

## APPENDIX 6: Development phases of RPS Professional Development Programmes

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### Phase I: Launching the Faculty Programme, establishing assessment of Recognition of Prior Experience (RPE) and principles of assessment and assessors during 2013

From 2010, there was a call from pharmacists, across sectors and at different career stages, for some form of professional recognition of the profession. Central to the strategic thinking was the concept of credentialing process that would act as a workforce incentive to develop a broad scope of advanced competencies necessary for service delivery and patient care. During 2012, a cross-sector GB-wide scoping of the profession's appetite for professional recognition was undertaken: the response was overwhelmingly positive and the Faculty was launched in 2013 as a professional development programme to support and assess the three stages of advanced pharmacy practice aligned with the validated Advanced Practice Framework.

The assessment comprises three elements to provide a holistic overview of an individual's achievement and performance over a period of time

**Breadth of practice:** through a portfolio which covers all elements of practice, care and professional endeavour.

**Depth of practice:** through a CV and accompanying assessment of practice, where appropriate.

**Peer assessment:** through testimonials (offering subjective viewpoints) and peer assessment tools (objective assessments at points in time).

The Faculty is aimed at RPS members who have completed a minimum of two years post-registration experience, once early or foundation years have been completed. The three stages are:

- I. Advanced Stage One – members in their second 1000 days of practice, established members returning to work after a career break or changing their scope or sector of practice
- II. Advanced Stage Two – members who are established in their careers or aiming to achieve excellence in their roles
- III. Mastery – members who are practicing at an exceptional level, in highly complex environments and in very senior roles in the profession locally, regionally and nationally

During 2013, there were two main elements that needed to be undertaken:

- Establishing the assessment process
- Establishing standards for assessors

A selection of 25 RPS Fellows with experience in education, assessments and development programmes from across GB were approached and invited to test the process (completing a portfolio and submitting alongside the CV and peer testimonials) alongside the principles for assessment. In order to do this, they all submitted for assessment and acted as assessors for all others who submitted, to establish the principles for assessment and the assessors themselves. This process is outlined in the Faculty Assessments First wave Report, 2013.

### Assessments need to be:

<b>Practical:</b>	Emulating a situation the situation a pharmacist operates in; reflective of scope of practice
<b>Proportionate:</b>	a balance between robust, fair and appropriate to the complexity of the care and risk to patients and the public
<b>Consistent:</b>	Ensuring experienced, excellent and exceptional practice is always recognised as such throughout all sectors of practice.

From this, the process for RPE assessments alongside the principles for assessors and training were established and further tested in the subsequent submissions during 2014. During 2014, it was important to focus on establishing more numbers of those who had been assessed and therefore those who were eligible to be assessors. Having a breadth of trained assessors, from across sectors and across nations was agreed to be a priority so that we could ensure a consistent approach to assessment as well as consistency between assessors.

## Phase 2: Establishing the Foundation Programme alongside accreditation of training and assessments during 2014

The Foundation Programme enables practitioners to gain core training required for all sectors and settings, so that they are better equipped to adapt and deliver safe and effective pharmaceutical care. Of particular note was the evidence around innovative models of workplace education and competency-based assessment that found close alignment with medical foundation year structures. Once the processes for assessing advanced practice were established and tested, included the training needed for assessors. Attention turned to establishing the Foundation programme.

Empirical development work on early years' foundation training had already established the principles and impact on workforce development during the early stages of careers (often called "First 1000 days"). The RPS Foundation Programme is for practitioners who are in their first 1000 days of practice, returning to work after a career break, changing their scope of practice or practice environment, and those who are simply working steadily in their practice setting.

During 2014, following the launch of the Foundation programme, we sought to establish principles for accreditation of workplace training and work based assessments to chart a Foundation practitioner's development from day 1 to day-1000, ready to embark upon advanced practice. At this stage, the work of the Faculty Board and Panels was extended to encompass Foundation as well as Faculty. This work extended into 2015, alongside the recruitment of Foundation pharmacist on the programme following the 2015 registration.

## Phase 3: Establishing the assessment of Practice of those between 2 and 10 years qualification (FPA) in line with the above principles during 2015

In February 2015, the Faculty opened its submission process to practitioners who have been registered for between 2 and 10 years. In addition to submitting a portfolio of practice, peer testimonials, and a CV, practitioners were required to undertake a Faculty Practice Assessment (FPA), to support assessment of the depth of their knowledge in the context of the area in which they practice.

The First Wave FPA assessment utilised *Case based Discussion* (CbD) methodology to assess practice. Practitioners were required to present a single case of their choosing to their 2 Faculty assessors. The report of this discussion was then added to the practitioner's portfolio to support the assessment of cluster 1 of the APF: Expert Professional Practice.

Feedback was sought from practitioners, assessors and the RPS Credentialing Panel, and recommendations were made to evolve the process to address concerns that a single case did not provide sufficient evidence of consistency of practice. The RPS Credentialing Panel approved the development of a model, which allowed an assessor to be able to review the 'normal' level of practice of an applicant - the assessment should review a wider body of work.

This aligned well with the Foundation formative assessment process, whereby practitioners are required to undertake a number of workplace-based assessments continuously throughout their Foundation training, with a variety of workplace 'assessors', with periodic appraisal and discussions with their Foundation Tutor utilising the **Record of In-Training Assessment (RITA)** form. Continuous formative assessment provides an indication of the consistency of a Foundation pharmacist's practice and development.

In April 2016, a new model was launched - **Record of Expert Professional Practice (REPP)**. REPP retains the FPA principle of orally presented evidence, however practitioners are required to undertake a number of practice based assessments over the 5 year Faculty cycle, either in the workplace, with RPS Affiliated Groups, or with RPS accredited providers. This collection of assessments will then be reviewed and discussed with a REPP Assessor. The REPP form will be completed at this meeting, which will provide the additional piece of evidence for the Faculty portfolio. RPS Affiliated Partners agreed to pilot practice based assessments where possible with applicants who are ready and prepared, at the Clinical Pharmacy Congress on 22<sup>nd</sup> April 2016. The learning and development have been incorporated into this Roadmap.

#### **Phase 4: Establishing the Pre-Foundation Programme with BPSA during 2016**

The recently launched Pre-Foundation Programme will provide access to guidance and tools to support students from day one of their MPharm degree and beyond, making the transition into pre-registration training and foundation practice seamless.

The Pre-Foundation Programme will additionally give RPS members the opportunity to market themselves to future employers as unique individuals who are committed to their professional and personal development. This is becoming increasingly important as competition for jobs and training places intensifies.

The Programme will be developed during 2016; the principles of the programme will be closely aligned to existing development programmes- the RPS Foundation Programme and the RPS Faculty.

At its core will be the Pre-Foundation framework- this will complement undergraduate programmes and enable students to develop key knowledge, skills and behaviours that they can apply to course assignments, practical assessments, projects, and most importantly prepare them for workplace based placements and pharmacy practice. We will work with HEE / NES and wCPPE to ensure the support available from RPOS aligns with developments across the 3 nations.

All RPS Professional Development Programmes contain key elements for professional support, development and recognition:

- Portfolios of practice underpinned by developmental **frameworks**
- Library of Knowledge: professional **curricula** and **resources**
- **Assessments**
- **Support**

All elements are **quality assured** through our accreditation programmes.

#### **Phase 5: Establishing the roadmap of support, development and assessment to develop, establish and maintain advanced practice, specialist and generalist practice and provide the assurances required to employers, commissioners, regulators, patients and the public**

The above phases have led to this stage to ensure that all the tools, processes, governances and methods are now aligned to create a roadmap that provide assurance that the Foundation and Faculty programmes, alongside the support, guidance, quality assurance mechanisms and the range of assessment tools we have developed (for both self and peer assessment) can (as above):

- I. **Mitigate the risk** to patients and the public from the range of advanced generalist and specialist practice and what is a proportionate approach to mitigate that risk
- II. **Demonstrate fitness for purpose** within a system that supports whatever mitigation is required, and what are the components of that system?
- III. **Provide assurance** the employer (NHS and non NHS) and commissioner?
- IV. **Proportionately** provide a robust, effective way to make this happen, which also supports career and professional development

Seek to establish an **evidence base** that demonstrates improved quality, value and patient outcomes.