



University of Strathclyde

**Strathclyde Institute of Pharmacy &
Biomedical Sciences**

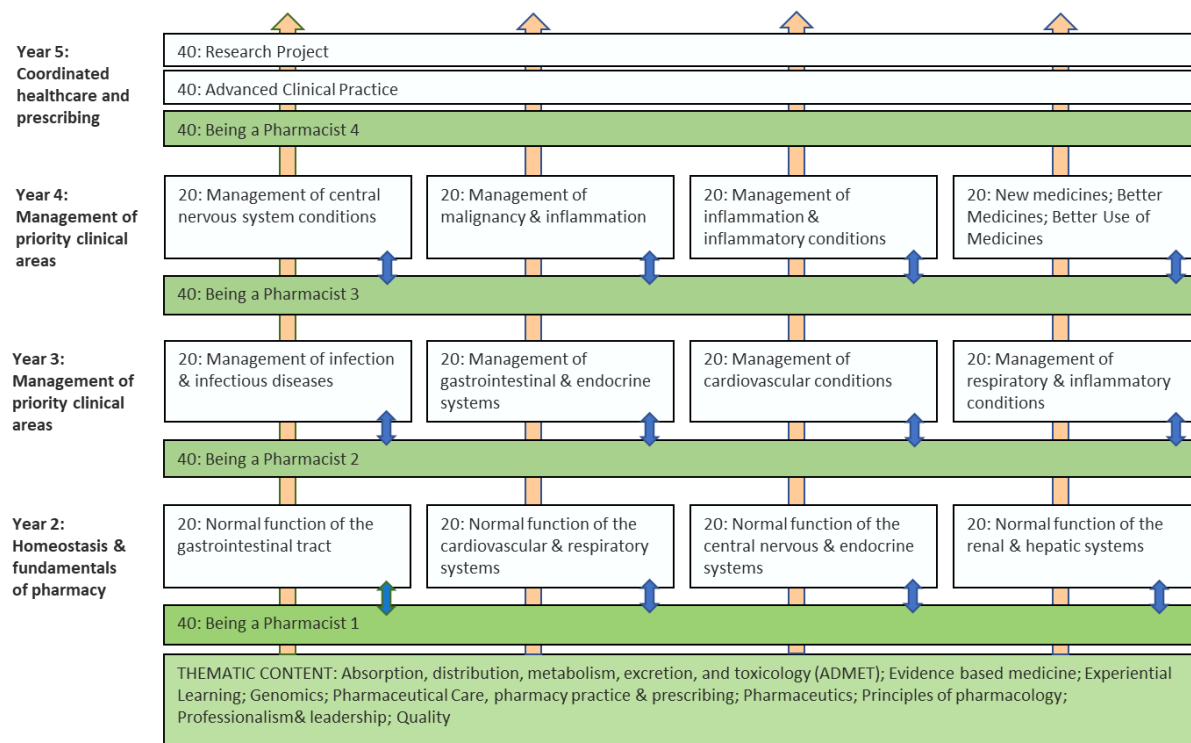
**MPharm Experiential Learning Handbook
2025/26**



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1. The MPharm Programme and Experiential Learning MPharm structure 2025/26



Our MPharm is constructed as a spiral curriculum where students will revisit topics in ever increasing complexity. The first year of the course (year 2) focuses on normal function of the body and the treatment of minor ailments by following the WWHAM mnemonic. Years 3 and 4 revisit the major clinical areas initially as single disease considerations but move to treating patient with multiple morbidities as the years progress – for example treating a patient with infection who is immunocompromised will be covered in the Management of Infection and Infectious Diseases module and Management of Malignancy and Inflammation modules. The final year of study brings all this learning together in modules where the students will apply their knowledge of all areas of pharmacy to understanding where guidelines cannot be applied and how a decision for treatment can be made based on the evidence available. Please see one page curriculum summary (appendix 1) for more information about our curriculum.

In our programme, the numbering of years (Year 2 to Year 5) reflects students starting the course with Advanced Highers which are the same educational level as year 1 at University. Students in Year 2 will have five days of experiential learning (EL) in community pharmacy and then will then have a week of each community pharmacy and hospital pharmacy in Year 3. Students in Year 4 will experience EL with one week in each semester and Year 5 will experience EL with two weeks in each semester and rotate through community, hospital, primary care or specialist pharmacy sectors.

All our placements are nationally co-ordinated in conjunction with NHS Education for Scotland (NES) and include placements in community, hospital, primary care, NHS 24, community/specialist hospitals, remote and rural community placements, mental health and prison pharmacy. EL sites could be anywhere in Scotland.

Time in each sector of pharmacy for session 2025/26

Year	Community Practice	Hospital Practice	Primary Care	Specialist
Year 2	5 days	N/A	N/A	N/A
Year 3	5 days	5 days	N/A	N/A
Year 4	5 days*	5 days*	5 days*	5 days*
Year 5	10 days*	10 days*	10 days*	10 days*

*** Students in Y4 & Y5 will spend time in each sector over two academic years, with a quarter of the class in each sector in each week of EL in each semester.**

The timing of the experiential learning fits with teaching and learning in the University. We will send the students out for their experiential learning at the following times.

This year there will be additional mandatory EL-like activities on campus facilitated by pharmacists from practice. Non attendance at these session may mean you will not be able to attend your EL placement.

W/C date for each EL block

Year	1st Semester	2 nd Semester
Year 2	-	23 rd Feb
Year 3	10 th Nov	16 th March
Year 4	17 th Nov	16 th Feb
Year 5	24 th Nov & 1 st Dec	2 rd Feb & 9 th Feb

2. Additional Cost of Teaching Pharmacy Funding

The Scottish Government announced in September 2018 that funding would be made available to support the additional cost of teaching (ACTp) for experiential learning for student pharmacists. This funding is to expand and enhance the quality of EL and help better prepare the future Pharmacy workforce.

Scottish undergraduate pharmacy Experiential Learning is organised in partnership between the University of Strathclyde, Robert Gordon University, NES and other pharmacy stakeholders.

The pharmacist facilitating EL (Facilitator) needs to have completed or have committed to undertaking Preparation for Facilitating Experiential Learning Training (PFEL) and provide feedback on student pharmacist performance to the University at the end of EL activity. This funding allows Facilitators to spend dedicated time supporting Student Pharmacists during EL.

3. Information for students

During EL you will come into contact with patients, the public and other health care professionals. It is, therefore, important that you portray a professional image and conduct yourself in a professional manner, in accordance with the Fitness to Practice requirements, and adhere to the GPhC Standards for Pharmacy Professionals: <https://www.pharmacyregulation.org/pharmacists/standards-and-guidance-pharmacy-professionals/standards-pharmacy-professionals>. Students agree to adhere to this when you sign a fitness to Practice declaration with the university.

- You are expected to be dressed smartly and appropriately – if you are unsure what this means please contact the EL team at University
- For infection control purposes:
 - ✚ **any sleeves should be above the elbow, please discuss with the EL team if you are unable to comply with this.**
 - ✚ **You should not wear any jewellery: plain band wedding rings are the only jewellery permitted.**
 - ✚ **Nail polish, gel or false nails are not permitted.**
 - ✚ **Long hair should be tied up and above the collar.**
- Student EL working hours are based on the standard NHS working week of 37 hours, Mon-Fri, 08:30/9.00-5.00 with an appropriate break. However, this is the base position. We recognise that some EL providers will have extended hours, work out of hours, or in the case of NHS 24 require working on a Saturday. Therefore, it is acceptable for EL facilitators to arrange, in agreement with the student, to cover the 37 hours in a way that suits the EL provider and offers the best learning opportunities to the students. Please do not 'bank' hours to allow you to take a half day, it is expected that you will do 5 full days in practice.
- Remember to take your matriculation card, lanyard and "Student Pharmacist" badge as the facilitator will ask to see this as proof of identity and to identify you as a student of the University of Strathclyde.
- If you are unable to attend your arranged placement **you must contact the named Facilitator and the University** as soon as possible and no later than on the day of absence. Not reporting your absence leads to concern for your safety and wellbeing as well as causing disruption to your facilitator's working day.
- Do not take any valuables, apart from essentials to your experiential learning. Any valuables must be kept on your person at all times or in accordance with the pharmacy security policy.
- Please adhere to your placements' mobile phone policy which you will be advised of by your facilitator.

During your EL you will have access to patient details which are **confidential**. We have assured all the pharmacists that you will respect the patient's right to confidentiality. If you breach this confidentiality, you will be asked to leave the placement. This may be a breach of Fitness to Practice requirements. Please do not take pictures while on placement and do not post any details of your placement on social media as it will breach placement and University confidentiality.

The Facilitator at each site will co-ordinate and supervise the placement with the assistance of the wider pharmacy team.

Attendance will be closely monitored by the University. It is compulsory to submit an attendance record, signed by the EL facilitator, after your EL (available on MyPlace). MyPlace submission will open for seven days after your placement to upload completed attendance forms. Non- attendance without a

valid reason (e.g. illness, adverse weather) or failure to submit reflective entries in your portfolio will result in failure of the module. Please discuss any issues with the Experiential Learning Coordinators Paul Kearns and Morven McDonald.

Please Note

If you are unable to attend your placement (e.g. due to adverse weather conditions or illness) or you anticipate being late to your placement **it is essential that you inform both the University (sipbs-experiential-learning@strath.ac.uk) and your contact person at your placement** (which will be provided before your placement).

Student responsibilities while on experiential learning

Student's main responsibilities are that they must:

Contact your facilitator before your placement and complete the pre EL communication form

- Arrive at the pharmacy on time
- Be appropriately dressed as indicated above
- Interact and engage in an appropriate manner with the pharmacy team and patients
- Be prepared to stay in the pharmacy for the allocated time
- Complete some or all of the activities indicated below, as planned with your facilitator, a number of times to gain competency
- Submit signed attendance record at the end of your placement (link will be available on MyPlace)

Pre-Placement Checklist

- Familiarise yourself with the relevant sections of the EL handbook
- Pre EL communication form: https://www.nes.scot.nhs.uk/media/gvwkvmqg/pre-el_communication_form_2024-25.docx
- PVG Certificate "Student Pharmacist" badge and student card.
- **Health Questionnaire completed**
- GDPR (MyPlace)
- Equality and Diversity (only needs completed in Year 2)
- Cyber Security (MyPlace – only needs completed in Year 2)
- Check expenses policy (MyPlace)
- TURAS modules (MyPlace)
- Attendance record (MyPlace)
- EL induction checklist (EL handbook)
- EL student guide for Health & Safety Advice (EL handbook)

EL resources

- BNF app
- Medicines Complete <https://about.medicinescomplete.com/>
- Pharmacotherapy section of GMS contract [The 2018 General Medical Services Contract In Scotland \(www.gov.scot\)](https://www.gov.scot) for Primary Care.
- Community Pharmacy Scotland NHS Services section [Community Pharmacy Scotland \(cps.scot\)](https://cps.scot).
- Minor Illness or Major Disease Sixth edition (if available at EL placement)
- Introduction to Pharmaceutical Calculations Fourth edition (if available at EL placement).

Student Feedback on Experiential Learning

Student Feedback is an integral part of the quality management systems in NES. It is used to review experiential learning (EL) sites and improve these to better the experience for students in subsequent years.

Students are required to complete feedback at the end of their EL and reflect on their experience, detailing support from facilitator and site staff, as well as learning opportunities and ability to meet learning objectives. Students are encouraged to give open and honest feedback, highlighting good experiences of facilitating learning, alongside examples that may require further improvement to enhance EL. Since experiential learning is accompanied with public monies (additional cost of teaching pharmacy funds), it is imperative that we engage with students to continually develop and improve experiences through the collation and review of honest feedback. This is a vital part of NES's ongoing commitment to improving the quality and breadth of experiences available to students within Scotland. Students, please access the feedback form:

<https://response.questback.com/nhseducationforscotland/nvwocpnchm>

OR access via QR code on MyPlace.

Whistleblowing

Whistleblowing is defined in the Standards for Pharmacy Professionals as when a person 'raises a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrong-doing'.

If you have any such concerns regarding a wrongdoing, patient safety and/or malpractice during EL, please refer to the relevant Whistleblowing policy. Please ensure you are familiar with the following Whistleblowing policies before your EL:

NHS Scotland: <https://workforce.nhs.scot/policies/whistleblowing-policy/>

The University of Strathclyde also have their own Whistleblowing policy that can be found at:

https://www.strath.ac.uk/media/ps/strategyandpolicy/Public_Interest_Disclosure_Whistleblowing_Policy.pdf

Additional resources available from GPhC:

- <https://assets.pharmacyregulation.org/files/2024-01/keeping-patients-safe-june-2022.pdf>
- <https://assets.pharmacyregulation.org/files/2024-01/gphc-pharmacy-team-toolkit-learning-from-incidents-june-2022.pdf>

4. Equality, Diversity and Inclusion

The University of Strathclyde is a socially progressive institution, committed to achieving and promoting equality of opportunity in its learning, teaching, research, and working environments. We support our students and staff to realise their full potential regardless of background.

At Strathclyde, our first priority is the safety, health and wellbeing of our University community.

A safe campus and work environment is the responsibility of everyone who is part of the University community: staff, students and visitors.

Unacceptable behaviour has no place at Strathclyde and we will not tolerate any form of discrimination (e.g. racism), harassment, victimisation or bullying.

If you have experienced or witnessed discrimination, harassment, victimisation or bullying on EL placement, this can be confidentially reported to the SIPBS EL team (contact details at the end of this handbook).

For more information on University of Strathclyde's Equality, Diversity and Inclusion policies and support services, please see the University Equality, Diversity and Inclusion website:
<https://www.strath.ac.uk/professionalservices/accessequalityinclusion/service/equalitydiversity/>.

Reasonable Adjustments

The Equality Act 2010 places a duty on the University to make [reasonable adjustments](#) for people with disabilities. This means that you should do things differently if the way you normally do them would substantially disadvantage a disabled person. It can also mean that you provide additional resources or equipment. **Please contact the EL team in advance of your placement if you need reasonable adjustments put in place for your placement.**

5. Reflective Portfolio Guidance

While on experiential learning you must undertake some or all of the suggested activities as relevant. Activities should be undertaken many times so that you can build competency in each of the areas. **You will have to complete reflective entries in your portfolio. Your portfolio is associated with a different module in each year:**

Year	Module
Year 2	Being a Pharmacist 1
Year 3	Being a Pharmacist 2
Year 4	Being a Pharmacist 3
Year 5	Being a Pharmacist 4

Details of what you have to complete for each module is detailed in the year descriptor for EL below and on the module page on MyPlace

You will need to use Reflection to learn from your actions. There are three basic assumptions to the process of reflection:

1. Accurately go over the experience in your head (without bias)

2. Understand that experience at a deeper level – how does it make you feel?
3. Use the understanding to do things differently next time i.e. effect change through learning

Driscoll 3 stage model consists of asking 3 fundamental questions; '**What?**', '**So what?**', and '**Now What?**' are matched to the stages of an EL cycle, with added trigger questions that can be asked to complete the cycle.

WHAT – This is a description of the event. Describe the experience and identify what happened.

Trigger questions What....

- is the purpose of returning to this situation?
- happened?
- did other people do who were involved in this?
- did I see/do?
- was my reaction to it?

SO WHAT – This is an analysis of the event. Describing the experience is not enough – why is it significant?

Trigger questions So what ...

- did I feel at the time of the event?
- are my feelings now, after the event, any different from what I experienced at the time?
- were the effects of what I did (or did not) do?
- positive aspects now emerge for me from the event that happened in practice?
- have I noticed about my behaviour in practice by taking a more measured look at it?
- observations do any person helping me to reflect on my practice make of the way I acted at the time?
- is the purpose of returning to this situation?
- were those feeling I had any different from those of other people who were also involved at the time? Did I feel troubled, if so, in what way?

NOW WHAT – Proposed actions following the event. What will you do with the single insight learned?

Trigger Questions Now what ...

- are the implications for me and others in clinical practice based on what I have described and analysed?
- difference does it make if I choose to do nothing?
- is the main learning that I take from reflecting on my practice in this way?
- help do I need to help me 'action' the results of my reflections?
- aspect should be tackled first?
- Where can I get more information to face a comparable situation again?
- How can I modify my practice if a similar situation arises again?
- How will I notice that I am any different in clinical practice?

For the MPharm portfolios this 3 stage model will be used throughout the 4 years, but the content and hence reflective aspect (i.e. the 'So what' and 'Now what') increase year on year.

Reflective component of the MPharm

Module	
	Summative
BaP 1	1 x 500 words 1 x verbal reflection entries must reflect aspects of EL
BaP 2	1 x 500 words 1 x verbal reflection entries must reflect aspects of EL
BaP 3	1 x 500 words 1 x verbal reflection entries must reflect aspects of EL
BaP4	1 X 500 words 1x verbal reflection entries must reflect aspects of EL

The verbal reflection will be carried out by your PDA and should follow the Driscoll method detailed above. Please see BaP MyPlace pages for details of deadlines.

6. Information for Facilitators

EL is designed to expose students to real life practice as a means of putting their academic studies into context. The degree of complexity and level of patient involvement during EL increases year on year as the students move through the course.

At all times students are expected to act within your assessment of their competency: the safety of your patients, staff and effective operation of your practice should not be compromised.

The frameworks provided for each year are a guide to the experience that the students should have. You may add to these experiences and we appreciate that not all items may be possible in every pharmacy. Students should undertake the activities as many times as practical during their visits to gain some level of competency and a deeper understanding of the roles and responsibilities of a pharmacist.

When students return to University they will need to complete a reflective diary relating to their EL. Students will also participate in Peer Learning sessions in the University where they will discuss their experiences with other students and share learning from their EL.

Students should use this workbook to capture ideas for suitable reflections: they may seek your help in looking for suitable examples.

If you wish to clarify anything about students' experiential learning or provide us with feedback then please contact any of the staff named at the end of the handbook.

While on EL our students are still subject to the GPhC Standards for Pharmacy Professionals: <https://www.pharmacyregulation.org/pharmacists/standards-and-guidance-pharmacy-professionals/standards-pharmacy-professionals>. If there are any matters that need to be reported then please email the EL team (sipbs-experiential-learning@strath.ac.uk).

Facilitator responsibilities for students on EL

The main responsibilities of the facilitator to the students are but not limited to:

- To inspire this new generation of pharmacists.
- To provide a suitable environment for experiential learning.
- To allow the students access to appropriate material to complete their EL.
- To be familiar with the suggested learning activities for that student year EL set out in the EL handbook before students coming on placement.
- To enable competencies relevant to curriculum to be participated in/undertaken and repeatedly practiced by students.
- To give feedback to student which allows them to continuously develop i.e. formative, whilst student is undertaking placement.
- To ensure student pharmacist is supernumerary and not a replacement for other staff. Make any changes to rotas or staffing to accommodate students.
- Complete written feedback for student pharmacists as this forms an element of EL assessment.
- Complete appropriate equality and diversity training (NES directed or organisation owned).
- Become familiar with the GPhC - Guidance on Tutoring and Supervising Pharmacy Professionals in Training (for Foundation Year Training but the content is relevant).
https://assets.pharmacyregulation.org/files/document/guidance_on_supervising_pharmacy

[professionals in training august 2018.pdf](#)

- Get in touch with any questions.
- Contact University if any student matters arise or non-attendance of student on placement.
- Student EL working hours are based on the standard NHS working week of 37 hours, Mon-Fri, 08:30/9.00-5.00 with an appropriate break. However, this is the base position. We recognise that some EL providers will have extended hours, work out of hours, or in the case of NHS 24 require working on a Saturday. Therefore, it is acceptable for EL facilitators to arrange, in agreement with the student, to cover the 37 hours in a way that suits the EL provider and offers the best learning opportunities to the students. Please do not allow the student to 'bank' hours to allow taking a half day during placement. Any student appointments need to be pre-authorised by the EL team.

Facilitator feedback

Facilitators need to complete feedback on the student, as part of the educational agreement with NES and the experiential learning providers. By providing this honest and constructive feedback you will support them in evaluating their skills, knowledge and behaviours as witnessed in the workplace and help them to develop these as they progress through their journey to becoming pharmacists. You are ideally placed to feedback on behaviours that you observe and providing this honest feedback in a suitable way could help to shape and develop the pharmacist which could impact on their future career. Students will send their feedback link to the facilitator and wider team to obtain feedback.

GPhC accreditation conditions require us to get the following feedback to form an element of student assessment. Guidance for this can be found in appendix 2.

Year	Periods of EL (for 2025/26)	Feedback required for each EL period		Peers	Patients (minimum each year)
		Facilitator	Pharmacy or multidisciplinary team		
2	1 x 1 week	1	1		1
3	2 x 1 week	1	1	Two over three years	1
4	2 x 1 week	1	1		1
5	2 x 2 weeks	1	1		1

Student assessment

One of the reflections assessed each year by staff in SIPBS will be a submission on the feedback received from experiential learning, including how the student plans to achieve the "does" level in the following year for criteria not yet met.

Feedback examples for facilitators

Please see appendix two for full guidance.

Examples of Constructive Feedback

"XXXXX demonstrated a caring and professional approach during her week in our community pharmacy. She was empathetic when interacting with patients and communicated clearly and respectfully, adapting her tone and language to suit individual needs.

She was observant and asked thoughtful questions during consultations and counter interactions, showing good awareness of the pharmacist's role in delivering person-centred care. XXXXX reflected well on ethical and legal considerations and was mindful of how her own values could influence care. While she engaged well with the team, we encourage her to take more initiative in approaching day-to-day tasks, such as assisting with OTC queries or discussing minor ailments under supervision, where appropriate. Building confidence in this area will strengthen her consultation skills and decision-making.

Overall, XXXXX made a positive impression. With continued exposure to patient-facing roles and pharmacy services, she is well placed to develop into a competent and compassionate pharmacist."

✓ 1. Aligned with Learning Outcomes

- It covers the core competencies expected of MPharm students:
 - Empathy and person-centred care
 - Effective and adaptable communication
 - Professional judgement and self-awareness
 - Safe practice and understanding of limits
 - Engagement with pharmacy services and the wider team
-

✓ 2. Balanced – Strengths and Areas for Development

- It highlights what the student did well:
"demonstrated a caring and professional approach," "asked thoughtful questions," "reflected well on ethical and legal considerations."
- It also provides constructive, actionable feedback:
"encouraged to take more initiative," "build confidence in approaching day-to-day tasks."

This encourages growth without being discouraging or overly critical.

✓ 3. Specific and Observable

- The feedback refers to actual behaviours and attitudes observed:
 - Interacting empathetically with patients
 - Asking questions during consultations
 - Engaging with the team
 - Avoids vague praise like "did well" or "nice to work with" without context.
-

✓ 4. Professional and Supportive Tone

- It's written in a respectful and encouraging tone, suitable for a learning environment.
- Emphasises potential for growth:
"With continued exposure... she is well placed to develop..."

This motivates the student while still being honest about development needs.

✓ 5. Realistic for a Short Placement

- Recognises the limits of a one-week placement, without making that a barrier to assessment.
- Feedback focuses on attitude, engagement, communication, and professionalism—all assessable in a short time.

Examples of Unconstructive Feedback

"XXXXX was polite and seemed interested in pharmacy. As the placement was only a week, there wasn't much time for her to get involved. She mostly observed and didn't require much support. No concerns to report."

🔍 Why This Is Unconstructive Feedback:

✗ 1. Too Vague and Generic

- *"Polite and seemed interested"* tells the student nothing specific about what they did well or how they demonstrated key competencies.
- Anyone could receive this feedback — it's not tailored or meaningful.

✗ 2. Does Not Address Learning Outcomes

- No mention of:
 - Empathy or patient-centred care
 - Communication or consultation skills
 - Professional judgement, ethical awareness
 - Recognition of limitations or teamwork
 - Engagement in pharmacy services or safe practice
- Misses the opportunity to link feedback to what the student should be developing.

✗ 3. Passive Dismissal of the Placement

- *"There wasn't much time for her to get involved."* – This suggests that the placement was too short to matter, which undermines the student's efforts and the value of the experience.
- Fails to assess what was possible to observe, like attitude, curiosity, professionalism, and communication.

✗ 4. No Constructive or Developmental Comments

- Doesn't tell the student what to improve or how to grow in future placements.
- Lack of guidance makes it a missed learning opportunity.

✗ 5. Misses Opportunities to Highlight Engagement

- Even if the student was mostly observing, feedback could still mention how actively they listened, asked questions, or interacted with the team and patients.

Whistleblowing

Whistleblowing is defined in the Standards as when a person 'raises a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrong-doing'.

Student pharmacists have been signposted to raise any concerns they have regarding a wrongdoing, patient safety and/or malpractice during EL via the relevant Whistleblowing policy. They have been asked to familiarise themselves with the following Whistleblowing policies before their EL:

NHS Scotland: <https://workforce.nhs.scot/policies/whistleblowing-policy/>

University of Strathclyde also have a Whistleblowing policy that can be found at:

https://www.strath.ac.uk/media/ps/strategyandpolicy/Public_Interest_Disclosure_Whistleblowing_Policy.pdf

7. Year 2 Experiential Learning

Year 2 students are in their first year of study of the MPharm programme. These students will spend 5 days in community pharmacy in academic year 2025/26. Students' EL will take place in second semester to allow time for Protecting Vulnerable Groups (PVG) clearance to be obtained from Disclosure Scotland.

At the time of their EL, students will have learnt and demonstrated communication skills in relation to Responding to Symptoms in minor ailments of GI tract, respiratory and cardiovascular systems and will have started to put these skills into practice in relation to the nervous system and endocrine disorders. They will also be aware of the different legal categories of medicines. To underpin this the students will also know about the normal function of the body and how medicines are absorbed, distributed and metabolised in the body. Excretion is covered in the last module in year 2.

All activities should be under the supervision of an appropriately trained member of staff.

Learning outcome

To demonstrate application of communication skills related to assessing and treating minor ailments/common clinical conditions in the community pharmacy setting. Demonstrate the skills necessary for the safe supply of medicines including all aspects of the receipt, assembly and in person collection of prescriptions.

Learning Activities

Students will achieve this by completing some or all of the learning activities contained in the framework at the end of this document on multiple occasions. These activities are not meant to be a 'checklist', they are suggested activities to meet the learning outcome.

7.1 Reflective Diaries

Standard	Assessment	Reflection
Person centred care	Summative	A reflective diary entry focusing on an EL experience that you can use to demonstrate your recognition of the difference between sympathy and empathy
Professional Behaviours	Summative	Reflect on the feedback you received (written or verbal) from your EL and highlight an area that you will improve on in the next academic year, clearly showing what steps you will take to achieve that

8. Year 3 Experiential Learning

8.1 Community Pharmacy Experiential Learning.

These students will spend 5 days in community and 5 days in hospital during their EL weeks in academic year 2025/26. In Year 3 students will be learning about contractual requirements related to community pharmacy and will be becoming familiar with common POMs used in the treatment of infections and infectious diseases. They will encounter GI & endocrine conditions, and cardiovascular and respiratory conditions later in Year 3. Students will be developing familiarity with MCR and other core contractual responsibilities.

All activities should be under the supervision of an appropriately trained member of staff.

Learning outcome

To demonstrate application of communication skills related to NHS Pharmacy First Scotland and MCR in the workplace. To learn and demonstrate the skills necessary for the safe supply of medicines including all aspects of the receipt, assembly and giving out of prescriptions.

Learning Activities

Students will achieve this by completing some or all of the learning activities contained in the framework at the end of this document on multiple occasions. These activities are not meant to be a 'checklist', they are suggested activities to meet the learning outcome.

8.2 Hospital Experiential Learning

These students spend five days in hospital pharmacy in academic year 2025/26. At the time of year 3 EL, students will be learning about and will be becoming familiar with common medicines used in the treatment of infections and infectious diseases, GI & endocrine conditions, and cardiovascular and respiratory conditions.

All activities should be under the supervision of an appropriately trained member of staff.

Learning outcome

To demonstrate application of communication skills related to the hospital workplace.

Students will achieve this by completing some or all of the following suggested learning activities on multiple occasions. The following activities are not meant to be a 'checklist', they are suggested activities to meet the learning outcome.

Learning Activities

Students will achieve this by completing some or all of the learning activities contained in the framework at the end of this document on multiple occasions. These activities are not meant to be a 'checklist', they are suggested activities to meet the learning outcome.

8.3 Reflective Diaries

Standard	Assessment	Reflection
Professional behaviours	Summative	Reflect on feedback (verbal or written) you received from your EL and highlight an area that you will improve on in the next academic year, clearly showing what steps you will take to achieve that
Partnership working	Summative	Reflect on a situation from your EL where you effectively promoted healthy lifestyles to improve health outcomes

9. Year 4 & 5 Experiential Learning

9.1 Community Pharmacy Experiential Learning including Specialist EL in Community Pharmacy.

Year 4 students will spend one week in each semester and Year 5 students will spend two weeks in each semester of the MPharm undertaking EL. In any given week(s) of EL a quarter of the module will be in each sector and students will rotate through all sectors over the two years

In year 4 students will study patients with CNS disorders, patients with malignancy and inflammatory conditions and patients with comorbidities. Their learning will build on Years 2 and 3 and students will revisit topics in ever increasing complexity.

In year 5, students will study Advanced Clinical Practice and completing their projects. This module is about the students knowing how to justify their decisions on sound scientific principles and how to make clinical decisions and take acceptable risks. During the two weeks of experiential learning students should be able to participate fully in all activities in the pharmacy and build on their experiences in years 2 – 4.

As the amount of EL increases over the next few years, students at this stage, especially Year 5, should now show some of the skills and behaviours linked to Foundation Training Year. Priority should be given to ensuring quality interactions with patients and other healthcare professionals and supporting services provided by the community pharmacy.

All activities should be under the supervision of an appropriately trained member of staff.

Learning outcomes

To demonstrate communication skills and competency in a range of activities related to the core elements of the Community Pharmacy contract.

Learning Activities

Some activities may be repeated from Years 2 and 3 but students should undertake the activities in other patient groups and in patient with multiple morbidities. Students achieve competence through performing activities to an acceptable standard repeatedly.

Students will achieve this by completing some or all of the learning activities contained in the framework at the end of this document on multiple occasions. These activities are not meant to be a 'checklist', they are suggested activities to meet the learning outcome.

9.2 Hospital Experiential Learning including Specialist Hospital EL

In year 4 and year 5 students will rotate through different pharmacy settings such as hospital, community, primary care and specialist pharmacy practice. The learning outcomes and learning activities detailed in this section are suitable for both year 4 and year 5 student pharmacists.

In year 4 students will be studying patients with CNS disorders, patients with malignancy and inflammatory conditions and patients with comorbidities. Their learning will build on what these students did in Years 2 and 3 and students will revisit topics in ever increasing complexity. They are learning to identify and prioritise care issues and how to action them.

In year 5 students are studying Advanced Clinical Practice and completing their projects. This module is about the students knowing how to justify their decisions on sound scientific principles and how to make clinical decisions and take acceptable risks. During these two weeks of experiential learning students should be able to participate fully in all activities in the pharmacy under supervision and build on their experiences in years 3-4.

All activities should be under the supervision of an appropriately trained member of staff.

Learning outcomes

- To gain an understanding of the role of the Clinical Pharmacist
- To gain an understanding of the whole patient journey through their hospital admission.
- To participate in patient counselling
- To participate in medicines reconciliation
- To participate in, prioritisation of patients, pharmaceutical care planning and discharge processes. This includes communication with the patient and other members of the pharmacy and multidisciplinary team.
- To understand the pharmacists' role and interaction within the multi-disciplinary team
- To demonstrate application of skills including communication skills learnt in university in the delivery of Pharmaceutical Care.

Learning Activities

Students should already be aware of the structure of the hospital pharmacy and the staff that support it. They should also have an awareness of the patient journey and some experience of patient counselling.

Students will achieve this by completing some or all of the learning activities contained in the framework at the end of this document on multiple occasions. These activities are not meant to be a 'checklist', they are suggested activities to meet the learning outcome.

9.3 Primary Care Experiential Learning including Specialist Primary Care EL– Year 4 & 5.

Students start year 4 with a module on the management of CNS conditions and will have started the next module on the Management of Malignancy conditions before their semester one EL. In the second semester they will have largely completed a module on the Management of Inflammation and Inflammatory Conditions prior to their EL. Y5 Students undertake the full year looking at advanced Clinical Practice. Facilitators should be mindful of the Year of study and semester when planning activities. Facilitators should be aware that some students will have no previous experience of Primary Care Pharmacy.

Students should have an awareness of medicines reconciliation, the patient journey and some experience of patient counselling.

Learning Outcomes:

To demonstrate communication skills with patients and healthcare professionals, and competency in a range of activities related to Primary Care Pharmacy by:

- Gaining an understanding of the range of tasks that a Primary Care Pharmacist might do in their role and asking relevant questions about the primary care role.
- To participate in, under supervision, a patient consultation.
- To participate, under supervision, in a medicine review.
- To gain an understanding of the role of the Primary Care Pharmacist within the wider Primary Care Healthcare team.
- To demonstrate the application of skills including communication skills learned at university in the delivery of pharmaceutical care
- Demonstrating clinical decision-making skills

Students experience will vary depending on which Health Board, GP practice and pharmacists that they work with.

All activities should be under the supervision of an appropriately trained member of staff.

Learning Activities

Students will achieve this by completing some or all of the learning activities contained in the framework at the end of this document on multiple occasions. These activities are not meant to be a 'checklist', they are suggested activities to meet the learning outcome.

****PLEASE ENSURE YOU SELECT THE CORRECT REFLECTIVE DIARIES FOR YOUR YEAR****

9.4 Reflective Diaries for Year 4 (BaP3)

Standard	Assessment	Reflection
Partnership working	Summative	Summative Reflect on a situation from your EL where you had to consider equality and diversity when resolving a medicine-related problem
Professional behaviours	Summative	Reflect on the feedback you received from your EL (written or verbal) and highlight an area that you will improve on in the next academic year, clearly showing what steps you will take to achieve that

9.5 Reflective diaries for Year 5 (BaP4)

Standards assessed:

Professional behaviours

Person-centred care

Verbal portfolio:

Professional behaviour - Reflect on the feedback on your communication skills provided by your EL facilitator(s), linking it to a specific situation you encountered during your experiential learning. Identify one aspect from this situation that you aim to develop further during your Foundation Training year, and clearly outline the steps you will take to achieve this improvement.

Learning outcomes:

For this situation, the student will also cover the following learning outcomes:

1. Demonstrate empathy and keep the person at the centre of their approach to care at all times **(DOES)**
2. Work in partnership with people to support and empower them in shared decision-making about their health and wellbeing **(SHOWS HOW)**
3. Demonstrate effective communication at all times and adapt their approach and communication style to meet the needs of the person **(DOES)**
10. Demonstrate effective consultation skills, and in partnership with the person, decide the most appropriate course of action **(DOES)**
12. Take an all-inclusive approach to ensure the most appropriate course of action based on clinical, legal and professional considerations **(SHOWS HOW)**

Written portfolio:

Person-centred care - Reflect on a situation during your experiential learning where you demonstrated effective diagnostic skills, including physical examination, to decide the most appropriate course of action for the person

Learning outcomes:

For this situation, the student will also cover one or more of the following learning outcomes:

1. Demonstrate empathy and keep the person at the centre of their approach to care at all times **(DOES)**
2. Work in partnership with people to support and empower them in shared decision-making about

their health and wellbeing **(SHOWS HOW)**

3. Demonstrate effective communication at all times and adapt their approach and communication style to meet the needs of the person **(DOES)**

10. Demonstrate effective consultation skills, and in partnership with the person, decide the most appropriate course of action **(DOES)**

12. Take an all-inclusive approach to ensure the most appropriate course of action based on clinical, legal and professional considerations **(SHOWS HOW)**

28. Demonstrate effective diagnostic skills, including physical examination, to decide the most appropriate course of action for the person **(SHOWS HOW)**

37. Prescribe effectively within the relevant systems and frameworks for medicines use **(SHOWS HOW)**

10. Frameworks for EL

Framework for EL in Community Pharmacy

Introduction

This document gives an overview of defined tasks that student pharmacists could carry out under supervision to meet specified University Learning Outcomes for EL Placements in the community pharmacy setting. These have been categorized as follows:

- Safe Supply of Medicines
- Provision of Pharmacy Services
- Professional Responsibilities, Ethics & Decision Making
- Communication
- Calculations
- Clinical Governance & Quality Improvement
- Leadership & Management

The framework gives an overview of specific tasks within each category and map to relevant stages of the MPharm curriculum depending on complexity and underpinning knowledge and skills. It demonstrates how tasks build in complexity throughout the years and allows for planning of EL placement activities to allow student pharmacists to demonstrate learning outcomes and GPhC Professional Standards during their EL placements.

Each specific task has been mapped to show the level of engagement expected from the student pharmacist and can be defined as follows:

- OBS: student pharmacist should be actively engaged in observing this task take place as it will provide context and information that will be built on throughout their EL placements. It may be possible to delegate parts of the task to the student pharmacist to complete, but this will be decided by the EL facilitator on an individual basis.
- OBS/X: student pharmacists should be actively engaged in observing this task take place and contribute to aspects of the task depending on knowledge and skills. It is acknowledged that some student pharmacists may need more support in being able to actively participate in the task.
- X: student pharmacists should be actively participating and taking responsibility for carrying out the defined task under supervision. It should be noted that supervision may be direct or indirect, and this will be decided by the EL facilitator on an individual basis.

The framework is not exhaustive and there may be other opportunities for learning during EL that are appropriate for student pharmacists to be involved in and that will continue to support their learning in practice.

Framework for EL Activities in Community Pharmacy

Activity	UoS Year 2	UoS Year 3	UoS Year 4	UoS Year 5
SAFE SUPPLY OF MEDICINES				
Check the validity of prescriptions	X	X	X	X
Accurately dispense medicinal products	X	X	X	X
Accurately label medicinal products	X	X	X	X
Accurately dispense different 'types' of prescriptions eg Vet, Private, NHS, Dental etc	X	X	X	X
Dispense and supply daily/weekly/instalment prescriptions	X	X	X	X
Accuracy check dispensed medicinal products	X	X	X	X
Clinically check prescribed medicinal products	OBS	OBS	X	X
Resolve supply issues eg antibiotic shortage	X	X	X	X
Accurately complete near miss and error logs	X	X	X	X
Accurately maintain pharmacy records eg CD Register/POM	X	X	X	X
Supply medicines to specific patient groups eg children, elderly, palliative care, pregnancy etc	X	X	X	X
Gather Information using a protocol eg WWHAM	X	X	X	X
Select appropriate OTC/P products for sale or supply	X	X	X	X
Provide appropriate information on medicinal products	X	X	X	X
Safety net consultations	X	X	X	X
Take appropriate action and signpost appropriately when refusing a supply of a medicine	OBS	OBS/X	X	X
Counsel on high risk medicines	OBS	OBS	X	X
PROVISION OF PHARMACY SERVICES				
Participate in consultation relating to Pharmacy First Plus	OBS	OBS	X	X
Provide self-care advice or make a supply under Pharmacy First	X	X	X	X
Participate in consultation relating to a PGD	OBS	OBS	X	X
Make a supply under a PGD	OBS	OBS	X	X
Use clinical examination skills in the context of a patient consultation	OBS/X	OBS/X	X	X
Undertake tasks relating to the provision of compliance aids	X	X	X	X
Dispose of medicines (out of date/patient returns) and complete associated record keeping	X	X	X	X
Participate in the delivery of private services (if available) eg travel clinic	OBS	OBS	OBS/X	OBS/X
PROFESSIONAL RESPONSIBILITIES, ETHICS & DECISION MAKING				
Respond appropriately and make adjustments as necessary to address the needs of individual or groups of patients (Equality and Diversity)	X	X	X	X

Respond to requests for prescription-only medicines from patients and health-care professionals	X	X	X	X
Respond to First Aid situations	OBS	OBS	OBS	OBS
Proactively demonstrate an approach to Protect Vulnerable Groups	X	X	X	X
Respond to 'red flag' information	X	X	X	X
Make appropriate referrals eg to the pharmacist, a GP, social support etc	X	X	X	X
Create a plan of care for the patient, including considering arrangements for appropriate follow up	OBS/X	X	X	X
Work with other members of the MDT to provide care	X	X	X	X
Provide a rationale for decision making	X	X	X	X
Provide a rationale for prescribing decisions	OBS	OBS	X	X
Apply good practice guidance for obtaining consent and consider the use of chaperones	OBS/X	OBS/X	X	X
Consider professional responsibilities and ethical situations in the context of prescribing and supply in substance misuse	OBS/X	OBS/X	X	X
COMMUNICATION				
Communicate effectively with members of the pharmacy team	X	X	X	X
Communicate effectively with patients	X	X	X	X
Communicate professionally by telephone	X	X	X	X
Communicate professionally by email	OBS/X	OBS/X	X	X
Communicate effectively to resolve issues	OBS	X	X	X
Resolve issues with prescribers	OBS	X	X	X
Use communication tools e.g. SBAR to accurately communicate patient information	OBS	OBS	X	X
Record interventions appropriately eg PCR/PMR	OBS	X	X	X
Provide counselling and education when required to patients, their carers or members of the public.	X	X	X	X
Communicate with the patient about their ideas, concerns & expectations of treatment	OBS	OBS	X	X
CALCULATIONS				
Undertake CD Balance checks	X	X	X	X
Manage balances/owing prescriptions	X	X	X	X
Calculate the duration/quantity needed for treatment	X	X	X	X
Correctly prepare liquid antibiotics	X	X	X	X
Undertake dose based calculations	X	X	X	X
Undertake weight based calculations	X	X	X	X
Calculate and respond to queries about breakthrough pain doses for analgesics	OBS	OBS	X	X
CLINICAL GOVERNANCE & QUALITY IMPROVEMENT				

Use the Yellow Card Reporting website to record adverse events	X	X	X	X
Review near miss/error logs and discuss trends and possible interventions	X	X	X	X
Undertake audit activity	X	X	X	X
Analyse and disseminate audit results	OBS	OBS	X	X
Undertake QI activity	OBS/X	OBS/X	X	X
Analyse and disseminate QI results	OBS	OBS	X	X
Be involved in service development/review	OBS	OBS	X	X
LEADERSHIP & MANAGEMENT				
Undertake prescription management processes eg counting/submission	X	X	X	X
Manage stock and participate in the ordering medicinal products	OBS	OBS/X	X	X
Delegate tasks within the team	OBS	OBS	OBS/X	X
Support the delivery of team training	OBS	OBS	OBS/X	X

Framework for EL in Hospital

Introduction

This document gives an overview of defined tasks that student pharmacists could carry out under supervision to meet specified University Learning Outcomes for EL Placements in the hospital setting. These have been categorised as follows:

- Safe Supply of Medicines
- Medicines Reconciliation
- Care Planning and Prioritisation
- Calculations
- DOAC Patient Education
- Discharge Screening and Patient Education

The framework gives an overview of specific tasks within each category and map to relevant stages of the MPharm curriculum depending on complexity and underpinning knowledge and skills. It demonstrates how tasks build in complexity throughout the years and allows for planning of EL placement activities to allow student pharmacists to demonstrate learning outcomes and GPhC Professional Standards during their EL placements.

Each specific task has been mapped to show the level of engagement expected from the student pharmacist and can be defined as follows:

- OBS: student pharmacist should be actively engaged in observing this task take place as it will provide context and information that will be built on throughout their EL placements. It may be possible to delegate parts of the task to the student pharmacist to complete, but this will be decided by the EL facilitator on an individual basis.
- OBS/X: student pharmacists should be actively engaged in observing this task take place and contribute to aspects of the task depending on knowledge and skills. It is acknowledged that some student pharmacists may need more support in being able to actively participate in the task.
- X: student pharmacists should be actively participating and taking responsibility for carrying out the defined task under supervision. It should be noted that supervision may be direct or indirect, and this will be decided by the EL facilitator on an individual basis.

The framework is not exhaustive and there may be other opportunities for learning during EL that are appropriate for student pharmacists to be involved in and that will continue to support their learning in practice.

Framework for EL Placement Activities in the Hospital Setting

Activity	UoS Year 3	UoS Year 4	UoS Year 5
SAFE SUPPLY OF MEDICINES			
Check the validity of prescriptions	X	X	X
Accurately dispense medicinal products	X	X	X
Accuracy check dispensed medicinal products	X	X	X
Clinically check prescribed medicinal products	OBS	OBS/X	X
Accurately complete near miss and error logs	X	X	X
Accurately maintain pharmacy records eg CD Register	X	X	X
Provide patient education for medicines	OBS/X	X	X
Provide patient education for high risk medicines	OBS	X	X
MEDICINES RECONCILIATION			
Gather information from patient and at least one other source	X	X	X
Identify discrepancies from information gathered	X	X	X
Discuss and resolve any issues identified with MDT	OBS	X	X
Provide patient education relating to any issues identified	OBS	X	X
CARE PLANNING AND PRIORITISATION			
Identify care issues	OBS	X	X
Prioritise care issues for individual patients	OBS	X	X
Identify appropriate monitoring needs for individual patients	OBS	X	X
Identify RAG rating for individual patients	OBS	X	X
Make suggestions on how to resolve care issues	OBS	X	X
Discuss and resolve any issues identified with MDT	OBS	OBS/X	X
Prioritise and manage care for groups of patients	OBS	OBS/X	X
CALCULATIONS			
Undertake dispensary calculations	X	X	X
Accurately calculate doses for safe administration of medicines	X	X	X
Undertake pharmacokinetic calculations	X	X	X
Undertake ward based calculations	OBS/X	X	X
Calculate renal clearance	OBS/X	X	X
Undertake calculations for high risk medicines (eg gentamicin & vancomycin)	OBS/X	X	X
Provide patient education relating to DOAC prescribing	OBS	X	X
DISCHARGE SCREENING & PATIENT EDUCATION			
Undertake discharge screening for individual patients	OBS	OBS/X	X
Provide patient education (as appropriate)	OBS	OBS/X	X
Discuss and resolve any issues identified with MDT	OBS	OBS/X	X
Consider and make recommendations on the continuity of care for individual patients	OBS	OBS/X	X

Framework for EL in Primary Care

Introduction

This document gives an overview of defined tasks that student pharmacists could carry out to meet specified University Learning Outcomes for EL Placements in the primary care setting. These have been categorised as follows:

- Acute Prescription Requests
- Re-authorisation of Repeat Prescriptions
- Prescribing Quality and Strategy
- Medicines Reconciliation
- Medicine Queries
- Patient Education
- High Risk Drug Monitoring
- Care Planning and Prioritisation

The framework gives an overview of specific tasks within each category and map to relevant stages of the MPharm curriculum depending on complexity and underpinning knowledge and skills. It demonstrates how tasks build in complexity throughout the years and allows for planning of EL placement activities to allow student pharmacists to demonstrate learning outcomes and GPhC Professional Standards during their EL placements. The individual category frameworks also contain information on suggested supervision for named tasks and give direction on possible SLE tools that can be used to support reflective practice at each stage.

SLE tool templates can be found on the Pharmacy Turas Learn pages, under Supervision.

<https://learn.nes.nhs.scot/61754>

Each specific task has been mapped to show the level of engagement expected from the student pharmacist and can be defined as follows:

- OBS: student pharmacist should be actively engaged in observing this task take place as it will provide context and information that will be built on throughout their EL placements. It may be possible to delegate parts of the task to the student pharmacist to complete, but this will be decided by the EL facilitator on an individual basis.
- OBS/X: student pharmacists should be actively engaged in observing this task take place and contribute to aspects of the task depending on knowledge and skills. It is acknowledged that some student pharmacists may need more support in being able to actively participate in the task.
- X: student pharmacists should be actively participating and taking responsibility for carrying out the defined task under supervision. It should be noted that supervision may be direct or indirect, and this will be decided by the EL facilitator on an individual basis.

The framework is not exhaustive and there may be other opportunities for learning during EL placements that are appropriate for student pharmacists to be involved in and that will continue to support their learning in practice.

Framework for EL Placement Activities in the Primary Care Setting

Activity	Second Year Student Pharmacist (RGU Stage 2/ UoS Year 3)	Third Year Student Pharmacist (RGU Stage 3/ UoS Year 4)	Fourth Year Student Pharmacist (RGU Stage 4/ UoS Year 5)
ACUTE PRESCRIPTION REQUESTS			
Review acute prescription requests and evaluate clinical appropriateness	OBS	X	X
Demonstrate clinical decision making for actioning/authorising acute medication requests	OBS	X	X
Analyse clinical history and appropriate clinical parameters	OBS/X	X	X
Carry out patient education or consultation (via phone or face to face)	OBS/X	X	X
Make clear and concise journal entry in patient medication record	OBS/X	OBS/X	X
RE-AUTHORISATION OF REPEAT PRESCRIPTIONS			
Identify the requested medication is on the list of repeat medicines	X	X	X
Check that the patient has received the medication for an appropriate and current indication	X	X	X
Assess that patient monitoring for requested medication is appropriate and up to date	OBS/X	X	X
Re-authorise prescription	OBS	OBS/X	X
Make clear and concise journal entry in patient medication record	OBS/X	OBS/X	X
PRESCRIBING QUALITY AND STRATEGY			
Run searches: using GP practice medicines management system, STU tool, PRISM	OBS/X	X	X
Develop knowledge of national therapeutic indicators and develop awareness of health board medicines budget	OBS/X	X	X
Implement prescribing quality and strategy local priorities to enhance patient centred care e.g. follow local medicines protocol to undertake prescribing review	OBS/X	X	X
Carry out medication reviews (e.g. non-clinical medication review (NCMR) or polypharmacy)	OBS/X	X	X
MEDICINES RECONCILIATION			
Gather information to reconcile medication history and establish ongoing treatment plan.	OBS/X	X	X
Update patient medication record with medication changes	X	X	X
Demonstrate an ability to identify and resolve medicines reconciliation issues	OBS/X	OBS/X	X

Carry out patient education	OBS/X	X	X
Communicate with MDT to resolve issues	OBS/X	X	X
Make clear and concise journal entry in patient medication record	OBS/X	OBS/X	X

Activity	Second Year Student Pharmacist (RGU Stage 2/ UoS Year 3)	Third Year Student Pharmacist (RGU Stage 3/ UoS Year 4)	Fourth Year Student Pharmacist (RGU Stage 4/ UoS Year 5)
MEDICINE QUERIES			
Receive medicine query and capture all relevant information required	OBS/X	X	X
Determine urgency for query	OBS/X	X	X
Demonstrate knowledge of appropriate reference sources	OBS/X	X	X
Demonstrate systemic and logical approach to researching query	OBS/X	X	X
Formulate clear, concise, professional and safe answer	OBS	X	X
Clearly communicate enquiry response with the enquirer	OBS	OBS/X	X
Document enquiry using local enquiry database	OBS	OBS/X	X
PATIENT EDUCATION			
Carry out patient education Examples may include*: <ul style="list-style-type: none"> - New medication - Directions for use - Recent discharge from hospital - Therapeutic monitoring - High risk medicines - Public health and lifestyle advice *This list is not exhaustive	OBS/X	X	X
HIGH RISK DRUG MONITORING			
Demonstrates knowledge of high risk drug monitoring	OBS/X	X	X
Discuss appropriate follow up and review of high risk medicines with members of the MDT to ensure clear plan for patient review	OBS	OBS/X	X
Arrange blood monitoring for high risk medicines	OBS	OBS/X	X
Formulate appropriate care plan for high risk drug medicines and document in the patient medication record	OBS	X	X
Carry out patient education	OBS/X	X	X
CARE PLANNING AND PRIORITISATION			
Identify care issues	OBS/X	X	X
Prioritise care issues for individual patients	OBS/X	X	X
Identify appropriate monitoring needs for individual patients	OBS/X	X	X
Suggest actions to resolve care issues	OBS/X	X	X
Resolve identified care issues through discussion with MDT	OBS/X	X	X

Acute Prescription Requests

Acute prescription requests are core task undertaken in the primary care setting. Student pharmacists will apply their clinical and professional knowledge in assessing appropriateness of acute prescription requests. Complexity of requests will increase based on experience and year of study.

Acute Prescription Requests	Second Year Student Pharmacist (RGU Stage 2/ UoS Year 3)	Third Year Student Pharmacist (RGU Stage 3/ UoS Year 4)	Fourth Year Student Pharmacist (RGU Stage 4/ UoS Year 5)	Staff supervision
Review acute prescription requests and evaluate clinical appropriateness	OBS	X	X	Pharmacist
Demonstrate clinical decision making for actioning/authorising acute medication requests	OBS	X	X	
Analyse clinical history and appropriate clinical parameters	OBS/X	X	X	
Carry out patient education or consultation (via phone or face to face)	OBS/X	X	X	Pharmacy Technician Pharmacist
Make clear and concise journal entry in patient medication record	OBS/X	OBS/X	X	Pharmacy Technician Pharmacist

Re-authorisation of Repeat Prescriptions

Student pharmacists will apply their clinical and professional knowledge in assessing appropriateness of repeat prescription requests. Complexity of requests will increase based on experience and year of study.

Re-authorisation of repeat prescriptions	Second Year Student Pharmacist (RGU Stage 2/ UoS Year 3)	Third Year Student Pharmacist (RGU Stage 3/ UoS Year 4)	Fourth Year Student Pharmacist (RGU Stage 4/ UoS Year 5)	Staff supervision
Identify the requested medication is on the list of repeat medicines	X	X	X	Pharmacy Technician
Check that the patient has received the medication for an appropriate and current indication	X	X	X	Pharmacy Technician Pharmacist
Assess that patient monitoring for requested medication is appropriate and up to date	OBS/X	X	X	Pharmacist
Re-authorise prescription	OBS	OBS/X	X	Pharmacist
Make clear and concise journal entry in patient medication record	OBS/X	OBS/X	X	Pharmacy Technician

Prescribing Quality and Strategy

Prescribing quality and strategy encourages student pharmacists to consider professional responsibilities in the context of the primary care pharmacist.

Prescribing quality and strategy	Second Year Student Pharmacist (RGU Stage 2/ UoS Year 3)	Third Year Student Pharmacist (RGU Stage 3/ UoS Year 4)	Fourth Year Student Pharmacist (RGU Stage 4/ UoS Year 5)	Staff supervision
Run searches: using GP practice medicines management system, STU tool, PRISM	OBS/X	X	X	Pharmacy Technician Pharmacist
Develop knowledge of national therapeutic indicators and develop awareness of health board medicines budget	OBS/X	X	X	
Implement prescribing quality and strategy local priorities to enhance patient centred care e.g. follow local medicines protocol to undertake prescribing review	OBS/X	X	X	
Carry out medication reviews (e.g. non-clinical medication review (NCMR) or polypharmacy)	OBS/X	X	X	

Medicines Reconciliation

Medicines Reconciliation can be broken down into distinct processes for student pharmacist EL placements. In the early stages of the undergraduate course, this will focus on gathering information and identifying, moving on to resolving issues and patient education in the latter stages of the course. It may be that this links with care planning activities depending on the case being worked on.

Medicines Reconciliation	Second Year Student Pharmacist (RGU Stage 2/ UoS Year 3)	Third Year Student Pharmacist (RGU Stage 3/ UoS Year 4)	Fourth Year Student Pharmacist (RGU Stage 4/ UoS Year 5)	Staff supervision
Gather information to reconcile medication history and establish ongoing treatment plan.	OBS/X	X	X	Pharmacy Technician Pharmacist
Update patient medication record with medication changes	X	X	X	
Demonstrate an ability to identify and resolve medicines reconciliation issues	OBS/X	OBS/X	X	
Carry out patient education	OBS/X	X	X	Pharmacy Technician Pharmacist
Communicate with MDT to resolve issues	OBS/X	X	X	Pharmacy Technician Pharmacist
Make clear and concise journal entry in patient medication record	OBS/X	OBS/X	X	Pharmacist

Medicine Queries

Answering medicine queries are a fundamental skill required at all levels of practice and all areas of pharmacy. Suggested activities move from simple queries to more complex queries and should be included in all EL placements.

Medicine queries	Second Year Student Pharmacist (RGU Stage 2/ UoS Year 3)	Third Year Student Pharmacist (RGU Stage 3/ UoS Year 4)	Fourth Year Student Pharmacist (RGU Stage 4/ UoS Year 5)	Staff supervision
Receive medicine query and capture all relevant information required	OBS/X	X	X	Pharmacy Technician
Determine urgency for query	OBS/X	X	X	Pharmacist
Demonstrate knowledge of appropriate reference sources	OBS/X	X	X	Pharmacist
Demonstrate systemic and logical approach to researching query	OBS/X	X	X	
Formulate clear, concise, professional and safe answer	OBS	X	X	
Clearly communicate enquiry response with the enquirer	OBS	OBS/X	X	
Document enquiry using local enquiry database	OBS	OBS/X	X	

Patient Education

Local guidance is available for patient education and student pharmacists should undertake this as appropriate.

Patient education	Second Year Student Pharmacist (RGU Stage 2/ UoS Year 3)	Third Year Student Pharmacist (RGU Stage 3/ UoS Year 4)	Fourth Year Student Pharmacist (RGU Stage 4/ UoS Year 5)	Staff supervision
Carry out patient education Examples may include*: <ul style="list-style-type: none">- New medication- Directions for use- Recent discharge from hospital- Therapeutic monitoring- High risk medicines- Public health and lifestyle advice *This list is not exhaustive	OBS/X	X	X	Pharmacy Technician Pharmacist

High Risk Drug Monitoring

Student pharmacists should be able to demonstrate their clinical knowledge of high risk medications and understand how these patients are managed in the primary care setting.

High risk medicines include warfarin, insulin, methotrexate, lithium, DOACs.

High risk drug monitoring	Second Year Student Pharmacist (RGU Stage 2/ UoS Year 3)	Third Year Student Pharmacist (RGU Stage 3/ UoS Year 4)	Fourth Year Student Pharmacist (RGU Stage 4/ UoS Year 5)	Staff supervision
Demonstrates knowledge of high risk drug monitoring	OBS/X	X	X	Pharmacist
Discuss appropriate follow up and review of high risk medicines with members of the MDT to ensure clear plan for patient review	OBS	OBS/X	X	
Arrange blood monitoring for high risk medicines	OBS	OBS/X	X	
Formulate appropriate care plan for high risk drug medicines and document in the patient medication record	OBS	X	X	
Carry out patient education	OBS/X	X	X	

Care Planning and Prioritisation

Student pharmacists will be expected to consider care planning, firstly for individual patients and then for groups of patients. This should include consideration of how to prioritise patients both individually and as groups. As student pharmacists progress on the course, they will be expected to have discussions with member of the MDT to resolve care issues.

Care Planning and Prioritisation	Second Year Student Pharmacist (RGU Stage 2/ UoS Year 3)	Third Year Student Pharmacist (RGU Stage 3/UoS Year 4)	Fourth Year Student Pharmacist (RGU Stage 4/UoS Year 5)	Staff supervision
Identify care issues	OBS/X	X	X	Pharmacist
Prioritise care issues for individual patients	OBS/X	X	X	
Identify appropriate monitoring needs for individual patients	OBS/X	X	X	
Suggest actions to resolve care issues	OBS/X	X	X	
Resolve identified care issues through discussion with MDT	OBS/X	X	X	

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UNIVERSITY OF STRATHCLYDE LOCAL RULES ON THE SAFETY REQUIREMENTS FOR EXPERIENTIAL LEARNING PLACEMENT OF STUDENT PHARMACISTS

The University of Strathclyde recognises its moral responsibility for the health and safety of its students, on placement as well as on campus, and acknowledges that its moral responsibility is accompanied by legal obligations. **The University's Local Rule on eth Safety requirements for the placement of students, available at: https://www.strath.ac.uk/media/ps/safetyservices/campusonly/guidancenotes/Guidance_on_Student_Placements.pdf. This considers the responsibilities for the health and safety of people and the organisations involved in the placement.**

In general terms, students on placement should for all health and safety purposes be treated as employees of the host organisation irrespective of whether they are paid or unpaid. Consequently, the primary responsibility for meeting health and safety requirements within a placement rests with the host employer. (Within the UK, employers are bound by safety legislation, including the Health and Safety at Work Act 1974). The employer's responsibility is shared with the University as the placement organiser and with the student: **you have a responsibility for your own safety and that of others.**

University policy is that students with special needs or particular health problems should not be prevented from undertaking placement because of these. However, some adjustments may have to be made to working arrangements or safety procedures to take account of the student's needs.

The University's Local Rules cover a number of "placement" circumstances including

- Student placement within UK industry and commerce, higher education institution or NHS Trust undertaken as an integral part of the student's course within the UK
- The placement of student teachers (and other students) into schools in the UK
- Students on placement overseas

And are, therefore, fairly comprehensive. However, there may be some placements that fall out with the above definitions and, as such, the Local Rules may not be fully relevant for such placements. Nevertheless, the standards within these Rules must be applied as far as reasonably practicable.

*The term "EL Organisers" is used to indicate the members of University staff responsible for arranging and managing the placement.

The University's EL Organisers* will take steps

- to ensure that students are placed in organisations which have appropriate safety policies and procedures,
- including generic or specific risk assessments. For example, there might be particular health risks for students working
- in clinics or safety risks arising from some industrial placements.

The EL Organiser will consider any risks associated with the Placement by reason of its

location. For example, there may be safety risks relating to particular forms of transport or health risks specific to some sites

As a student, you are required to:

- attend any safety briefings (before and during placement)
- read and retain the Health and Safety Guidance Notes and other information provided by the University and the employer
- complete and return the Induction Checklist within the first week of placement
- inform the EL organisers immediately of any concerns about health and safety while on placement
- report any accident or incident to the EL organiser

Before EL

EL Organisers

- ensure that placement organisation has appropriate safety policy and procedures
- considers safety issues relating to location of placement including travel
- briefs student on safety on placements

Student receives:

- Guidance for students on placement
- email confirming placement arrangements
- Induction Checklist in EL Handbook

On EL

Employer gives student induction training on health and safety policy and procedures, including risk assessments

Student submits Induction Checklist to EL Organisers

After Placement

EL Organisers review all EL for H&S concerns

Further advice can be obtained from your EL Organisers

Safety Services

University of Strathclyde
0141 548 3745

EL Team
University of Strathclyde
161 Cathedral Street Glasgow
G4 0RE
sipbs-experiential-learning@strath.ac.uk



INVESTOR IN PEOPLE

Student Health & Safety Induction Checklist

Name of student: _____

Employer: _____

Dates of EL: _____

The following items should be included in your induction into the organisation, preferably on your first day. Please check off the items below when they occur. It may be that not all of the items below are applicable, for example, your EL may not involve any manual handling. This list is not exhaustive and other topics may be covered, which you may note if you wish:

	Health and Safety Issues	Date
1.	Emergency procedures*	
2.	First Aid arrangements*	
3.	Fire procedures*	
4.	Accident reporting and location of accident book*	
5.	Safety Policy received and location known*	
6.	PPE/Protective clothing arrangements*	
7.	Other issues	

***These items must be included in any induction training**

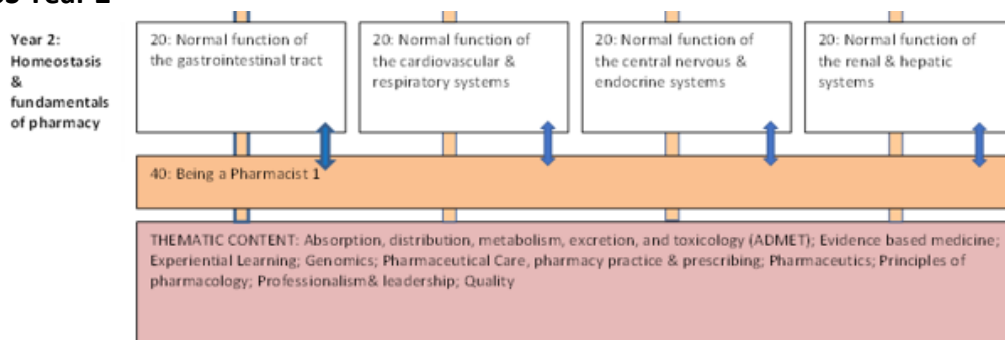
Signed: _____
(must be an authorised signatory)

Position: _____ Date: _____

Please upload to MyPlace

Appendix One: University of Strathclyde Curriculum Summary

UoS Year 2



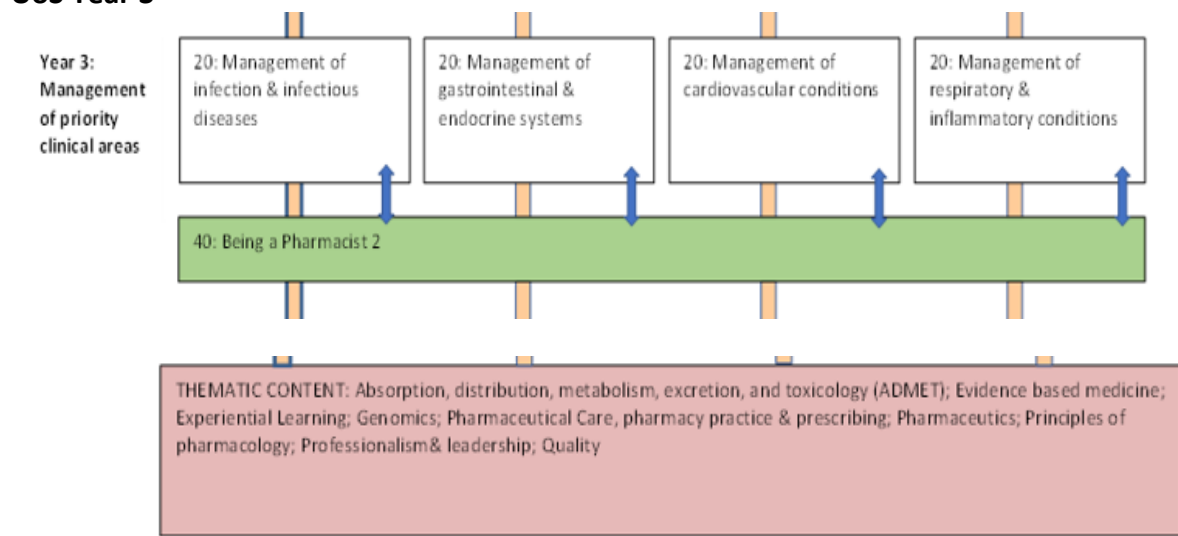
In Year 2 students work on 4 modules that look at normal function of body systems and starting to understand some of the single state conditions things that can go wrong and some of the drugs to treat them. These modules look at GI tract, Cardiovascular and Respiratory systems, CNS and Endocrine, and finally Renal and hepatic systems. This is basically – how medicines get in the body, around the body, processed by the body and out of the body.

At the point where students go on EL in Semester 2 they will have completed the Modules on the Normal function of GI tract, CV and Respiratory and just have finished Normal Function of CNS and Endocrine. They will be familiar with some of the most common things that can go wrong with these systems and medicines to treat them.

Through the Being a Pharmacist element of the course they will have developed communication skills for dealing with patients, colleagues and other healthcare professionals. They will have worked on counselling skills and using WWHAM for OTC requests. They will have covered an introduction to relevant law and ethics, and SOPs. They will be familiar with different prescription types and legislation regarding prescribing.

During EL students will be looking for opportunities “to do” some of the activities in the EL handbook and/or Activity frameworks, especially those that would allow patient contact, and to demonstrate a level of competence in them.

UoS Year 3



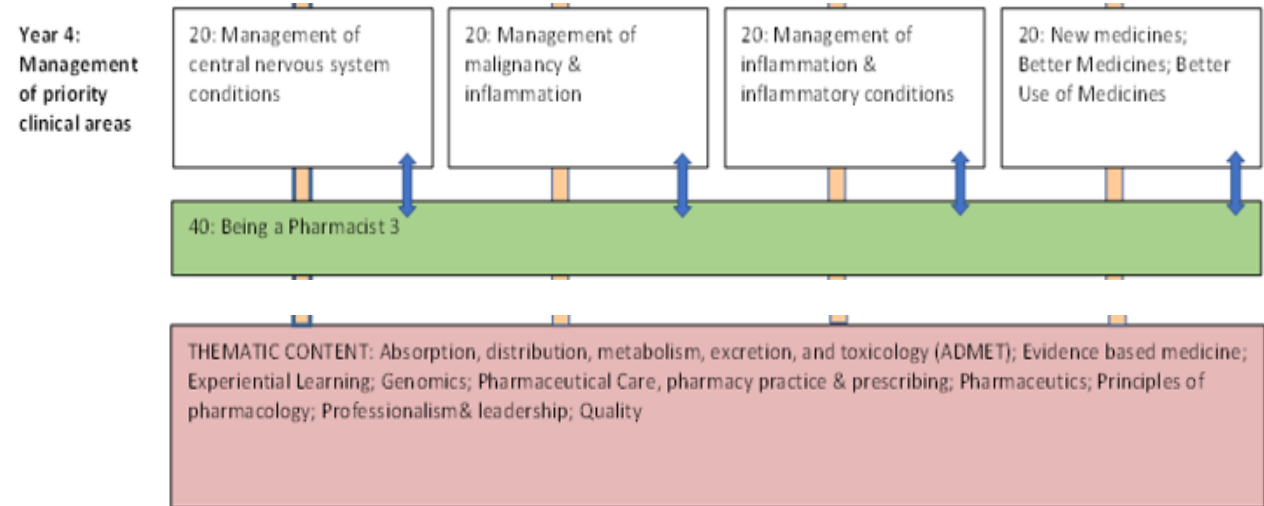
In Year 3 students work on 4 modules that look at the Management of a disease states and build on what they learnt in Y2. The mainly will be looking at individual disease states and the medicines used to treat them. Each module still covers the chemistry, physiology, pharmacology of the conditions and looks at the pharmaceutical management of them.

The modules look at Management of Infection and Infectious diseases and Management of GI and Endocrine conditions. In the first semester, students will be halfway through that module at the time of their first EL in Y3. They will have continued to build on their communication skills and will have also covered Emergency Supply of medicines, an introduction to MCR. They will also have had a workshop that looked at MCR and Medicines Reconciliation an introducing care planning concept.

In Semester two they will cover the Management of Cardiovascular conditions and will have started the Management of Respiratory and Inflammatory conditions by the time they undertake their semester two EL.

During EL students will be looking for opportunities “to do” some of the activities in the EL handbook and/or Activity frameworks, especially those that would allow patient contact, and to demonstrate a level of competence in them.

UoS Year 4



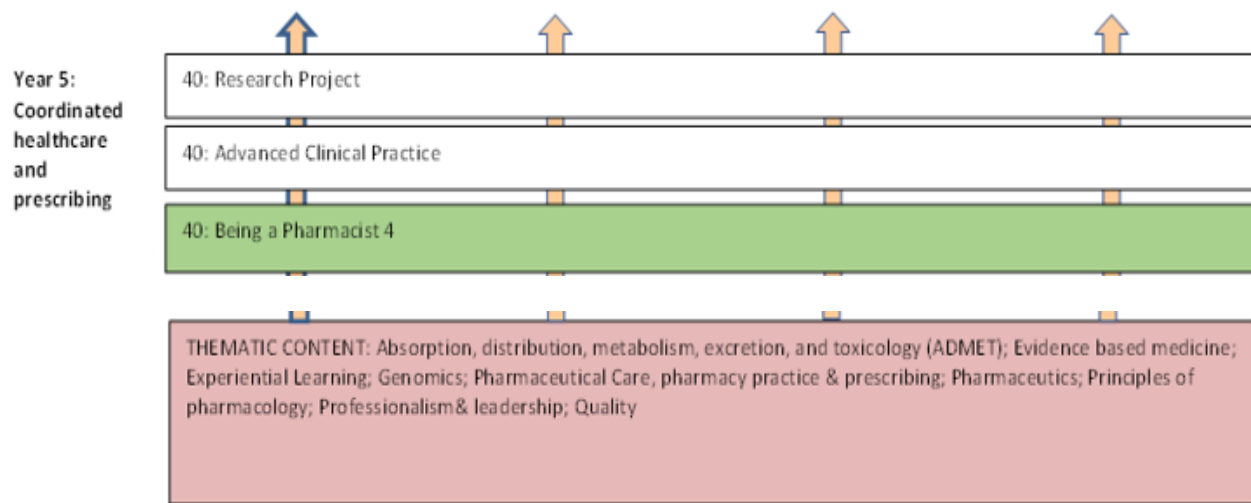
In Year 4 students work on 4 modules that look at the more complex management of a disease states and build on what they learnt in Y2 and Y3. The mainly will be looking at individual disease states still but are also dealing with an introduction to co-morbidities and how these impacts the pharmaceutical care of patients. They start to develop care planning skills. Each module still covers the chemistry, physiology, pharmacology of the conditions and looks at the pharmaceutical management of them.

Before their semester one EL, they will have completed the Management of CNS conditions and be half way through the Management of Malignancy and Inflammation. As previously, this builds on work done on Y3 and includes all aspects including relating this to actual practice. They will also have had a workshop specifically on Medicines reconciliation process both in the Hospital and Primary Care sectors.

By the time they go out on EL in semester two, they will also have covered the Management of Inflammation and Inflammatory conditions. They are continually challenged as to what would they do and what would they prescribe as a pharmacist in practice.

During EL students will be looking for opportunities “to do” some of the activities in the EL handbook and/or Activity frameworks, especially those that would allow patient contact, and to demonstrate a level of competence in them.

UoS Year 5



In Year 5 students work on 1 module based on Advanced Clinical Practice across the whole year. This year builds on everything the students have learned so far, further developing communication skills, care planning skills and focussing everything on clinical practice. EL in first semester will be at the end of the semester. Students will be working on their research projects, undertaking an SBAR assignment, further developing polypharmacy and care planning skills, inter-professional learning and medicines information. They will be looking to be able to demonstrate these skills during their EL.

In the second semester they will continue to develop these skills prior to their EL. During EL students will be looking for opportunities “to do” some of the activities in the EL handbook and/or Activity frameworks, especially those that would allow patient contact, and to demonstrate a level of competence in them.

Appendix two: Assessment Guidance for Facilitators

University of Strathclyde Strathclyde institute of Pharmacy & Biomedical Sciences Guidance notes for student assessment form

1. Student assessment forms – facilitator and pharmacy team member/MDT.

The student assessment forms (facilitator and pharmacy team member/MDT) will consist of student (name and registration number) and assessor details (name only), a tick box grid and a free text box (please see student feedback exemplar). For the facilitator, there will be additional information to complete such as attendance and a declaration that all assessment forms have been completed.

The forms will be hosted on Microsoft® Forms and the links to the forms provided by your student pharmacist.

The student assessment forms **must be discussed with the student and completed by the end of the placement.**

These feedback forms contribute to the overall student assessment of the GPhC learning outcomes but are not the only assessment of these learning outcomes. Overall assessment includes EL assessment, Being a Pharmacist assignments, OSCEs and reflective portfolios. We require 100% return of the forms after the completion of EL to allow students to discuss feedback with their professional development advisor (PDA), reflect, and complete their reflective portfolios.

This should not be an onerous or time consuming task.

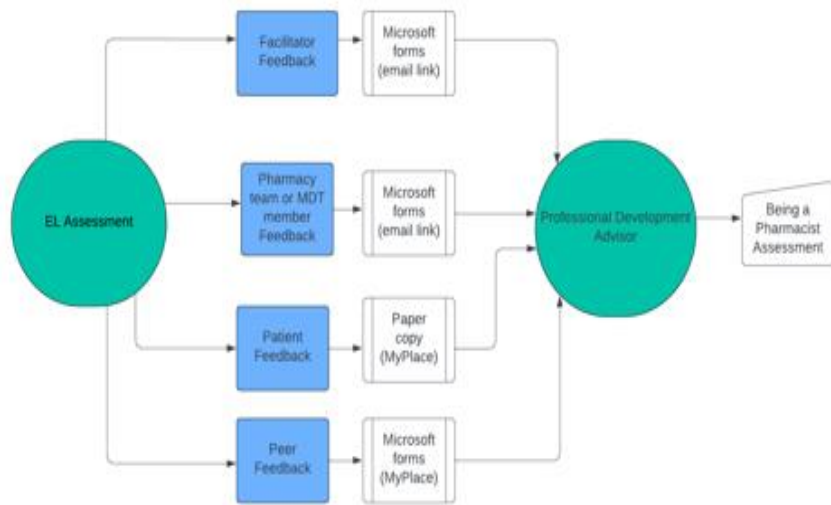
2. Patient Feedback

Students must get a minimum of 1 patient feedback each year. Students will bring a paper copy of the participant information sheet and a patient feedback form for completion during EL. Please discuss this feedback with the student during their placement. The students will upload the patient feedback form onto MyPlace following completion of EL.

3. Peer Feedback

Peer feedback will take place at the University or on experiential learning where there is more than one student at a site. The peer feedback form is the same as the facilitator and pharmacy team/MDT form hosted on Microsoft® Forms. The link for this form will be on MyPlace.

Figure 1: Flow chart showing assessment pathway for experiential learning.



University of Strathclyde
Strathclyde institute of Pharmacy & Biomedical Sciences
Student assessment form

Please assess the student's competency against the following eight learning outcomes as specified in the GPhC Standards for Initial Education & Training of Pharmacists (2021). Students must achieve "does" by the end of year 5.

Student name

Registration number

Assessor

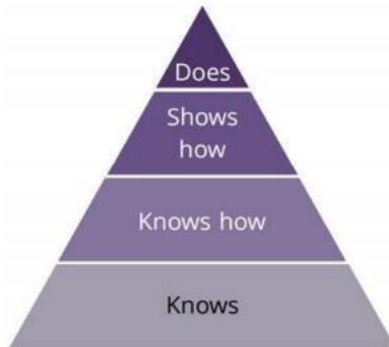
GPhC Learning Outcome	Descriptor	Knows	Knows how	Shows	Does	Not yet observed
1	Demonstrate empathy and keep the person at the centre of their approach to care at all times.					
3	Demonstrate effective communication at all times and adapt their approach and communication style to meet the needs of the person.					
9	Take responsibility for ensuring that personal values and beliefs do not compromise person-centred care.					
10	Demonstrate effective consultation skills, and in partnership with the person, decide the most appropriate course of action.					
16	Apply professional judgement in all circumstances, taking legal and ethical reasoning into account.					
17	Recognise and work within the limits of their knowledge and skills, and get support and refer to others when they need to.					
18	Take responsibility for all aspects of pharmacy services, and make sure that the care and services provided are safe and accurate.					
20	Act openly and honestly when things go wrong and raise concerns even when it is not easy to do so.					

Comments (something the student has done well, something they need to improve)

Assessors name & signature

Date

University of Strathclyde
Strathclyde institute of Pharmacy & Biomedical Sciences
Student assessment form Miller's triangle guidance for facilitators



Miller's triangle

Knows

Has knowledge that may be applied in the future to demonstrate competence. To demonstrate this the student would either volunteer information about a condition, system or would be able to discuss it with facilitator or colleague when asked, showing clear understanding.

Knows how

Knows how to use knowledge and skills. Examples of this may include being shown a task and being able to do it with guidance on a few occasions and may need some support to do it.

Shows how

Can demonstrate that they can perform in a simulated environment or in real life. Examples of this may include conducting a medicines history for a medicines reconciliation or Pharmacy First Plus consultation but needing intervention and support to complete it from the facilitator/supervisor on a few occasions, or conducting a polypharmacy review but needing help to identify some issues.

Does

Can act independently and consistently in a complex but defined situation. Examples of this may include always being able to conduct a consultation, under supervision, but without the need for intervention. Always performing prescription checks accurately, dispensing independently with no errors, or simple patient consultation.

University of Strathclyde
Strathclyde Institute of Pharmacy & Biomedical Sciences
Student feedback form exemplar

Please assess the student's competency against the following eight learning outcomes as specified in the GPhC Standards for Initial Education & Training of Pharmacists (2021). Students must achieve "does" by the end of year 5.

Student name *A Student*

Registration number *2025123456*

Assessor: *A Facilitator*

GPhC Learning Outcome	Descriptor	Knows	Knows how	Shows	Does	Not yet observed
1	Demonstrate empathy and keep the person at the centre of their approach to care at all times.				✓	
3	Demonstrate effective communication at all times and adapt their approach and communication style to meet the needs of the person.			✓		
9	Take responsibility for ensuring that personal values and beliefs do not compromise person-centred care.			✓		
10	Demonstrate effective consultation skills, and in partnership with the person, decide the most appropriate course of action.			✓		
16	Apply professional judgement in all circumstances, taking legal and ethical reasoning into account.		✓			
17	Recognise and work within the limits of their knowledge and skills, and get support and refer to others when they need to.			✓		
18	Take responsibility for all aspects of pharmacy services, and make sure that the care and services provided are safe and accurate.			✓		
20	Act openly and honestly when things go wrong and raise concerns even when it is not easy to do so.					✓

Comments (something the student has done well, something they need to improve, please use specific example(s))

A student has demonstrated a caring and empathetic manner during over the counter consultations with customers in the pharmacy. They undertook several over the counter consultations under supervision where they demonstrated their knowledge and skills. One notable consultation the student demonstrated their knowledge and skills in providing an OTC medication for a patient with hayfever. The student structured their consultation using WWHAM, used open and closed questions to ascertain all necessary information to make the correct diagnosis and treatment plan. The student included the patient in all aspects of the treatment plan and referred to myself when needing a little extra guidance and direction. The student demonstrated professional behaviour throughout and the patient appeared satisfied with the consultation.

A student needs to work on their overall confidence and have more insight into more complex decision making.

Overall, it was a pleasure facilitating A Student on their placement with us and wish them all the best in the future.

Assessors name & signature *A Facilitator*

Date xx/xx/xxxx

University of Strathclyde
Strathclyde institute of Pharmacy & Biomedical Sciences

Patient assessment and feedback

Name of trainee pharmacist

Date of interaction:

Please think about your recent interaction with the trainee pharmacist. Please tick one box stating your feelings for each statement. Feedback is essential for the trainee pharmacists' development and will allow reflection and improvement, where necessary. Thank you for completing.						
How good was the student pharmacist at....	No, not at all	No, not really	Yes, but not fully	Yes	Yes, completely	Not relevant
Making you feel at ease (introducing themselves, explaining role, being friendly and warm towards you, treating you with respect; not cold or abrupt)						
Really listening (paying close attention to what you were saying, not being distracted as you were talking)						
Being interested in you as a whole person (asking/knowing relevant details about your life, your situation, personalising treatment to you, not treating you as "just a number")						
Fully understanding your concerns (communicating they had accurately understood your concerns and anxieties, not overlooking or dismissing anything)						
Showing care and compassion (seeming genuinely concerned, connecting with you on a human level, not being indifferent or "detached")						
Explaining things clearly (fully answering your questions, explaining clearly, giving you adequate information, checking your understanding, not being vague)						
Helping you to take control (exploring with you what you can do to improve your health yourself, helping you get most of out of your medicines, making you feel "in control" of decisions regarding your health encouraging rather than "lecturing" you)						
Making a plan of action with you (discussing the options, involving you in decisions as much as you want to be involved, not ignoring your views)						

University of Strathclyde
Strathclyde Institute of Pharmacy & Biomedical Sciences
Patient Information Sheet

Information for patients on providing feedback for student pharmacists.

Why your feedback is important.

You have been asked to provide feedback by a student pharmacist as part of undergraduate pharmacy degree. This degree is four years long and is followed by a year of training in a pharmacy. During this training, they are working alongside a qualified pharmacist but are able to undertake some tasks themselves. An important part of education is that student pharmacists learn about areas where they are doing well and where they could do better. As a patient who has received care or a service from a student pharmacist, your views are extremely important. You can help the supervisor and student pharmacist be sure that they working to level expected. Feedback will be given by multiple patients, so your feedback will remain anonymous.

How can you provide feedback?

If you choose to take part, you will be given a survey to complete. The survey asks questions where you give a rating, it does not ask for any personal details. While we hope you want to take part and help the student pharmacist with their education, you do not have to. You can decide that you would rather not complete and you won't be treated any differently. If you need assistance to complete the feedback, you can take the form home and ask a friend or member of your family to help you. Once you have finished, please return your feedback to the pharmacy. Please ask if you are not told how to return the form. The student pharmacist will receive the feedback from different patients. They will not know who has given feedback so you will remain anonymous.

What to do if you are worried about your experience?

If while completing your feedback you realise that you are extremely unhappy about the care/service received or are very worried about this student pharmacist, please ask to speak to the supervisor. A supervisor (pharmacist) should be available at all times; however, they may be working in a different area of the pharmacy at the time. You should be given the chance to speak to them privately about your concerns.

