THE CURRICULUM OUTCOMES 15
   4.1 Work-based learning 15
   4.2 Self-directed learning 15
   4.3 Learning with others 15
   4.4 Formal learning 16
   4.5 Developing life-long learners 16

5. THE ASSESSMENT PROGRAMME 17
   5.1 Evidence types 17
**Glossary**

**APPROPRIATE**
An action that is evidence-based, safe, cost-effective and in keeping with your clinical judgement, as well as the patient’s situation and preferences.

**ASSESSMENT**
All activity aimed at judging a learner’s attainment of the curriculum’s learning outcomes, whether for summative (determining satisfactory progression in or completion of training), or formative (developmental) purposes. An outcome can be defined as a level of performance or behaviour that a trainee is expected to achieve as part of their development according to their stage of training within the curriculum.

**CAPABILITIES**
High-level, complex professional capabilities which are flexible and adaptive in a wide range of contexts; they require the complex synthesis of knowledge, skills, behaviours and experience enabling practitioners can manage real-life patient scenarios.

**CURRICULUM**
A statement of the intended aims and objectives, content, experiences, learning outcomes and processes of a learning programme, including a description of the structure and expected methods of learning, teaching, assessment, feedback and supervision.

**DOMAIN**
A collection of commonly-themed capabilities and learning outcomes

**EXPERIENCE (BREADTH OF)**
When a pharmacist in training has had enough experience to be able to practise safely and competently at the expected level of performance. This is not linked to a quantitative measure rather when the pharmacist in training has acquired and consolidated the learning to achieve the curriculum outcome(s).

**OUTCOMES**
Describe what is to be achieved by learners during training; these describe the knowledge, skills, behaviours, and experience of those who successfully complete the training and assessment programme.

**PATIENT-FACING**
Providing clinical services to patients through a mixture of direct (face to face) and indirect (via telephone, video and other technologies) patient contact.

**PROGRAMME OF ASSESSMENT**
The set of individual assessment activities planned to assess the curriculum outcomes. The synthesis of these individual assessments into a programme allows for integrated judgments on learner performance.

**PROGRAMME OF LEARNING**
A matrix of the domain, capabilities and outcomes determined as necessary to deliver the services defined by the curriculum purpose.

**QUALITY ASSURANCE**
The standards, systems and processes in place to maintain and enhance quality to assure patients and the public that pharmacists meet the required standards.

**QUALITY CONTROL**
RPS has a role in quality control in terms of ensuring national curricula and assessments are consistently developed and delivered in line with the quality standards defined in the RPS curriculum development guidance.

Educational commissioning bodies and employers are responsible for managing training programmes and the progress of foundation pharmacists in training. These organisations will have quality management systems in place to satisfy themselves that education providers are meeting the required standards.
Introduction

1.1 Background

The Royal Pharmaceutical Society (RPS) recognises the importance of foundation training for all newly qualified patient-facing pharmacists across the UK. To support this, the RPS is currently developing a national foundation pharmacist curriculum to provide a standardised approach to foundation training regardless of sector or geography. Underpinned by the RPS Foundation Pharmacist Framework (2019), developed from a multi-method role analysis of foundation level practice, the national foundation curriculum is being developed through a collaborative programme with representation and input from across all main UK stakeholders ensuring geographic and sector diversity. The anticipated launch date for the national foundation curriculum is March 2021.

The covid-19 pandemic has had a huge impact on the pharmacy profession and, moreover, has significantly interrupted the 2019-2020 pre-registration cohort’s training and assessment. With members of this cohort able to apply to join the GPhC register as provisionally registered pharmacists from July 2020, the RPS recognises the importance of providing support for these pharmacists as they transition to full registration and beyond. In addition, the RPS is committed to ensuring that any support programme they undertake during this period is relevant to future foundation training programmes.

Therefore, the RPS has developed the following interim foundation curriculum to provide provisionally registered pharmacists with a clear educational structure to guide their learning and to inform the design of support and/or training programmes for this cohort whilst the national foundation curriculum is finalised. This bridging curriculum is designed to allow a seamless transition to national foundation training programmes when these are launched in 2021, allowing any learning undertaken during the provisional registration period and beyond to be captured and formalised for future application.
This interim curriculum is designed to support the development of foundation pharmacists who will:

- deliver person-centred care
- apply their clinical knowledge and skills in practice
- draw upon and critically appraise appropriate information to inform decision making, managing uncertainty and risk appropriately
- practise professionally
- communicate effectively, placing the patient at the centre of any interaction
- collaborate with the wider pharmacy and multidisciplinary team to promote positive patient outcomes
- promote pharmacy services and develop the profession
- recognise opportunities for change, innovation and improvement
- demonstrate self-awareness, resilience and adaptability
- seek to develop personally, proactively identifying learning opportunities and reflect on feedback
- support the education and development of colleagues
- participate in research and manage data appropriately

1.3 Scope

The interim foundation curriculum is designed to support provisionally registered patient-facing pharmacists working within community, primary and secondary care until full registration and beyond up to the launch of the national foundation curriculum in March 2021.
1.5 Overall structure of the interim curriculum

The interim foundation curriculum consists of 12 capabilities which describe the key clinical and professional aspects of foundation pharmacist practice. Each capability is a synthesis of outcomes which describe the knowledge, skills and behaviours that should be demonstrated by a pharmacist on entry to foundation practice. The capabilities and associated learning outcomes have been grouped together into the five broad domains which are mirrored through all RPS postgraduate curricula; supporting continuum of practice from foundation to advanced and consultant practice.

- Professional practice
- Communication and collaborative working
- Leadership and management
- Education
- Research

The curriculum is supported by supplementary assessment guidance which suggests evidence types to demonstrate achievement of the outcomes for inclusion in the RPS e-portfolio; these are not intended to be mandatory or exhaustive and alternative supporting evidence may be used by individuals and their supervisors.

The national foundation curriculum will provide greater detail to stakeholders about the formal assessment of the outcomes, including detailed descriptors to contextualise the expected level of performance required to meet each outcome. It is recognised the provisional registrants will also have the GPhC registration assessments for which to prepare and, consequently, the assessment strategy for this interim curriculum has been left purposefully flexible and light touch at this stage to avoid assessment burden for learners. More explicit guidance on the assessment requirements of the national curriculum will be shared in March 2021.
## 2 The programme of learning

The interim foundation curriculum is made up of five domains, each comprised of a set of capabilities and learning outcomes.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Capabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Practice</td>
<td>Clinical knowledge, skills and decision making; person-centred care; professionalism</td>
</tr>
<tr>
<td>Communication and Collaborative Working</td>
<td>Communicates effectively, places the patient at the centre; collaborates with the wider team</td>
</tr>
<tr>
<td>Leadership and Management</td>
<td>Promotes pharmacy services and develops the profession; recognises opportunities for change, innovation and quality improvement; demonstrates self-awareness, resilience and adaptability</td>
</tr>
<tr>
<td>Education</td>
<td>Develops personally and supports the education and development of others</td>
</tr>
<tr>
<td>Research</td>
<td>Carries out research and manages data appropriately</td>
</tr>
</tbody>
</table>

![Figure 2. Overview of domains and capabilities](image-url)
For the sake of clarity, definitions of key education terms relating to the programme of learning are below:

**The programme of learning** is the matrix of the domains, capabilities and outcomes determined as necessary to deliver the services and patient benefits defined in the curriculum purpose.

**Domains** are collections of commonly themed capabilities and learning outcomes. There are five domains in the interim foundation pharmacist programme of learning.

**Capabilities** are high-level, complex professional capabilities which are flexible and adaptive in a wide range of contexts; they require the complex synthesis of knowledge, skills, behaviours and experience enabling practitioners to manage real-life clinical scenarios. Each of the domains in this programme of learning is made up of between one to four capabilities and there are 12 capabilities in total in the programme of learning.

**Outcomes** describe what is to be achieved by pharmacists by the end of the programme of learning; these describe the knowledge, skills, behaviours and experience of those who successfully complete the programme and demonstrate their ability to practise at foundation level through the programme of assessment. This programme of learning is comprised of 40 outcomes.

---

### 2.1 Stakeholders

This curriculum document is designed to be used by a range of stakeholders:

**Learners** can monitor their progress through training, ensuring they are gaining the appropriate experience to continue developing as a foundation pharmacist in training and meet the curriculum outcomes. This will contribute to appraisal, self-assessment, self-directed learning, and formative assessment. Learners will be able to transfer this learning and evidence to the national foundation programme and its associated assessment(s) when it is launched in 2021.

**Supervisors** can ensure foundation pharmacists are developing the knowledge, skills and behaviours outlined in the curriculum, and are being exposed to the appropriate experience to gain these. They can use the curriculum to verify that they are providing teaching, support and guidance to cover the right areas.

**Training providers** will be able to design structured learning programmes to meet the curriculum outcomes and ensure local teaching maps to the curriculum.

**Employers** will be able to use the curriculum to support professional and personal development plans for employees’ development.

**Patients and lay people** will be able to see what their pharmacists are working towards in their foundation training and the standard required for the completion of foundation training.

**Assessors** (if relevant) will be able to refer to the curriculum outcomes to support and standardise their assessment activities.
This group has agreed the overall structure, level and purpose of the national curriculum which has been adopted for this interim curriculum and the outcomes detailed within the programme of learning represent the draft outcomes for the national curriculum which are currently under review by the members of this group.

### 2.3 Inclusivity

The RPS is committed to celebrating the diversity of the pharmacy profession and ensuring its curricula are inclusive and accessible to all. Feedback will consequently be sought from foundation pharmacists undertaking the interim curriculum on the inclusivity of the draft outcomes, including where possible engaging with:

- Pharmacists from different ethnicities
- Pharmacists with disabilities
- Pharmacists across the spectrum of sexual orientation
- Pharmacists from across the spectrum of gender
- Pharmacists who work less than full-time
- Pharmacists who have taken a break from training e.g. those taking family-friendly leave
- Pharmacists working in different sectors of practice and settings
- Pharmacists in different geographies and devolved nations

In addition, there will be an independent review of the programme of learning during the consultation phase by representative groups of the above as well as the undertaking of a full Equality Impact assessment.
<table>
<thead>
<tr>
<th>DOMAIN</th>
<th>CAPABILITIES</th>
<th>OUTCOMES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Applies clinical knowledge and skills in practice</td>
<td>1.1 Applies evidence based clinical knowledge and up to date guidance to make suitable recommendations or take appropriate actions with confidence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.2 Undertakes a holistic clinical review of a person’s medicines to ensure they are appropriate</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.3 Conducts patient clinical examinations and assessments, gathers information and takes histories proficiently; develops diagnostic skills</td>
</tr>
<tr>
<td></td>
<td>Draws upon and critically appraises appropriate information to inform decision making; manages uncertainty and risk appropriately</td>
<td>1.4 Accesses and critically appraises appropriate information to make evidence-based decisions in an efficient and systematic manner; ensures high attention to detail is maintained when making decisions regarding the individual receiving care</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.5 Manages uncertainty and risk appropriately</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.6 Takes the cost-effectiveness of a decision into account where necessary, working to the appropriate formulary</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.7 Proactively recognises and corrects the overuse of medicines; positively impacts on the usage and stewardship of medicines at an individual and population level.</td>
</tr>
<tr>
<td></td>
<td>Delivers person-centred care</td>
<td>1.8 Keeps the individual at the centre of their approach to care at all times</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.9 Supports and facilitates the seamless continuity of care for each individual</td>
</tr>
<tr>
<td></td>
<td>Practises professionally</td>
<td>1.10 Actively practises honesty and integrity in all that they do; upholds a duty of candour</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.11 Treats others as equals and with dignity and respect, supporting them regardless of individual circumstances or background; actively promotes this in their practice</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.12 Is accountable and responsible for own decisions and actions, understanding the potential consequences of these decisions across the whole care pathway</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.13 Works within ethical guidelines and legal frameworks, including consent and confidentiality; seeks to gain permission from the individual before accessing confidential records where necessary</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.14 Recognises and works safely within own level of competence, understanding the importance of working within this; knows when it is appropriate to escalate a situation</td>
</tr>
<tr>
<td>Domain</td>
<td>Capabilities</td>
<td>Outcomes</td>
</tr>
<tr>
<td>--------</td>
<td>--------------</td>
<td>----------</td>
</tr>
<tr>
<td>2</td>
<td>2.1 Assimilates and communicates information clearly and calmly to individuals receiving care, or those involved in an individual’s care, through different mediums; tailors messages depending on the audience; responds appropriately to questions; adapts language in challenging situations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.2 Uses effective questioning, active listening and identifies nonverbal cues when engaging with individuals receiving care, or with those involved in an individual’s care, to support own decision-making process</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.3 Consults with individuals through open conversation; explores physical, psychological and social aspects for that person, remaining open to what an individual might share; empowers the individual creating an environment to support shared decision making around personal healthcare outcomes and changes to health behaviour</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.4 Demonstrates empathy; seeks to understand a situation from the perspective of each individual; builds rapport with colleagues and individuals receiving care</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.5 Builds strong relationships across the multidisciplinary team; works in partnership to promote positive outcomes; delegates and refers appropriately to members of the pharmacy and multidisciplinary team, demonstrating an awareness of and using the expertise and knowledge of others.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.6 Demonstrates confidence in speaking to healthcare professionals across the multidisciplinary team; uses appropriate language to influence others</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.7 Recognises the value of members of the multidisciplinary team across the whole care pathway, engages with them effectively and draws on those, both present and virtually, to develop breadth of skills and support own practice</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.8 Support members of the multidisciplinary team in the safe use of medicines and to meet the individual needs of those receiving care; effectively influences the decision-making process across the team regarding medicines, where appropriate</td>
<td></td>
</tr>
<tr>
<td><strong>DOMA IN</strong></td>
<td><strong>CAPABILITIES</strong></td>
<td><strong>OUTCOMES</strong></td>
</tr>
<tr>
<td>------------</td>
<td>-----------------</td>
<td>--------------</td>
</tr>
<tr>
<td>3 LEADERSHIP &amp; MANAGEMENT</td>
<td>Promotes pharmacy services and develops the profession</td>
<td>3.1 Proactively, demonstrates and promotes the value of pharmacy across other healthcare professionals; educates the public about the role of the pharmacy team within individual healthcare management</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.2 Communicates vision and goals to the broader team to support with achieving group tasks</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.3 Critically analyses business needs; is mindful of commercial aspects within the pharmacy context; seeks to promote new pharmacy services</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.4 Draws upon networks to understand the range of clinical, medicines-related and public health activities offered by a pharmacist in all sectors and across the care pathway; recognises the changes to and the opportunities within the future role of pharmacists; seeks out opportunities to modify own approach and deliver different services</td>
</tr>
<tr>
<td></td>
<td>Recognises opportunities for change, innovation and quality improvement</td>
<td>3.5 Is open to new approaches and ways of completing work tasks and appropriately challenges others to consider change to improve the quality of care; shares own innovative ideas to improve working practices, both internally and externally</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.6 Effectively identifies and raises concerns regarding patient safety and risk management; seeks to improve the quality and safety of the use of medicines routinely</td>
</tr>
<tr>
<td></td>
<td>Demonstrates self-awareness, resilience and adaptability</td>
<td>3.7 Demonstrates self-awareness and emotional intelligence within the role, reflects on and understands the impact a situation may have on one’s own resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.8 Remains composed in situations involving the individual receiving care, or involving colleagues, even in challenging or high-pressure situations; develops and draws upon support network in challenging situations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.9 Effectively, efficiently and safely manages multiple priorities; maintains accuracy when in a challenging situation; manages own time and workload calmly; demonstrating resilience</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.10 Works flexibly within unfamiliar environments; is able to adapt and work effectively across different sectors within the pharmacy profession by applying previous learning to new settings</td>
</tr>
<tr>
<td><strong>DOMAIN</strong></td>
<td><strong>CAPABILITIES</strong></td>
<td><strong>OUTCOMES</strong></td>
</tr>
<tr>
<td>------------</td>
<td>-----------------</td>
<td>--------------</td>
</tr>
<tr>
<td><strong>4 EDUCATION</strong></td>
<td>Develops personally through proactively identifying learning opportunities and reflecting on feedback</td>
<td><strong>4.1</strong> Demonstrates a positive attitude to development within the role; proactively seeks learning experiences to support own practice, and has a desire and motivation to try new things</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>4.2</strong> Demonstrates a commitment to self-development throughout own career: reflects on personal strengths, areas for development and potential barriers to achieving these; develops a personal development plan that reflects the breadth of ongoing professional development and includes potential innovations in medicine and practice development</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>4.3</strong> Seeks feedback and support from colleagues where appropriate; is receptive to information or advice given to them by others to make changes to own practice</td>
</tr>
<tr>
<td></td>
<td>Supports the education and development of colleagues</td>
<td><strong>4.4</strong> Acts as a role model, mentoring and leading others within the pharmacy and multidisciplinary team, where appropriate</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>4.5</strong> Provides the pharmacy and multidisciplinary team with information and education, for example on clinical, legal and governance aspects of medicines</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>4.6</strong> Effectively uses own expertise to provide guidance, support or supervision for less experienced members of the pharmacy and multidisciplinary team</td>
</tr>
<tr>
<td><strong>5 RESEARCH</strong></td>
<td>Participates in research and manages data appropriately</td>
<td><strong>5.1</strong> Seeks to be involved in research activities; actively disseminates outcomes to appropriate audiences</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>5.2</strong> Demonstrates an understanding that data can support improving care; values the importance of the skills required for identification, interpretation, analysis and the effective use of data within clinical practice; considers how to use data to improve outcomes for individuals; adheres to digital copyright, intellectual property and privacy rules and regulations</td>
</tr>
</tbody>
</table>
3
Training and supervision requirements

3.1 Experience requirements

To be able to satisfactorily meet the outcomes of this curriculum foundation pharmacists will require patient facing experience in at least one sector of pharmacy practice.

If foundation pharmacists in training are undertaking other formal training programmes, the learning can be applied to this interim curriculum.

3.2 Supervision requirements

All supervisors should be mindful of the impact of covid-19 on pre-registration pharmacist training and that preparation for the rescheduled assessment will be the focus for provisionally registered pharmacists in the initial phase of their foundation training.

There are three different types of supervision roles that are relevant to supporting foundation pharmacists to achieve the outcomes of the interim foundation curriculum: senior pharmacist, educational supervisor and practice supervisor. In some work settings and smaller organisations, these roles may be delivered by the same person. Where the senior pharmacist and educational supervisor are different people, an agreement between the provisionally registered pharmacist, senior pharmacist and educational supervisor clearly defining the discrete roles and responsibilities for each role as well as a process for communicating and raising concerns is recommended.

To meet the outcomes of the interim foundation curriculum, pharmacists should be supported by educational and practice supervisors with regular scheduled and documented meetings which focus on constructing an individualised training and development plan.

3.2.1 During period of provisional registration

During the period of provisional registration, provisionally registered pharmacists must practise under the guidance and supervision of a senior pharmacist. This role is different to that of the educational and practice supervisors and, during this period, the GPhC requirements must be met. The role of the senior pharmacist is only required during the period of provisional registration.

Further guidance on the senior pharmacist role can be found here
3.2.2 During the interim foundation training programme

The key educational relationships will be between the foundation pharmacist in training and their educational and practice supervisors. The foundation pharmacist in training will need to ensure they act as a link between their educational and practice supervisors. All supervisors should be familiar with the programme of learning, the educational approach and the assessment processes of the interim foundation programme.

EDUCATIONAL SUPERVISORS

All foundation pharmacists in training must have a named individual who is responsible for the overall supervision and management of their educational progress during the programme. This role can be delivered remotely. The educational supervisor will help guide the foundation pharmacist in training with their personal and professional development and, in addition to the skills of the practice supervisor, should also have an understanding of educational theory. They are expected to undertake supervised learning events, monitor the quality of any evidence of learning submitted by the foundation pharmacist in training, provide timely and effective feedback on their progress, and guide reflective practice. The educational supervisor should be a positive role model and have an awareness of their responsibilities for promoting equality and diversity. In summary, the educational supervisor has overall responsibility for confirming the foundation pharmacist in training has met the outcomes of the programme.

The educational supervisor should:
• understand the range of learning, assessment and support opportunities for learning in the workplace to cover the curriculum
• ensure that the foundation pharmacist in training is receiving appropriate support, training and teaching
• work collaboratively with colleagues to monitor and support the foundation pharmacist in training’s progression
• foster the foundation pharmacist in training’s autonomy
• have a good understanding of any supporting IT tools e.g. e-portfolio and of what is considered acceptable progress
• review learning and provide formative feedback for reflective practice
• assess formal work-place evidence against curriculum
• meet regularly with the foundation pharmacist in training to review progress through the curriculum
• identify and support foundation pharmacists in training experiencing difficulties, including liaising with relevant practice supervisor(s), interfacing with employment performance management procedures and ensuring agreed steps/actions are shared as appropriate
PRACTICE SUPERVISORS

Practice supervisors are responsible for the day-to-day supervision in the workplace. Practice supervisors integrate workplace learning with service provision by enabling the foundation pharmacist in training to take responsibility for real-life patient management whilst managing risk to patient safety through effective clinical governance. Practice supervisors should be positive role models and should themselves have appropriate experience to effectively supervise the foundation pharmacist in training. To effectively deliver the curriculum, practice supervisors should be available to the foundation pharmacist in training, provide teaching, learning and development opportunities based on the needs of the individual, provide regular and effective feedback, undertake supervised learning events (SLEs), and be present to support the foundation pharmacist in training when issues arise. Some elements of practice supervision may be delegated to suitably experienced members of the MDT and practice supervision may be delivered remotely. Practice supervisors should also have an awareness of their responsibilities for promoting equality and diversity.

A practice supervisor should:

- understand how different foundation pharmacists in training learn best, the relevance of this to teaching and training, and is able to adapt their own style accordingly
- understand how best to teach application of clinical knowledge or a clinical skill, and adapt according to the learning style of the foundation pharmacist in training
- use a variety of effective teaching methods delivered in a workplace setting
- understand the importance of reflecting on and evaluating their own teaching/training
- tailor and provide effective feedback to individual foundation pharmacists in training
- use reflective discussion to support the learner to explore and manage challenges, complexity and other pressures in their roles
- identify learners who are struggling, instigate initial steps in supporting trainees with difficulties, and ensure the educational supervisor is aware of agreed steps / actions where appropriate

There will be times when foundation pharmacists in training do not progress as expected and need additional support. This may result from poor performance in the workplace, extended absence from practice or other issues which prevent the learner experiencing sufficient learning and development opportunities. The practice and / or educational supervisor(s) are responsible for identifying when this is necessary to enable the required support to be put in place as soon as possible. The foundation pharmacist in training should always be encouraged to work with their supervisor(s) to resolve any issues affecting progress or performance.
4
Recommended learning to meet the curriculum outcomes

Foundation pharmacists in training are expected to undertake a range of different learning activities during their training in order to gain the knowledge, skills and experience required to meet the outcomes.

4.1 Work-based learning

Work-based learning is a fundamental part of developing the knowledge, skills and behaviours required to meet the outcomes of this curriculum. Working closely with practice and educational supervisors, foundation pharmacists in training will be required to work with real-life patients in authentic settings to develop the application and synthesis of knowledge and clinical skills implicit to the curriculum outcomes. This should involve being observed, receiving feedback, and reflecting on practice, all of which are fundamental of workplace-based learning.

4.2 Self-directed learning

As post-graduate learners, self-directed learning will be key to identifying and addressing learning needs in line with the outcomes of this curriculum. This will include self-assessment of knowledge, skills and behaviours against the curriculum and identifying areas requiring further development and self-study. This will include accessing the myriad resources available, from reading around a particular topic, to reflecting on experiences or independently seeking out experience in new environments.

4.3 Learning with others

Learning with others is an effective way to learn from the experience of others and can help foundation pharmacists in training not feel isolated when undertaking training. Learning with others may include learning with peers, more experienced colleagues or other healthcare professionals.

Learning with peers allows foundation pharmacists in training to share similar experiences, explore the curriculum together, discuss and reflect on areas of practice and discuss effective approaches to learning and assessments.

Learning with other healthcare professionals is vital as the broad knowledge, skills and behaviours required by pharmacists at this level of practice are rarely provided solely by other pharmacists. Engagement and learning with a wide range of colleagues, such as medics, nurses and administrative staff, will be important to meet the curriculum outcomes. Understanding the interfaces pharmacists and other clinical professionals is key to provide effective patient care. Equally important is engagement with non-clinical staff, such as receptionists and managers, who make key decisions about patient care and the services at the heart of this curriculum. Foundation pharmacists in training are encouraged to exploit opportunities in their training to join with other healthcare professionals in shared education and learning events.
4.4 Formal learning

There are, of course, many learning resources and training programmes organised at both regional and national levels offered by third party training providers which are designed to support foundation pharmacists in training to meet the curriculum outcomes.

4.5 Developing life-long learners

Learning does not stop when the outcomes in this curriculum have been demonstrated. In an ever-changing healthcare environment, it is essential that foundation pharmacists in training develop the ability to keep their knowledge and skills up-to-date to continue to provide safe and effective patient care. As pharmacists take on more advanced roles, their learning needs will evolve and the RPS post-registration professional development structure is designed to provide a scaffold for pharmacists to develop their knowledge, skills and behaviours to effectively and safely undertake these advancing roles.
5 The assessment programme

The interim curriculum has been designed as a supportive tool initially for provisionally registered pharmacists and to bridge the gap until the full national foundation curriculum is published. Therefore, the programme of assessment is very light touch and there is no requirement for summative evidence that the foundation pharmacist in training has met the curriculum outcomes during their training. Learning and development can be enhanced by formative assessment and some of the work-based assessment instruments that can be used for this are included below.

The national foundation curriculum will include an assessment programme detailing the expected levels of performance and details of the summative assessment arrangements required to demonstrate satisfactory achievement of the curriculum outcomes. It will also describe the governance structures, quality assurance mechanisms and inclusivity processes to ensure the assessment programme is fit for purpose, accessible and relevant to all sectors of patient-facing pharmacy practice across the UK.

5.1 Evidence types

A range of tools are included within the RPS e-portfolio that the foundation pharmacist in training and their supervisor(s) may find helpful to record learning and demonstrate progress towards the outcomes. Any evidence generated during the interim curriculum may be used when the foundation pharmacist in training transitions to the national foundation curriculum. The tools below are not mandated for use with the interim curriculum and individuals may choose to upload other forms of evidence to their portfolio.

SUPERVISED LEARNING EVENTS (SLES)
These provide an important opportunity for learning and development in the workplace and help the foundation pharmacist in training develop their clinical and professional practice. Any SLEs undertaken within the interim curriculum will be formative, enabling foundation pharmacists in training to receive immediate feedback, reflect on their own performance, and identify areas for development. Feedback should be of high quality and include an action plan for future development. Most encounters experienced in day to day practice can provide an opportunity for reflection and feedback and this process should occur frequently.

MINI-CLINICAL EVALUATION EXERCISE (MINI-CEX)
These assess skills, attitudes and behaviours essential to the provision of high quality care. It is a snapshot of practice, involving the observation and assessment of day-to-day work.

Examples of when the mini-CEX could be used include medicines reconciliation, providing pharmaceutical care to patients presenting with common acute and long term presentations, discussing and agreeing treatment / patient management options with another healthcare professional.

CASE-BASED DISCUSSION (CBD)
These are used to retrospectively evaluate the FP in training’s input into patient care. Structured discussion is undertaken remote from the patient and is used to explore clinical reasoning, decision making and application of clinical knowledge in practice.
Examples of when the CbD could be used include after conducting a medication review, preparing and implementing a pharmaceutical care plan (or equivalent), initiation of an unlicensed medicine, dealing with ethical and legal issues relating to clinical practice.

DIRECT OBSERVATION OF PROCEDURAL SKILLS (DOPS)
Enables pharmacists to demonstrate a range of practical or procedural skills that are essential to the provision of safe and effective pharmaceutical care.

Examples of when the DOPS could be used include performing a physical assessment (e.g., blood pressure monitoring), assessing compatibility or stability, recording and reporting an incident / adverse drug reaction.

MEDICINES RELATED CONSULTATION FRAMEWORK (MRCF)
A reflective tool that can be used to support the development of consultation behaviours and skills. It provides a structured approach for reviewing a patient’s medicines to identify any problems they may have.

Examples of when the MRCF could be used include consulting with a patient in any setting.

OTHER TYPES OF EVIDENCE

CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD) RECORD
Enables recording of planned or unplanned learning and is aligned to the GPhC CPD template. Where possible, CPD entries should relate to the curriculum outcomes and reflect the context of practice.

REFLECTIVE SUMMARY
A reflective tool to guide and record the FP in training’s own perspectives, opinions and feelings, consider feedback from supervisors and peers, and demonstrate learning in practice.

Examples of when the reflective summary could be used include investigating an incident and taking action to prevent the incident from happening again, undertaking a challenging consultation with a patient / discussion with a colleague, delivering an education or training session.

Contact:
education@rpharms.com