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

University College Cork

June 2025

Contents

Introduction

This document should be read in conjunction with the relevant Pharmaceutical Society of Ireland (PSI) Accreditation Standards, as published on the PSI website at www.psi.ie.

Stemming from the Pharmacy Act 2007 (as amended) and recognised in Directive 2005/36/EC of the European Parliament of the Council on the Recognition of Professional Qualifications, the PSI, the pharmacy regulator, has responsibility and powers for the approval with regard to the programmes of education and training of pharmacists in Ireland.

The present report concerns the ongoing accreditation of the five-year integrated Master of Pharmacy degree pharmacy programme (MPharm) delivered by the School of Pharmacy, University College Cork (UCC) against the relevant PSI Accreditation Standards. Successful completion of the programme by a student leads to the award of the MPharm degree and confirmation by UCC that a graduate has fully demonstrated the competencies necessary to apply for entry into the register of pharmacists maintained by the PSI.

In June 2020, the PSI Council approved and recognised the programme provided by UCC for a period of five years.

To be further approved and accredited by the PSI Council, and in accordance with the Pharmacy Act 2007, UCC submitted the following document to the PSI for consideration:
-    Self-Assessment Report (SAR)
The SAR was accompanied by additional documentation and evidence, details of which can be found in Appendix 1 of this report.

The report contains the evaluation of the accreditation team, who have considered the alignment of the programme with the relevant Council approved PSI Accreditation Standards.

In each case, the team have assessed whether or not the proposed programme meets the relevant standard. The team is satisfied that UCC's MPharm programme meets all accreditation standards and has therefore not identified any conditions of accreditation. The team has proposed a number of recommendations for enhancement of the programme, as well as commendations where it observes exemplary practice in the programme's delivery.

The on-site accreditation visit took place on the UCC campus on 26 and 27 February 2025. The full agenda and attendance list for the accreditation visit is included in Appendix 2 of this report.

Accreditation Team

Name	Role	Affiliation
Professor Andy Husband	Chair and subject-matter expertise	Head of School of Pharmacy, Newcastle University
Dr Fiona Hughes	Subject-matter expertise	Senior Lecturer (Education) – Pharmacy Practice, School of Pharmacy, Queens University Belfast
Aisling Reast	Quality assurance expertise	Head of Quality Enhancement, Royal College of Surgeons in Ireland University of Medicine and Health Sciences (RCSI)
Dr Elizabeth Mitchell	Subject-matter expertise	Senior Lecturer and Pharmacy Programme Lead (MPharm), University of Lincoln

The accreditation team was supported by:

Name	Role	Affiliation
Cora O'Connell	Acting Head of Practitioner Assurance	The Pharmaceutical Society of Ireland
Andrea Boland	Professional Standards Coordinator	The Pharmaceutical Society of Ireland
Pádraig Corbett	Professional Standards Officer	The Pharmaceutical Society of Ireland
Gabrielja Gcric	Regulatory Executive, Community of Pharmacy Assurance	The Pharmaceutical Society of Ireland
Mairéad Boland	Rapporteur	Head of Quality Assurance, Quality and Qualifications Ireland

Declarations

No declarations pertaining to conflicts of interest were made.

Recommendation of the Accreditation Team to the PSI Council

> Continue to grant its recognition and approval for the Master's Degree Programme in Pharmacy at UCC for a period of five years.

Summary of Commendations

The accreditation team **commends** the School of Pharmacy for the:

- strong leadership in place within the School as well as the School's own leadership within the University. There is clarity of message and purpose across the School and a clear commitment by all staff members to the strategy and its implementation. This commendation relates to Standard 2.
- way in which the School engages with university and college-level governance with regard to finances and the strong degree of autonomy that the School has in terms of how it directs its resources. This commendation relates to Standard 3.
- breadth of innovative IPL activity established across the curriculum. This commendation relates to Standard 4.
- school's engagement with students – in particular, the way in which it promotes, facilitates and works in partnership with students. This commendation relates to Standard 5.
- strong genuine culture of continuous enhancement that is evident across the School. This commendation relates to Standard 6.
- initiative shown by the School in innovating to develop approaches and initiatives where needs are identified – for example, Wobble Week and its approach to the provision of feedback on assessment. This commendation relates to Standard 7.

Summary of Recommendations

The accreditation team **recommends** that the School of Pharmacy:
- Build upon the work already undertaken to create an inclusive culture within the School and incorporate additional EDI-related content within the MPharm curriculum. This recommendation relates to Standard 2.

- Consider how best to make provision for and support students in a post-plagiarism world. This includes consideration by the School of more complex issues relating to academic integrity, such as contract cheating and unauthorised content generation using generative AI and the explicit linkage of academic integrity to the professional formation of the student. The School should consider taking a more structured approach to supporting students to develop academic skills and consider scaffolding the burden of assessment across the programme. This recommendation relates to Standard 4.

Summary of Conditions
The accreditation has not proposed any conditions of accreditation.

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

Standard 1: Strategy

Standard 1: Strategy	Accreditation Team's Commentary

1. **The Professional Degree Programme Provider (or Higher Education Institution (HEI)) must have a current strategy that underpins the programme's objectives.**
 	
1) The strategy and the objectives thereunder should:
 	
    a) Promote professional behaviour among students, staff and all those contributing to the Professional Degree Programme.
 	
    b) Be committed to the development of graduates who satisfy the requirements of the Core Competency Framework for Pharmacists.
 	
    c) Respect and support the needs of diverse stakeholders, the public, students, staff and all those contributing to the Professional Degree Programme.
 	
2) There should be evidence that the strategy and its objectives are subject to regular review and validated by the Higher Education Institution.
 	
3) The implementation of the strategy must include but need not be limited to:
 	
    a) The objectives of the Professional Degree Programme Provider in relation to the
	University College Cork (UCC) was founded in 1845. The University has approximately 24,000 students who undertake studies at undergraduate and postgraduate levels. UCC's academic delivery and research activity extend across a breadth of disciplines through an infrastructure of colleges and schools. This activity is supported by a complement of staff – academic and professional services – of approximately 3,400.
	
	UCC's School of Pharmacy (SoP) was established in 2003 and, in the same year, UCC's first programme of pharmacy education leading to a Bachelor in Pharmacy (BPharm) was accredited. The first cohort of students to graduate from the BPharm did so in 2007. In 2014, the PSI recognised and accredited UCC's MPharm programme for the first time. Students who were enrolled on the programme as part of its inaugural cohort graduated in 2020. Since the programme's inception in 2014, it has been recognised and re-accredited twice by the PSI (in 2017 and 2020). Through this reaccreditation process, UCC's SoP is seeking the PSI's continued recognition and accreditation of its MPharm programme.
	
	Since 2003, UCC's SoP has developed and delivered other programmes situated within the discipline of pharmacy, which lead to the awards of:
	  - Master of Science in Clinical Pharmacy
	  - Master of Science in Pharmaceutical Technology and Quality Systems
	  - Master/Postgraduate Diploma in Pharmaceutical Regulatory Science
	  - Master of Science in Industrial Pharmaceutical Sciences (Operations and Management)
	The first cohort of students to undertake PhD programmes within the SoP graduated in 2008, and the School currently has 55 registered research students (PhD and Masters by research). Overall, the SoP has 22-25 academic staff and a student:staff ratio of 18.6:1.

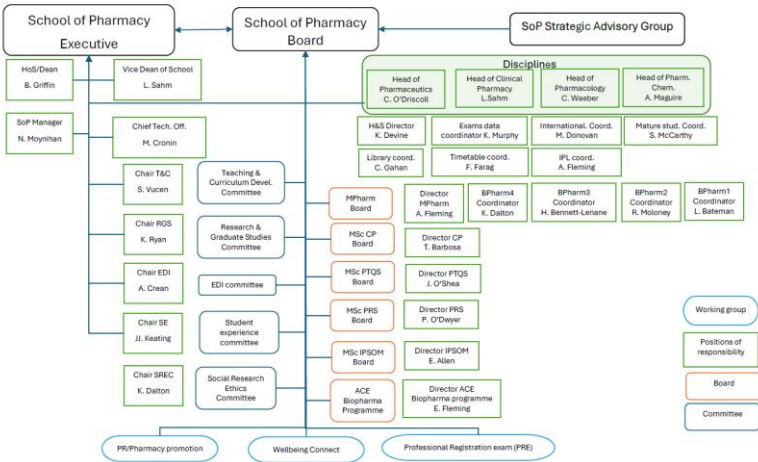|	
Professional Degree Programme. b) The implementation of the strategy must ensure that it: i) Assures that graduates will be prepared for entry to the profession of pharmacy including patient-centred practice in line with the current Core Competency Framework for Pharmacists, as updated by the PSI Council from time to time. ii) Prepares graduates for practice as pharmacy professionals who will be equipped with the skills for lifelong learning. iii) Provides structured experience of interprofessional learning to facilitate teamwork in enhancing patient care. c) A commitment to excellence in teaching and learning methods. d) A vision for leadership in practice, research and other scholarly activity and educational activities. 4) For a newly planned and/or recently established programme, the Professional Degree Programme Provider must provide a comprehensive strategy outlining the planning, development and implementation phases of the programme.	The SoP's current strategic plan was launched in 2023 and will remain in force until 2028. The SoP's self-assessment report (SAR) notes that this strategy builds upon the SoP's previous strategic goals and that it has been developed to align with the University Strategy and to demonstrate commitment to the 2020-2024 strategic roadmap of the College of Medicine & Health (CoMH). The accreditation team could observe this coherence across all three documents and note the strong institutional governance that this alignment demonstrates. In its strategic plan, the SoP sets out a clear strategic vision for the School alongside its mission and values. In its totality, the document presents a school of pharmacy that has a clear focus on the goals it wishes to achieve and an effective roadmap for doing so over the strategic period. The School's vision is "to be a leading School of Pharmacy for excellence in pharmacy education, impactful innovation and sustainable pharmaceutical care". Its mission, which incorporates the '4 I's' that comprise its values, is "to grow and empower the next generation of leaders in pharmacy for *integrity*, *innovation*, *inclusivity* and *impact* in pharmaceutical care". The strategy demonstrates alignment with the PSI Core Competency Framework (CCF). The accreditation team observes that, in line with the CCF, the programme equips graduates with the skills and knowledge needed to deliver patient-centred care and engage in continuous and lifelong learning. Through engagement with relevant stakeholders and guest lecturers, students are exposed to potential career paths with industry, regulatory bodies, in hospitals and in the community. The SoP strategy places emphasis on cultivating inclusivity and innovation, both in the MPharm curriculum and in relation to supporting students and staff with diverse needs from across diverse backgrounds. Approximately 30% of pharmacy students enter the programme through non-traditional routes (10% through the Disability Access Route to Education [DARE] or the Higher Education Access Route [HEAR]; 10% through mature student access, and 10% from non-EU/international backgrounds). During the on-site visit, the accreditation team heard examples of EDI initiatives that the SoP has undertaken (often in collaboration with students) since the last accreditation process. These include the introduction of a student 'EDI award' and the inclusion of opportunities for students to meet with service-users from a disparate range of backgrounds throughout the programme. The accreditation team

welcomes these initiatives. To build on this work, the team has made a recommendation on the further embedding of EDI within the programme curriculum under Standard 2; EDI will be discussed further later on in this report.

As noted above, the 2023-2028 SoP strategy builds upon the previous strategic plans developed by the School. The SAR sets out clear examples of key milestones achieved during the two previous strategic period, including the construction of the pharmacy building and development and continuation of strategic interactions and the implementation of the MPharm programme. The strategy sets out specific goals for the SoP and achievement of each goal is supported by key initiatives and actions. During the onsite visit, the SoP detailed the manner in which SMART KPIs are assigned to each goal (including KPIs that relate specifically to the PSI standards) and tracked over time. A live risk register is maintained and any new risks identified are added and discussed by the executive. Metrics may be updated based on these discussions. The accreditation team notes that the QS World Rankings – and the SoP's rise in QS subject rankings to achieve a place within the top 100 in the world in pharmacy and pharmacology – provides a notable benchmark and external validation for the School's successive strategies and their implementation. It also observes the School's success (particularly as a relatively small school) in and support for staff progression to assume university-level leadership positions. Evidence of the School's readiness to act upon recommendations received through previous PSI accreditation process was also clear from the SAR and the onsite visit.

As set out above, the strategy explicitly references and is mapped to the PSI CCF. The SAR notes that assessments have been designed to allow students to demonstrate learning outcomes and that competency achievements are measured throughout the programme by linking the intended learning outcomes of individual modules to the CCF. A corresponding mapping document was supplied to the accreditation team alongside the SAR. Students are also provided with a similar mapping.

The SAR confirms that 100% of graduates secure employment and the outcomes of a 2024 survey of 556 UCC pharmacy graduates shows a spread of career paths, with 47.7% employed in community pharmacy, 17.7% in hospitals, and 21.5% in industry. The survey also found that 80.2% of graduates in non-patient facing roles maintained their PSI registration.

84.7% of respondents confirmed their satisfaction with the pharmacy degree. The accreditation team observes that these statistics demonstrate the SoP's commitment to producing graduates who meet societal and professional needs, regionally and nationally.

The SAR states that UCC's MPharm programme is structured to support achievement of the School's strategic mission: specifically, this involves the establishment of a "sound basic science foundation" in the early years and the use of an "integrated 'systems-focused' approach…to enhance teaching and learning", drawing upon research and the interdisciplinary expertise of academic staff. During the onsite visit, the accreditation team noted the extensive volume of chemistry within the curricula for years 1 and 2. The programme team outlined the trajectory of the programme since its inception, observing that the proportion of chemistry covered in the curriculum has declined over the years and adverting to the development of a new module, Applied Clinical Pharmacy, that is intended to provide insight for students into the knowledge and practical skills required by newly qualified pharmacists (this module is discussed further later on in this report). Notwithstanding this, the accreditation team encourages reflection by the programme development team on the curriculum and the needs of students in light of the evolving role of the pharmacist.

The SAR and accompanying documentation demonstrate a commitment by SoP leadership and staff to excellence in teaching and learning. Approximately 80% of academic staff hold qualifications in teaching and learning and, at the onsite visit, the accreditation team heard that this is explicitly encouraged and supported by school leadership. The recruitment of an instructional designer is viewed by the accreditation team as an important strategic appointment, which, in addition to the active involvement of alumni practitioners and the employment of a range of teaching and assessment methods, should produce an innovative, evidence-based and practice-relevant education. These elements will support students' development into graduates capable of practising in a patient-centred, professional manner with skills that will support them to engage in lifelong learning.

A well-structured model of inter-professional learning (IPL) is integrated within the programme's curriculum across the five years of study, and the accreditation team notes the pioneering role played by the SoP in UCC in developing and implementing a programme of

	IPL that now provides a model for other schools and disciplines. IPL will be discussed in greater detail under Standard 4.
Compliance with Standard:	The accreditation team is satisfied that this standard has been met
Commendations **Recommendations** **Conditions**	The accreditation has not proposed any conditions or recommendations related to this standard.

Standard 2: Leadership, Organisation and Governance

Standard 2: Leadership, Organisation and Governance	Accreditation Team's Commentary
2. There must be clear management structures for the Professional Degree Programme with a schedule of roles and responsibilities, and a defined structure and process to show lines of accountability and authority for all those involved in the delivery of the Professional Degree Programme. 1) The Professional Degree Programme must be planned and delivered by an identifiable organisational unit, preferably a School or Faculty of Pharmacy, which has responsibility for the Professional Degree Programme and associated appropriate resources. Furthermore, the Professional Degree Programme must be planned and maintained through transparent processes and must clearly identify who is responsible for what at each stage. 2) The Head of the School must demonstrate leadership in pharmacy professional education, research and scholarly activities, and so be able to influence the HEI and the School policy in relation to pharmacy. In the event that the Head is not a pharmacist registered in Ireland, there must be an identified pharmacist registered in Ireland who can provide leadership in the practice and profession of pharmacy. This person must be at a senior level within the School and be registered in the Register of Pharmacists and thereby be familiar with, and subject to, the PSI statutory Code of Conduct.	The accreditation team notes the well-established transparent and robust governance and management structures in place within the SoP, which clearly define and allocate roles and responsibilities for the programme's oversight, development and delivery, as well as its quality assurance and enhancement. It further notes the way in which these school-level structures are complemented by comprehensive governance and management systems at both college and institutional level. Detailed charts showing the University, College and School organisational, governance and management structures are provided in the SAR. As noted under Standard 1, the SoP is the organisational unit within UCC responsible for the planning, delivery and continued development of the MPharm programme. The School's organisational and management structures are prescribed by the SoP's Rules of Governance and an organisational chart for the School provided in the SAR shows the remits held by members of the executive leadership team, the boards and committees responsible for governance and quality assurance of the programme and the clear reporting lines between the various entities. The roles and responsibilities of individuals and entities are informed by the College of Medicine and Health Sciences (CoMH) Governance Policy. *Fig. 1: Organisational and management structure of the School of Pharmacy*

3) The HEI must support the development of suitable relationships between the School and other academic and service units of the HEI for instruction, research, practice-based and interprofessional learning.

4) External relationships or collaborations with the pharmacy profession must be facilitated to foster the School's teaching, learning and research capabilities. The School should have access to, and arrangements with HEI affiliated and other healthcare facilities in support of the practice-based and interprofessional learning needs of the Professional Degree Programme. Wherever possible, collaborative approaches to practice-based placements must be used in conjunction with other HEIs in the State offering a pharmacy degree programme.

5) The Professional Degree Programme must be based on and promote the principles of equality, diversity and fairness and meet all the requirements of National and European law as it relates to the education, training and qualification required for registration as pharmacists and must be delivered in such a way that the diverse needs of all students are met.

6) As part of the statutory annual reporting process to the PSI, the School must submit data on student intake, student numbers, student achievement and progression through the Professional Degree Programme and Fitness to Practise cases. Key issues, including any changes in resources that are pertinent

UCC's MPharm programme is taught through an integrated spiral curriculum, which sees students undertaking 60 ECTS credits per year. Academic regulations for the programme are defined at university level within UCC's Marks and Standards document, supporting a systematic and transparent approach to programme planning, delivery and assessment. The MPharm book of modules sets out the objectives, content, learning outcomes and assessment structure for each module, alongside the module co-ordinator. The Book of Modules is available digitally on the UCC website and the accreditation team notes that its presentation is accessible and student friendly.
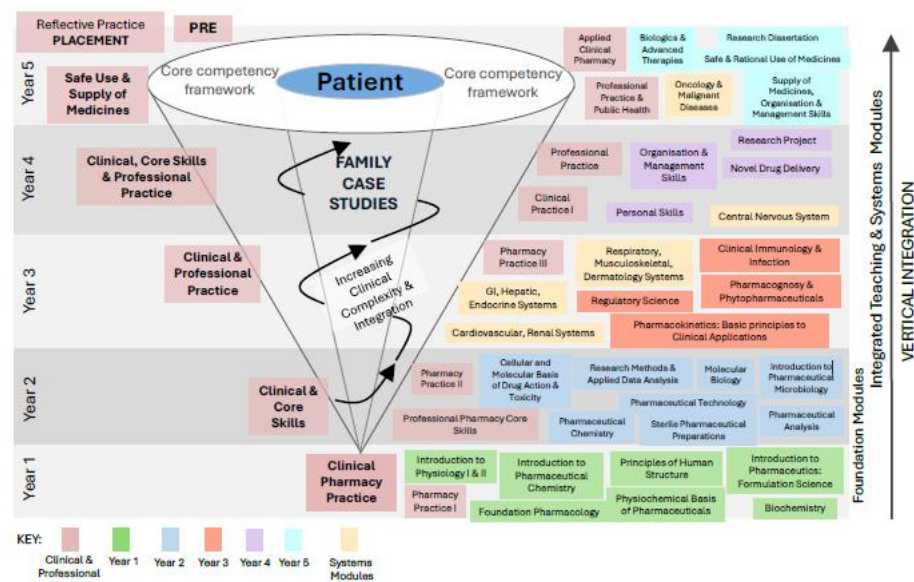
Fig. 2: Graphic representation of the MPharm curriculum

The responsibilities of the Head of School are defined in university policy. The SoP is led by an established leader who has a strong track record in research, pharmacy education, scholarly activity, and programme development and delivery, and who maintains registration with the PSI. In addition, the Head of School contributes to national-level discussions of policy regarding pharmacy education and the development of the profession through his

to the delivery of the Professional Degree Programme and any equality and diversity issues which could have an impact on students, should be included with the School's commentary and analysis. The School must maintain a reliable, accurate and workable management information system in support of this.

7) The Head of School has an obligation to report to the PSI:

a) At the point of graduation, a confirmation that each graduate has met the competencies in the CCF.

b) Any 'fitness to practise' matters and/or any other matters that could have a material impact on future fitness to practise when the student/graduate is practising as a pharmacist.

membership of the board of APPEL (Affiliation for Pharmacy Practice Experiential Learning) and of the PSI Pharmacy Workforce Working Group.

The SoP's position alongside five other schools within the CoMH facilitates strong links with other disciplines and professions and supports interdisciplinary collaboration and interprofessional learning as well as joint appointments and co-teaching (for example, pharmaceutical chemists have joint appointments across the SoP and the School of Chemistry). In facilitating such sharing and exchange, the SoP team emphasised that academic staff external to the SoP who teach on the MPharm programme are cognisant of the requirements of the profession and the CCF.

The five CoMH schools meet fortnightly to exchange and share updates; each school produces an annual report based on a common template and submitted to college leadership. Exchange is also facilitated through the college's boards and committees. At the onsite visit, the SoP team noted the service culture that permeates the CoMH and provided examples of shared learning across the School, including the School's learning with regard to the operation of APPEL that may inform the establishment of joint placement coordinating offices in other disciplines; another example shared related to the implementation of visual thinking training. The accreditation team also heard that close links are maintained between school managers in the CoMH, who meet regularly. The links between the SoP and other schools within UCC are also demonstrated through the establishment of a number of interdisciplinary degree programmes and through the SoP's leadership of two emerging multi-disciplinary research clusters (UCC Future Medicines and UCC Future Pharmaceuticals).

The SAR provides details of the collaborative relationships maintained by the SoP with external stakeholders and the depth and breadth of these relationships were clear at the onsite visit. The SoP has built strong relationships with the pharmaceutical industry, with which it engages in a breadth of interactions. It is also partner to several strategic national and international research initiatives. The accreditation team notes with approval the number of clinicians engaged in PhD studies within the SoP, including through the CoMH's proactive support of employment-based PhD scholarships for health science professionals. Nine practising community pharmacists contribute to the delivery of the programme in the role of teacher practitioners (this number has increased from three in 2022).

At the onsite visit, the accreditation team also heard of the contributions of pharmacists through voluntary, informal roles on the programme. The accreditation team acknowledges and congratulates the SoP on the goodwill that it appears to have nurtured among stakeholders in the 20 years of its existence, but encourages the School to ensure that appropriate contingency plans are in place in the event that these relationships cannot be maintained. UCC is one of the founding members of APPEL, the consortium through which the three existing schools of pharmacy in Ireland manage and quality assure practice placement. As noted above, the head of the SoP is a member of the APPEL board (placement and APPEL will be discussed later on in this report). The SoP is active within the UCC Academic Health Sciences system, an initiative of the CoMH, which aims to strengthen partnerships between the University and various stakeholders in the South/South-West region. The SAR notes active working relationships with various clinical sites.

The accreditation team is satisfied that the SoP caters to the needs of the diverse group of students enrolled on the MPharm programme (as noted above, approximately 30% of the intake to the MPharm programme are students who come through non-traditional routes). The principles of equality, diversity, fairness and inclusion are supported by policies, structures and initiatives at university, college and school level. The SAR lists a number of university policies that set out responsibilities and expectations of staff, students and the University when it comes to equality, diversity and inclusion (EDI). Measures to support the creation of accessible learning resources are made available to teaching staff. Other university-level EDI measures include the provision of bystander training for every student upon entry to the University and the planned delivery of consent training (in collaboration with the University of Galway).

The SoP has engaged in a considerable amount of work to create and maintain an inclusive and welcoming environment. The pharmacy building has been reviewed to determine whether it meets the criteria for universal design and a number of enhancements have been made as a result of this review (for example, the installation of 'wobble stools' and the provision of quiet booths). The SoP has already attained an Athena SWAN bronze award and intends submitting an application for a silver award in November 2025. An SoP EDI committee was put in place following the Athena SWAN accreditation, and this entity reports

| | to the SoP board. Students are briefed on the School's commitment to EDI principles by the EDI committee chair at the MPharm induction.

Students are required to accept the fitness to practise requirements upon registration and must make annual declarations on their fitness to practise, which are aligned with their competency attainment. The University's fitness to practise process is informed by profession-specific codes of conduct, including the PSI Code of Conduct. A standard-form email is sent to any student who makes a fitness to practise declaration (which may relate to a health or a criminal matter), detailing their entitlement to reasonable accommodations and supports from the University, as well as the process that will be followed in managing their disclosure.

APPEL materials to prepare and train students for practice placement have been reviewed and customised to support their suitability for diverse individuals and cohorts. The SoP has also surveyed students to investigate any experience of discrimination or exclusion, and has adjusted established teaching approaches to mitigate challenges identified (for example, student project groups are now established at random rather than alphabetised to support students to get to know classmates beyond their group).

Work has been done to incorporate consideration of the experience of a spectrum of service-users into the curriculum (for example, an increasingly diverse composition of the 'Pharma Family') and guest lectures from individuals with lived experience of diversity and disability. This includes efforts by the SoP to facilitate students to learn from individuals with literacy challenges and experience of drug mis- and abuse to older service-users and individuals from a variety of cultural backgrounds. These initiatives are admirable; however, the accreditation team finds that this work is still at an early stage and encourages the SoP to redouble its efforts to ensure that the principles of EDI are securely anchored within the continued development of the curriculum, as well as in its teaching and assessment. **The accreditation team has made a corresponding recommendation for the SoP under this standard.**

The SoP has provided the accreditation team with an overview of the KPIs related to student intake, student numbers, and progression, as well as fitness to practise issues. These are tracked as part of the annual SoP review. The KPIs are accompanied by corresponding targets |

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	for the reporting period alongside an analysis of whether the target has been achieved, exceeded, or not achieved. These data, alongside information relating to achievements by the SoP during the reporting period, any modifications made to the programme and updates on how the programme continues to align with each accreditation standard, are submitted to the PSI annually. The SAR confirms the Head of School's cognisance of their obligation to ensure that each graduate has met the competencies set out within the CCF and that the SoP maintains detailed records of student marks, progression statistics, and logs of fitness to practise declarations. These data are reported to the PSI as part of the annual reporting process mentioned above.
Compliance with Standard:	The accreditation team is satisfied that this standard has been met.
Commendations **Recommendations** **Conditions**	The accreditation team **recommends** that the SoP: - Build upon the work already undertaken to create an inclusive culture within the School and incorporate additional EDI-related content within the MPharm curriculum. The accreditation team **commends** the SoP for the: - strong leadership in place within the School as well as the School's own leadership within the University. There is clarity of message and purpose across the School and a clear commitment by all staff members to the strategy and its implementation.

Standard 3: Resources

Standard 3: Resources	Accreditation Team's Commentary
3. The School must have sufficient academic staff, practice educators, external experts, support staff as well as tutor pharmacists, infrastructure and financial resources in order to ensure the effective delivery of a Professional Degree Programme. 1) Academic Staff The School must have a sufficient number of core academic staff and other teaching staff appropriately qualified, experienced and expert in pharmaceutical sciences and pharmacy practice. Policy within the School must be developed to facilitate input from staff and external experts with contemporary experience of practice, to curriculum design and development, assessment design and development, and course management and coordination activities. This staff, full-time and part-time, must: a) provide most of the teaching and learning support for the Professional Degree Programme; however, where 'service-teaching' is identified as required for a small part of the programme, there shall be a robust means of managing its integration into the Professional Degree Programme.	The SAR provides a table that clearly delineates the core complement of staff (30 in total) engaged in delivery of the MPharm programme alongside each individual's qualifications, their PSI registration status (where applicable) and their role in relation to the programme and the SoP. The accreditation team notes that this list provides ample evidence that the SoP retains a sufficient number of core academic staff, with a staff:student ratio of 18.6:1. The accreditation team notes the significant improvement made in this regard since the last accreditation process. A table in the SAR lists those SoP staff who teach 90% of the MPharm and provide leadership and module coordination for the programme. Overall, the academic direction of the teaching, learning support and assessment of the MPharm programme is provided by the Teaching and Curriculum Development Committee (TCDC), which is populated by 10 members of staff who represent all disciplines within the SoP. The TCDC chair provides a direct link between the committee and the SoP executive team. All modules are subject to annual review through the external examiner reporting process and the SoP programme board. A further table within the SAR depicts the cohort of staff that teach the remaining 10% of the programme; the accreditation team notes that this represents an appropriate level of delegation of service teaching for a small portion of the programme. Those staff members who take on these roles are included within the programme's management and coordination through their involvement in pharmacy programme board communications, strategic planning days, external examination boards and curriculum review meetings. There is a full-time practice educator in post and, as outlined above, an impressive range of teacher practitioners. At the onsite visit, the accreditation team noted with approval the comprehensive, scaffolded supports provided to students by the practice educator. An extensive list of external specialist lecturers is engaged with the programme as guest lecturers. External experts may also take on adjunct roles to provide strategic advice or participate directly in teaching and research within the SoP. The accreditation team notes

b) provide the academic direction for all teaching and learning support or assessment provided by individuals from outside the School.

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

d) be encouraged and supported to engage in scholarship and research which is disseminated nationally and internationally.

e) have access to an organised professional development programme open to all teaching staff members consistent with their respective responsibilities.

f) ensure that teaching and learning in modules/course units in that area take place in a pharmacy context, in particular where no pharmacist is appointed within an area of academic expertise.

g) ensure that pharmacy law, ethics, professionalism and pharmacy practice are taught predominantly by pharmacists with appropriate contemporary experience of practice.

2) Practice Educators

with approval the innovative 'Town & Gown' initiative through which pharmacist practitioners from the SoP's community of practice support the SoP team in their delivery of the curriculum and advise on its continued development to ensure that it is well aligned with contemporary practice. The initiative also facilitates members of the community of practice to host student placements, participate in the annual national Professional Registration Exam (PRE). These individuals may progress to the role of teacher practitioner or take up an adjunct appointment within the SoP. The accreditation team notes that student feedback on the initiative is very positive. Overall, the accreditation team observes that the staff resource available to the SoP for the MPharm programme is of a high quality, sufficient and appropriate.

The accreditation team is satisfied that appropriate resources and supports are provided to staff to maintain their knowledge at the leading edge of pharmaceutical, biomedical, social sciences and clinical pharmacy practice. There is clear evidence of the School's facilitation of progression by its staff. It is noted in the SAR that, over the past five years, five academic staff members of the SoP have been promoted to the rank of professor, and five to the rank of senior lecturer. The SAR demonstrates that staff are not only encouraged but actively supported to engage in scholarship and research, with clear evidence of both leadership and dissemination at national and international levels. Research and impact metrics for all staff in the SoP for the past five years are provided and the accreditation team notes that, on average, SoP academic staff have collectively published between 70 and 80 peer-reviewed publications annually over this period. The SAR confirms that over 90% of academic staff members have published more than one peer-reviewed paper in the past year and that each academic staff member supervises at least one PhD student.

The SAR confirms that 21 staff within the SoP have completed formal postgraduate qualifications in teaching and learning alongside professional development in the areas of leadership, management and the use enhanced learning technologies. Funding is provided by the SoP to staff who wish to engage in their own professional development (for example, engagement with the Current Leaders and Aurora leadership development programmes). At the on-site visit, the Head of School confirmed that he meets SoP staff individually to identify training needs – an associated budget is then provided where requested training is approved.

The School must have a sufficient number of Practice Educators who will provide the specialised teaching on the interface between the learning within the schools and that within the practice placement and who will provide support to the students on placement and to their tutors.

3) External Experts

The School should ensure that relevant input from external specialist lecturers is provided to enhance the students' contextual understanding of specific areas.

4) Support Staff

The School must have a sufficient number of support staff suitably qualified/trained and experienced to support its operation. This staff must have access to development opportunities.

Technical staff should be suitably qualified and should take an active role in the preparation and delivery of laboratory practice sessions and projects.

5) Tutor pharmacists

Pharmacists acting as tutors for the practice-placement elements of the programme must be of sufficient number, appropriately qualified and experienced and be professional role models with the knowledge, skills, attitudes and behaviours to effectively mentor, monitor and evaluate students.

As noted above, the accreditation team is satisfied that a sufficient number of the programme's core academic staff comprises pharmacists to ensure that teaching and learning in modules and courses takes place within a pharmacy context – 19 members of staff are registered with the PSI. The spirally integrated curriculum (see fig. 2 above) supports the vertical and horizontal integration of topics and disciplinary areas, and the teaching of interdisciplinary modules from year 1 of the programme helps students to underpin the applications of science into practice. The SAR notes that the early clinical exposure and use of practice examples provided by such modules engenders interest among pharmacy students and helps them to understand why it is important to focus on basic sciences in the early years of the programme.

The SAR and accompanying documentation provide information on the support staff for the MPharm programme and the accreditation team notes that the cohort of support staff is appropriate to the size of the School. The support staff are clearly highly experienced, based on the backgrounds provided in the application documentation.

All modules pertaining to pharmacy law, ethics, professionalism and pharmacy practice are coordinated by academic staff who are registered with the PSI. They are supported in the delivery and continued development of the modules by teacher practitioners and other external contributors. The SAR notes that this ensures that the content and delivery are appropriate and aligned with contemporary thinking. The SAR affirms that all content relating to pharmacy law is up-to-date and in line with recent and ongoing developments in pharmacy practice.

The recruitment and training of tutor pharmacists are managed through APPEL, which sees a uniform and coordinated approach to the recruitment and training of preceptors. APPEL provides a single point of contact for trainers, training establishments and students for all placement activities. Preceptor pharmacists undertake mandatory training units that prepare them for receiving and supporting students for placement.

During the on-site visit, funding of the SoP was discussed. The accreditation team heard that the University operates a resource allocation model whereby a budget is allocated to each school based on the income that it generates. The SoP has a diversified range of income

The orientation, support and enhancement of the tutor pharmacist role should be demonstrated.

6) Infrastructure and Financial Resources

a) The School must have the financial resources necessary for delivery of its strategic objectives.

b) The School must ensure that accommodation (including teaching rooms and laboratories), equipment, library facilities, IT (including appropriate interactive distance learning technology/VLE), subject specific IT specialist software (for example dispensing software), clinical skills facilities and other resources available to it are sufficient for the effective delivery and assessment of the planned Professional Degree Programme.

c) There must be policies and procedures to ensure that training establishments for the practice-placement elements of the Professional Degree Programme are appropriate for the delivery of this element of the Professional Degree Programme and meet any requirements as approved by the PSI Council from time to time, including any requirements relating to consistency of approaches to placements.

d) The School should have contingency plans, developed and documented, to cover any reasonably foreseeable deficiencies in infrastructure, equipment or personnel that may

streams, including a contract with Future University of Egypt to support the delivery of a five-year pharmacy programme, alongside a number of high income-generating taught programmes and income from consultancy. The University rewards income generation and reallocates a generous proportion of the income it generates back to the SoP. Business development plans are submitted to the CoMH executive from time to time; if supported, the plan is presented jointly with the head of CoMH to the University Finance Committee and the University Upper Management Team Strategy for further support and approval. This model provides reassurance to the accreditation team that ample financial resources are available to the SoP, who also note with approval the autonomy awarded by the University to the SoP in the management of its finances (a corresponding commendation has been made below).

During the visit, the accreditation team discussed the SoP's plans for expansion of the MPharm programme in response to the Higher Education Authority's report on building capacity in higher education for pharmacy programmes to meet future workforce needs.. In 2022, the School presented a proposal to the University Finance Committee/University Upper Management Team Strategy to increase student intake to the MPharm programme by approximately 50%. This would see an additional 35 students enrolled per year, ultimately resulting in an overall increase of 175 students. The School's plan envisages that each year cohort would be split into three groups (35 students x 3; currently, each class is split into two groups – 35 students x 2). The School notes that sufficient financial resources are readily available to support this expansion. In terms of expanding available resources to accommodate the increase in students, the SoP envisages a corresponding expansion of the Cavanagh building to accommodate the additional students and staff, and a pro rata increase in staff, including an additional 0.5 FTE resource for practice education (in agreement with the APPEL group).

In terms of accommodating an increased number of practice placements, the SoP noted that there is currently an oversupply of placements in the region, and that they do not anticipate that there would be any challenge in securing placement opportunities for the additional 35 students per year group. The accreditation team acknowledges this, but notes the increased demand in the western region that may be driven by the envisaged establishment of new schools of pharmacy that have been sanctioned by the Higher Education Authority.

arise in order to ensure the effective delivery of the Professional Degree Programme.	During the onsite visit, the accreditation team had the opportunity to tour the purpose-built Cavanagh Pharmacy Building and its teaching and laboratory resources as well as study and social spaces available to students. The team notes that this building provides a comprehensive complement of teaching and research resources and is well equipped with teaching rooms, laboratories, clinical skills facilities, library resources, IT support, specialist software, and interactive distance learning technologies. During the visit, the SoP team detailed planned developments for the Cavanagh building, including the creation of a larger dedicated social space for pharmacy students, which has been requested by students in feedback surveys. Through APPEL, there are policies, procedures and process in place to ensure the appropriateness of training establishments for the support of practice placements. Training establishments must provide the APPEL central team with standardised information prior to any placement occurring – this information includes signed placement agreement forms and confirmation that the establishment has appropriate insurance. As noted above, APPEL monitors tutor training and establishment compliance and maintains a framework for the accreditation of practice placements, their quality and consistency. A well-structured approach to contingency planning, including risk management, is documented and reviewed regularly. The SoP's successful transition to online teaching methodologies during the Covid-19 pandemic is a tangible example of the School's ability to respond effectively to unforeseen challenges.
Compliance with Standard:	The accreditation team is satisfied that this standard has been met.
Commendations **Recommendations** **Conditions**	The accreditation team **commends** the SoP for the: - way in which the School engages with university and college-level governance with regard to finances and the strong degree of autonomy that the School has in terms of how it directs its resources.

Standard 4: Curriculum: Structure and Evaluation

Standard 4: Curriculum: Structure and Evaluation	Accreditation Team's Commentary
4. The curriculum must be planned to deliver an integrated experience that combines and coordinates all teaching, learning and assessment components in a logical and cohesive manner with clearly articulated linkages within years and between years. The Professional Degree Programme must be planned and regularly evaluated as a whole to deliver graduates who have the knowledge, skills, attitudes and behaviours to meet the Core Competency Framework for Pharmacists necessary for entry to the profession of pharmacy and to assure the accountability of the profession to society. 1) The curriculum should embrace the scope of contemporary pharmacy practice responsibilities to patient-centred care as well as the emerging roles of the pharmacist within the context of societal and professional changes occurring and contemplated. The curriculum must be designed, delivered and regularly reviewed to keep abreast of advances arising from policy, and research and development, in medical and pharmaceutical science and practice. The curriculum should be guided by, but not limited to, the indicative syllabus shown in Appendix A[1] of this document. 2) The curriculum must be progressive in dealing with issues in increasingly complex and interrelated ways	The SAR and accompanying documentation outline the curriculum content and structure, including programme and module learning outcomes, and assessment procedures. The curriculum aligns with the PSI CCF and supports the development of graduates that demonstrate the knowledge, skills, behaviours and attitudes to meet the requirements of the CCF. The curriculum is patient centred and appropriately sequenced. An emphasis on communication, public health, and the introduction of students to clinical decision-making prepares MPharm students for diverse roles upon graduation. At the onsite visit, the accreditation team heard that particular care and attention is paid by the SoP to curriculum mapping to specific competencies and domains and that gaps are considered regularly at committee level, with the curriculum augmented as necessary. As noted above, the main committee structure responsible for the maintenance and revision of the curriculum is the TCDC, which incorporates representation from each discipline within the SoP among its ten members. Where new developments in policy, research, or medical and pharmaceutical science and practice are identified, appropriate updates are made to the curriculum and its delivery. For example, the accreditation team heard at the site visit that the SoP has developed a policy on the Open Disclosure Framework. Staff training on open disclosure has been implemented with staff availing of currently available open disclosure training externally. This will be followed up by further training when this is made available by the relevant external organisations e.g. IIOP/NPSO. Provision has been made for the inclusion of open disclosure within those elements of the curriculum that deal with patient safety. Content relating to addressing common conditions and the development of pharmacist prescription authority has also been embedded. The programme is delivered through a progressive spiral curriculum, which, to some extent, facilitates linkages within and between years. The accreditation team notes many positive elements of the curriculum that facilitate integration – for example, the Pharma Family,

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[1] The indicative syllabus exists as a general guide to the scope of curriculum content for the Professional Degree Programme.

so that graduates meet the Core Competency Framework for Pharmacists as established by the PSI Council from time to time and that they can practise safely and effectively according to the statutory Code of Conduct for pharmacists, and any other guidance and requirements as approved by the PSI Council from time to time.	which includes 17 members across three generations and from diverse cultural and ethnic backgrounds, provides engaging examples of specific clinical issues. However, the accreditation team also notes the multiplicity of very separate modules within the programme. While many modules involve contributions from a variety of disciplines and illustrate connections from a theoretical perspective, from a practice-based perspective, some of the linkages appeared weaker to the accreditation team.
3) The curriculum should enable students to form an appropriate ethical and professional approach to practice. This should begin early in the first year. From the beginning, the Professional Degree Programme must be delivered in an environment which places study in a professional and academic context and requires students to conduct themselves professionally.	This was discussed at the on-site visit, where the programme team noted that introductory and foundational knowledge is provided to students in their early years of study, with topics developed over the course of the programme in increasing levels of complexity. Matters relating to more complex elements of clinical decision-making are dealt with in the later stages. Examples discussed included the introduction of the concepts of drug absorption and metabolism early in the programme, with these concepts linked to specific and complex conditions in the later stages.
4) The curriculum must be designed, delivered and reviewed by interdisciplinary teams in order that the subject matter of the degree is integrated and delivered in a patient-focused manner. The scientific base of the curriculum must be of adequate depth, scope and quality and sequenced appropriately to support the intellectual and clinical aspects of the Professional Degree Programme.	The accreditation team is satisfied that the curriculum in its current format meets the requirements of the PSI accreditation standards; they encourage the SoP to consider increasing integration and/or introducing additional mechanisms for connecting and linking modules content both vertically and horizontally. Notwithstanding these comments, it was notable that students at the onsite visit did appreciate the integrated nature of the programme, and commented that earlier and later elements were well linked with each other.
5) The curriculum must be designed to ensure that, from the early stages of the Professional Degree Programme through to the advanced practice experiences, students are encouraged to assume and are assisted in assuming, responsibility for their own	The prevalence of chemistry content within the curriculum was also raised by the accreditation team: chemistry is extensively represented within the curriculum in years 1 and 2, and it is not always clear how this is preparing students for (i) the clinical content that they will cover in years 3 and 4, and (ii) the evolving role of the pharmacist (moving from product- to patient-centred) described in the SAR. As noted above, at the on-site visit, the programme team noted that the proportion of chemistry-based content has declined in recent years to reflect the changing healthcare landscape in Ireland and to place increasing emphasis on patient-centred practice. Notwithstanding this, the accreditation team considers that the SoP might revisit the balance of these elements within the curriculum as it continues to develop and evolve through the SoP's periodic reviews.

learning, including assessment of their learning needs.

6) The curriculum must provide appropriately comprehensive training in research methods applicable to scientific, health and practice research in order to meet the CCF. In addition, the Professional Degree Programme must include a significant research component that meets the requirements of a level-9 degree programme on the National Framework of Qualifications.

7) There must be a continuum of structured and quality assured practice-placement experiences throughout the curriculum from introductory to advanced, and across the main practice settings of community, hospital and industry, that are of adequate scope, intensity, structure and duration to support achievement of the CCF competencies. The structure of these practice-placement experiences must meet the PSI Council policy as approved from time to time. These experiences must integrate, apply, reinforce and advance the knowledge, skills, attitudes and behaviours developed through the other components of the curriculum.

8) There must be rigorous processes for review, monitoring and evaluation of all elements of the curriculum. Such processes should incorporate external scrutiny of student assessments.

9) The curriculum must be supported by Institutional regulations for the Professional Degree

The curriculum supports students to form an approach to practice that is both ethical and professional. Each student signs a fitness to practise declaration at the outset of their studies and this and the Joint Schools Code of Conduct make expectations for the duration of their enrolment clear. The programme's professional practice modules incorporate pharmacy law, ethics, and patient welfare, and reinforce the importance of these critical themes. The accreditation team notes with approval the active involvement of pharmacy professionals in the delivery and further development of the programme as guest lecturers and teacher practitioners, which, alongside clinical placement, provides students with direct exposure to contemporary professional standards and practices.

Diversity is covered within the MPharm curriculum (including through Pharma Family content), and, at the onsite visit, students also commented on specific workshops that the SoP has provided on engaging with service-users from different cultural backgrounds, covering matters such as how to approach medicines (injectables, inhalers), and how to navigate language and/or literacy difficulties.

At the onsite visit, the programme team emphasised that expectations of students with regard to their conduct and presentation are continually reinforced – for example, students attending dispensing laboratory sessions are required to dress professionally, be punctual, work together collegially and so on. This includes the incorporation of a peer learning system within laboratory sessions, developed on foot of student feedback, which sees students with experience of dispensing matched up with students that have none or very little. This initiative provides students with the opportunity to develop their mentoring skills and is aligned with the university policy on group work, which requires students to demonstrate professional teamwork within groups, including peer assessment and self-directed learning.

Assessment and academic integrity were also discussed as an important part of supporting the development of professional and ethical conduct by students. The programme team noted that the development of generative artificial intelligence tools has led to a rapidly evolving situation and that university policies and procedures have already been updated several times. The accreditation team welcomes this proactive response to a dynamic situation; however, it also notes that the SoP's expectations with regard to academic

Programme that are appropriate for an award that is both academic and professional in nature, including those relating to fitness to practice.

The regulations must be supported:

a) by fitness to practice procedures that address causes for concern raised about students

b) by robust and transparent appeals processes that are fully documented and communicated to students

c) underpinned by a clear and realistic student code of conduct that is explained, communicated and enforced to assure professional behaviour.

10) The curriculum must comply with the various minimum legal requirements at national and European level (see Appendix B)[2]. The curriculum must take account of the recommendations of the Advisory Committee on Pharmaceutical Training (European Commission, 1995)[3].

integrity should increasingly incorporate developments within a post-plagiarism world. Students at the onsite visit were aware of the SoP's expectations with regard to use of AI in the completion of assignments. They also noted the utility of AI platforms as learning tools that can provide simple explanations for complex topics.

As the SoP and the University continue to review and update academic integrity policies, the accreditation team encourages them to ensure that matters such as unauthorised content generation using artificial intelligence (AI) and contract cheating are incorporated; furthermore, the SoP and university should consider explicitly linking academic integrity expectations to the professional formation of the student both within policy and in the MPharm curriculum.

In addition, the accreditation team notes the role of the SoP's assessment strategy and its implementation in supporting academic integrity. Whilst the SoP, as part of the wider university community, is actively responding to the potential impacts of AI on academic integrity, the MPharm assessment strategy has not been significantly modified to better mitigate technological threats to academic integrity. The accreditation team advises the SoP to do so and, as part of this work, to provide within the strategy for a more structured approach to supporting the development of academic skills and to both integrating assessment and dispersing the associated workload more evenly across the programme. The accreditation team has made a recommendation in this regard.

The curriculum ensures that students engage with a wide range of interdisciplinary groups and the accreditation team notes that there are good examples of interdisciplinary delivery, development and review of content across the curriculum. As noted above, the TCDC comprises membership from across all disciplines represented within the School. The accreditation team is satisfied that the curriculum is of adequate depth, scope and quality and sequenced appropriately to support the intellectual and clinical aspects of the MPharm programme (though encourages the SoP to consider the comments on integration and chemistry-focused content, above). The accreditation team welcomes the availability of opportunities for learners to engage directly with real and simulated patients through a variety of fora, including hospital visits, dispensing laboratory workshops and the

MyDispense platform. Visits and talks by service-users and advocates are also threaded through the curriculum delivery.

Within the SAR and during the onsite visit, the SoP provided numerous examples of how students are supported to assume responsibility for their own learning. The accreditation team welcomes the incorporation of frequent opportunities for reflection by students on their practice (including upon conclusion of each clinical placement) and the integration of formative assessment throughout the programme, which culminates in a reflective portfolio in year 5. Individual support for each student is provided by a mentor, who is a staff member, and this mentoring continues over the duration of the programme. Support for students' development of learning skills is also provided by means of drop-in clinics. The incorporation of Irish Institute of Pharmacy (IIOP) cycles of continuous professional development (CPD) provides a good foundation that prepares students to engage in lifelong learning throughout their careers.

From its review of the curriculum and discussions during the onsite visit, the accreditation team has satisfied itself that the programme provides comprehensive training in research methods and includes a significant research component (the year 5 20 ECTS research dissertation) that meets the requirements of an NFQ level 9 programme as well as those of the CCF. Engagement with the research project and dissertation provides students with skills and competences that will prove valuable post-graduation; these include experience of project management, the development of research methods and tools, and problem-solving.

There are ample opportunities for students to experience and engage in contemporary practice across the breadth of pharmacy settings throughout their time on the programme. Placement opportunities are available to students across community, hospital,industry and other Role Emerging Practice (REP) settings, which facilitate students to achieve the requisite CCF competencies – of particular note are those competences related to safe dispensing, patient interaction, and professional behaviour. Students undertake placement in their first, second, fourth and fifth years of study, with all but the first-year placement overseen and coordinated by APPEL.

Among its functions, APPEL supports the maintenance and implementation of appropriate governance for placement, manages the recruitment and retention of training establishments and trainers and maintains the related registers, quality assures placements and supports students and trainers through the placement process. As noted above, this includes the provision and maintenance of a suite of resources, including trainer and learner handbooks and webinars. The accreditation team is satisfied that, through the structures, resources and supports provided by APPEL, the placements undertaken by SoP students meets the PSI Accreditation Standards.

Placement opportunities abroad are available to fourth-year students, and the accreditation team heard at the onsite visit that international placements are subject to the same quality assurance measures as those that take place within Ireland; this includes the same level of support from the Practice Educator. The SoP's Practice Educator represents a key link between the SoP and APPEL, and between clinical placement and classroom-based learning.

The accreditation team is confident that there are rigorous processes in place to review, monitor and evaluate the curriculum. An annual review of the curriculum is conducted by TCDC and both minor and major changes may be undertaken as part of this. Any revisions are informed by feedback from staff, students, and external stakeholders. Where a need to modify an element of a module is identified, this will be referred to the relevant module coordinator and then returned to committee level. Individualised module-level feedback is sought from students at the end of each semester and this supplements feedback garnered through the Student Experience Committee in supporting enhancements to the programme. The accreditation team notes that external examiners engage with the programme appropriately and in alignment with the UCC external examiner process through their consideration of a sample of student assessments and their provision of feedback on learning objectives, content, and assessment instruments. This includes consideration of the fifth-year online modules completed while students are on placement and the Professional Registration Examination (PRE). The external examining process is considered in greater detail below.

As noted above, students sign the Joint Schools of Pharmacy Code of Conduct, which is aligned with the PSI's Code of Conduct for Pharmacists, upon commencement of the

	programme. The code is also addressed annually in the MPharm orientation session by the Head of School and Year Coordinator. All MPharm students must agree that they will comply with UCC's Fitness to Practise Policy when registering for the programme. As part of this commitment, students must also indicate that they "understand, acknowledge and agree" that they must make a fitness to practise declaration if they have a health concern and/or criminal conviction (or prosecution pending). An appeals process is in place, which is in alignment with the UCC Appeals Policy and Process. UCC's Academic Council appoints the University Examination Appeals Committee and review appeals are referred to this committee in accordance with the policy. The accreditation team notes that there is an inconsistent approach to late submission of work across the MPharm modules. This was discussed at the onsite visit, where the programme team noted that many staff and students appreciate that the approach must vary from module to module depending on the content delivered and the assessment format. The programme team confirmed late submissions are accommodated on an individual basis and that penalties have not needed to be applied to date. The accreditation team is satisfied that the curriculum complies with the requisite national and European legislation, and that regard has been had by the programme team to the recommendations of the Advisory Committee on Pharmaceutical Training in their development of the programme.
Compliance with Standard:	The accreditation team is satisfied that this standard has been met.
Commendations **Recommendations** **Conditions**	The accreditation team **recommends** that the SoP: - Consider how best to make provision for and support students in a post-plagiarism world. This includes consideration by the School of more complex issues relating to academic integrity, such as contract cheating and unauthorised content generation using generative AI and the explicit linkage of academic integrity to the professional formation of the student. The School should consider taking a more structured approach to supporting students to develop academic skills and considering and scaffolding the burden of assessment across the programme. The accreditation team **commends** the SoP for the:

	- breadth of innovative IPL activity established across the curriculum.

Standard 5: Curriculum: Teaching, Learning and Assessment

Standard 5: Curriculum: Teaching, Learning and Assessment	Accreditation Team's Commentary

5. **The curriculum documentation must be guided by a Teaching and Learning Strategy and an Assessment Strategy. The Teaching and Learning Strategy must enable graduates to meet the Core Competency Framework (CCF) for Pharmacists as established by the PSI Council from time to time and must emphasise the contributions of pharmacists in industry and research as well as within healthcare teams in patient-facing settings. The Assessment Strategy must align with the Teaching and Learning Strategy and ensure that all graduates demonstrate the CCF competencies and behaviours.**
 	
1) The Teaching and Learning Strategy must:
 	
   a) be based upon well-evidenced pedagogic principles.
 	
   b) promote collegiality, civility and respect among students and staff, and underpin a culture of professionalism in which all teaching staff can lead by example.
 	
   c) support the development of:
 	
     i) independent learning skills, both within the Professional Degree Programme and as a basis for later continuing professional development
	Delivery of the MPharm programme is grounded in a programme-specific teaching, learning and assessment strategy that is linked to sound pedagogical principles (for example, the Teaching for Understanding framework, Miller's Pyramid of Clinical Competence, and Harden's Ladder of Integration). The accreditation team notes the diverse and well-rounded approach to teaching. Traditional delivery methods, such as lectures, play an important role in providing foundational knowledge, while more interactive strategies such as problem-based learning, case studies and workshops allow students to apply learning in practical, real-world scenarios. There is an holistic approach to delivery of the programme, with all team members demonstrating good knowledge of the overall programme and leveraging this to support a cohesive approach to teaching and assessment.
	
	As noted under Standard 4, students are made familiar with the Code of Conduct for Pharmacy Students from the outset of their learning journey. All MPharm students must ensure that their behaviour meets with the requirements of the code, which supports the development of behaviours that demonstrate collegiality, civility, respect and professionalism. It was evident to the accreditation team during the onsite visit that the environment in which the MPharm programme is delivered encourages and facilitates staff and students to demonstrate these behaviours in their engagement with each other. The accreditation team notes that the teaching, learning and assessment strategies underpinning the MPharm programme support students to develop essential skills including independent learning, communication, counselling, leadership and professionalism.
	
	The SAR affirms the SoP's commitment to providing a programme that "prepares competent graduates that can not only practise under the current demands of the profession" and "to [develop] graduates that respond in a dynamic manner to future challenges". It goes on to detail how the curricular content, its delivery and the learning environment support the development of independent learning skills. As noted above, this includes the facilitation of ample time for students to reflect upon their own learning and practice, as well as opportunities to engage in group-work, which is supported by the CATME (Comprehensive Assessment of Team Member Effectiveness) tool as a means of supporting peer evaluation

ii) consultation, counselling and communication skills, underpinned by social and behavioural science content in the Professional Degree Programme

iii) leadership skills, problem-solving skills, and rational decision-making skills that promote patient safety and enhance patient well-being

iv) peer review and assessment skills

v) critical, analytical skills, and an understanding of research methods to support evidence-based decision-making and practice.

d) deliver:

i) a fully integrated and balanced experience of science and practice, and of university based and practice-based learning

ii) interprofessional collaboration with students of other healthcare professions in all stages of the Professional Degree Programme

iii) meaningful practical experience of working with patients, carers and the public. The intellectual and professional demands of the practice experience

and encouraging student reflection on their role and efficacy as a team member. It also includes provision for opportunities to practise specific skills through the completion of problem sheets, as well as undertaking pre-assigned reading prior to specific lectures. At the onsite visit, the accreditation team queried whether students consistently engage with materials prior to lectures. The programme team noted that lecturers signpost the reading with students well in advance, whilst emphasising that fundamental content contained in the literature that has already been covered in lectures will not be revisited in class. This is acknowledged by the accreditation team, but caution is advised on overreliance on this approach, particularly in light of the demanding teaching and assessment schedule associated with the MPharm programme.

Students are well supported to develop consultation, counselling and communication skills through both the on-campus and placement elements of the MPharm programme. Instruction in these areas is underpinned by appropriate models, such as the Calgary-Cambridge Framework, WHO 5A's Brief Interventions Framework and Motivational Interviewing. Communication workshops are provided throughout the programme and often focus on how to manage challenging situations with service-users. As with other elements of the programme, expectations of students increase as they progress through the programme, with tasks becoming more complex in later years of the programmes.

The SoP's strategic plan incorporates an aspiration to support leadership with impact, and the accreditation team notes the programme's emphasis on and commitment to fostering leadership and innovation. Students are facilitated to develop and enhance their leadership, problem-solving and rational decision-making skills through specific modules, workshops and while on placement. Guidance is provided on using the PSI's Ethical Decision-Making Tool to engender students' confidence and competence in their decision-making.

The SoP's focus on integrating student-centred, research-informed teaching and evidence-based practices facilitate students to develop critical, analytical skills and an understanding of research methods. Dedicated research-focused modules are provided, and students have ample scope to develop research skills. The accreditation team views the examples of student projects contributing to peer reviewed outputs in clinical areas as being particularly noteworthy.

should increase as the student progresses through the Professional Degree Programme iv) teaching and learning experiences that take place alongside and with reference to research and other scholarly activities. 2) The Assessment Strategy must: a) deliver: i) a progression through the hierarchy of knowledge and skills development through the five years of the programme, such as the model proposed by Miller[2]. ii) a range of methods at each level of study, and appropriate to assess the progressive attainment of all competencies set out in the CCF iii) clearly defined marking criteria reflecting safe and effective practice. All assessments must take account of patient safety iv) assessments that are placed in a pharmacy context, reflecting contemporary practice	As noted above, the accreditation team is satisfied that the curriculum in its current format meets the requirements of the PSI accreditation standards in terms of its integrated nature; however, they encourage the SoP to consider increasing integration and/or introducing additional mechanisms for connecting and linking modules content both vertically and horizontally. The team also notes the recent inclusion of a new 5-credit module (Applied Clinical Pharmacy) to the MPharm programme. At the onsite visit, the accreditation team queried whether/which amendments had been made to facilitate this change. The programme team responded that 5 ECTS had been redistributed from the research project element of the programme. The accreditation team notes that the workload associated with the programme is already significant and cautions against overburdening students enrolled on the programme. An increase of Interprofessional learning (IPL) was one of the recommendations issued by the PSI as part of the 2020 accreditation process, and there are now eight IPL activities threaded across the curriculum, a development which has been supported by the CoMH's IPL Committee. Collaboration between pharmacy students and students enrolled on other healthcare programmes is a notable and commendable feature of the programme. The accreditation team notes the expansive spectrum of programmes represented within UCC and the unique range of opportunities for collaboration that this provides. There is an emphasis on the acquisition by students of interprofessional competencies as well as core competencies. Students regularly work and learn alongside peers from other healthcare professions, which develops and enhances their ability to work as part of a team and deliver holistic patient care. The accreditation team notes with approval the support that the SoP has provided to other colleagues in UCC to grow and develop IPL and the role played by the CoMH's vice-head of IPL, who originated from the SoP. The accreditation team has made a commendation to the SoP in this regard. Practical experience with patients, carers, and the public is also a cornerstone of the programme, with increasing intellectual and professional challenges as students progress. As noted elsewhere in this report, there are ample opportunities for students to engage with

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[2] Miller, G. E. (1990). The assessment of clinical skills/competence/performance. Academic Medicine, 65(9).

v) diagnostic and formative assessment opportunities	relevant stakeholders, including patient advocates, regulatory bodies, industry, and local community and hospital pharmacists through placement, guest lectures, seminars and workshops.
vi) effective and timely feedback	The accreditation team notes the many examples of research-informed teaching and learning provided within the SAR and at the onsite visit, as well as summer student research placements, which provide students with the opportunity to support research projects and strengthen their personal and professional capabilities. Whilst the accreditation team is confident that the SoP's approaches to teaching and learning is well informed by research, the School might consider ensuring that all such instances are made explicit to MPharm students.
vii) clear guidance to students relating to assessment of learning outcomes, with objective reporting on assessments.	
b) include assessment of:	
i) professionalism throughout the Professional Degree Programme	The SoP's assessment strategy is designed to complement its teaching and learning strategy, ensuring that students' progress is closely monitored throughout the five-year programme. A variety of assessment methods are employed at each stage, measuring the achievement of competencies outlined in the CCF (and a corresponding mapping is provided within the SAR). At the onsite visit, the programme team noted the importance of providing multiple types of assessment to support students who may have a preference for certain types of assessment. The accreditation team noted the programme team's stated aim of reinforcing specific learning outcomes through repetition, and queried whether there was a danger of duplication. The programme team noted that, in such cases, the relevant learning outcomes would not be assessed to the same level each time in terms of a student's knowledge, understanding and application.
ii) consultation, counselling and communication skills	
iii) problem-solving skills, and rational decision-making skills	
iv) research and critical analytical skills	
v) interprofessional teamworking and leadership skills.	
c) include examination of:	There are clear marking criteria that reflect the need for students to be cognisant of the requirements of safe and effective practice. Assessments are set within a pharmacy context and focus on students' ability to apply knowledge to real-world practice. The PRE is particularly noteworthy. This examination is operated in collaboration with the two other schools of pharmacy in the state and is the culmination of a 12-month endeavour. At the outset, the schools convene to blueprint the examination against the CCF domains and relevant clinical areas. Each school takes responsibility for devising four stations and all 12 stations are reviewed by the three schools to ensure that they are feasible to complete within the timeframe and that they align with the required template. A panel of hospital and
i) pharmacy law, including within the statutory professional examination at the end of Year five	

ii) pharmaceutical calculations, to include assessment of competency prior to the Year four practice placement iii) professional competence, via a summative objective structured clinical examination (OSCE), as part of the statutory professional examination at the end of Year five iv) professional competence, by the tutor pharmacist at the end of Year five.	community pharmacists (including both academic and practising pharmacists) peer review the 12 stations before the PRE is rolled out. Following any corresponding amendments, an external examiner will review the proposed stations before the exam is rolled out. A mock exam, held a number of months prior to the PRE, supports students to familiarise themselves with the format and to manage any performance issues that may arise. Students receive a pass/fail result on each OSCE station in the mock exam and collective feedback is provided to all students. The collective feedback is collected and recorded from across the three Schools of Pharmacy. Students have the opportunity to receive individual feedback after the mock exam to support them in their preparation for the PRE. The assessment strategy includes both diagnostic and formative assessments. The former are used to aid students to identify their preparedness for a particular component within a specific module and help staff to identify areas in which students may require additional information or support. The latter are employed across all modules of the programme to promote and inform student learning. Summative assessments are used in each module across all years of the programme and must be passed to progress to the next stage of the programme. SoP staff provide timely feedback to students, which supports them to learn and helps them understand their progress toward achievement of the learning outcomes. Many modules in the MPharm programme have introduced revision and/or feedback sessions into the timetable, which allow for the identification of areas of strength and opportunities for growth. Reflective assessment portfolios are used in the programme to encourage students to reflect on the skills and competencies that they have achieved – this is particularly the case during clinical placement. The accreditation team observes that a system of continuous assessment and progressive evaluation helps identify areas where students can improve. From their review of the SAR and their engagement with the programme team at the onsite visit, the accreditation team is confident that the safety of both patients and the public is consistently prioritised, with students failing assessments if they demonstrate unsafe practices. As noted above, summative assessments are monitored by external examiners, and the effectiveness of the

	assessments is reviewed annually to ensure they remain valid, reliable, and aligned with the learning outcomes and the CCF.
	Students' professionalism, consultation skills, problem-solving, research abilities and interprofessional teamwork are assessed through a variety of means across the five years of the programme. Assessments are designed to assess knowledge, practical skills, decision-making and patient interaction. Professional competency is assessed through CAPA scores and Direct Observation of Practical Skills (DOPS), with regular feedback to support continuous improvement. Of note is the assessment of student through OSCEs, during which students are expected to demonstrate competently their ability to counsel and communicate with service-users. The use of simulated patients within the OSCEs allows students to test their communication skills in a safe, standardised environment. These are drawn from a panel of trained simulated patients. Preparation for the OSCEs is supported through formative assessment in the form of a peer assessment during which students record and provide feedback to each other. At the onsite visit, some students were of the opinion that preparation for the OSCEs could begin earlier within the programme to detract from the stress that can be associated with this exam type, and the accreditation team encourages the programme team to consider whether this might be feasible.
	Pharmacy law, ethics and pharmacy practice are taught and assessed by pharmacists with community, hospital and academic experience. The SAR notes that the importance of these topics is demonstrated by their incorporation within learning outcomes across multiple modules. In their fourth and fifth years, students are facilitated to demonstrate their interpretation of the law through simulated roleplays and consideration of ethical dilemmas, which are constructed and run by pharmacists with both hospital and community backgrounds. Pharmaceutical calculations are taught from the outset of the programme and supported by tutorials and calculation problem sheets. Summative assessments of the subject begin as early as semester 1 in year 1 and continue throughout the five years. At the onsite visit, the programme team noted the importance of remaining cognisant that students will have entered the programme through a variety of routes and that they will therefore have different baseline levels of competence. At the onsite visit, it was noted that real-world examples of how inaccuracy in carrying out calculations are provided to students to highlight the importance of the subject.

	As noted elsewhere within this report, students are taught and assessed by pharmacy practitioners and tutors throughout the programme. Each student's professional competence is examined and signed off on by their tutor pharmacist at the end of each placement, with the Head of School confirming their eligibility to be fit to be a registered pharmacist at the end of the five-year programme.
Compliance with Standard:	The accreditation team is satisfied that this standard has been met.
Commendations **Recommendations** **Conditions**	The accreditation team **commends** the SoP for the: - school's engagement with students – in particular, the way in which it promotes, facilitates and works in partnership with students.

Standard 6: Quality Assurance and Enhancement

Standard 6: Quality Assurance and Enhancement	Accreditation Team's Commentary
6. All processes and activities related to the Professional Degree Programme must form part of a demonstrable and continuous quality improvement programme that is responsive to internal and external feedback and review. Assurance is provided through evidence of clearly defined, documented, executed and controlled processes and activities in accordance with a system of Quality Management. The mitigation of risk is also an important part of quality management. 1) The School must describe how it assesses attainment of the strategy of the Professional Degree Programme (Standard 1) and how it seeks to improve the quality of outcomes.	QA mechanisms are in place at institutional, college and school level to ensure robust quality assurance and appropriate quality enhancement of the MPharm programme. These include the maintenance of a cycle of reviews at various levels (institution, school, programme) and of specific themes. The SAR describes the institutional-level monitoring and review processes (internal and external), but does not always make the link between these processes and the work undertaken by the SoP to verify attainment of the strategy related to the MPharm programme. However, the accreditation team notes that institutional, school, and programme-level review processes incorporate elements related to both compliance and enhancement and both require and encourage self-reflection, which should inform and trigger action by the SoP to improve the quality of programme outcomes. The accreditation team notes the strong culture of continuous evaluation, review and enhancement within the SoP and has made a corresponding commendation. Holistic evaluation of the MPharm programme is supported through a number of means, which include inter alia the engagement by the SoP with external examiner reports, the submission of annual reports to the CoMH, the annual review of MPharm modules through the TCDC (discussed above), and the collection and analysis of student feedback. Samples of

2) The Professional Degree Programme Provider must demonstrate a holistic evaluation of the delivery of the Professional Degree Programme (internal and external) and the professional developed by the programme. This must include examination, feedback, views and experiences from a range of stakeholders including students and the public.
 	
3) Each student's proficiency over the period of the Professional Degree Programme must be tracked. This must include proficiency in practice placements and robust evidence of each student's performance over the whole period. Fitness to practise mechanisms for students must be in operation and routinely reviewed.
4) All proposed material changes to the Professional Degree Programme must be reported to the PSI in accordance with legislative requirements.
 	
5) There must be a quality improvement strategy and quality mechanisms in place for this component to assure and enhance the quality of all practice placements to provide a meaningful learning experience, including but not limited to:
 	
    a) the process to select, assess, accredit, appoint and revoke tutors and training establishments
 	
    b) training, development and support to tutors in delivering the placement objectives
	feedback provided through external examiner reports were included within the SAR and all external examiner reports for 2023/24 were appended to the SAR. The accreditation team considers that the feedback contained therein is at an appropriate level of depth, demonstrates substantial engagement by the SoP with each external examiner, and is useful to the SoP in affirming practice and changes to same during the reporting period. There are processes and structures in place to support the review and analysis of all external examining reports at university level.
	
	There are routine processes – formal and informal – in place for collecting, analysing and acting upon student feedback and numerous examples of how student feedback has supported enhancements to the programme were provided in both the SAR and during the onsite visit. Of particular note was an innovative initiative to assess students' competence with regard to teamwork and presentation skills through the use of short TikTok-style videos of scenarios (for example, a parent looking for Calpol for their child). This assessment was developed following feedback which indicated students' desire for a simpler assessment than that which had been used previously for this purpose. The new assessment has, according to the SAR, received overwhelmingly positive feedback from students.
	
	The SAR includes examples of quantitative and qualitative feedback gathered from students and detail of how this has fed into modifications to the programme. Students are surveyed upon completion of each year of the programme, and the Head of School confirmed that he reviews the feedback garnered through these surveys. A new module survey is currently being piloted, which will support the presentation of data gathered through interactive dashboards. These will flag trends in relation to specific modules at a glance.
	
	Students are facilitated to discuss issues and provide feedback to year and module coordinators, as well as with specially designated mentors. Students at the onsite visit provided examples of instances in which their feedback (or that of previous student cohorts) had been taken on board by the SoP and corresponding enhancements implemented. They appreciated the SoP's efforts to gather feedback through a variety of channels to ensure as broad a representation of students and views as possible. Those students who have undertaken class representative roles commented on the support that they have received

c) the effectiveness of tutoring mechanisms	from year coordinators in managing and supporting the resolution of issues raised by classmates.
d) the interface between academic study and the in-practice placement	
e) appropriateness of training establishments	The Student Experience Committee also provides a forum for students to provide feedback and support improvements to the programme and to student experience in the SoP: The committee comprises an equal mix of students and staff and meets four times annually. Matters discussed by the committee include the scheduling of assessment and updates on activities, issues raised by specific cohorts with their class representatives, and initiatives led by the PharmSoc. The programme team noted that the committee terms of reference are circulated to all students and that the Chair explains them to all committee members at the first meeting of the first semester, clarifying why the committee meets, what is in/out of scope, etc. This practice welcomed by the accreditation team.
f) organisational support for the tutoring process including when to raise concerns	
g) the allocation of students to training establishments	
h) student support whilst on placement, including clarity around expectations of role and role development	The SAR confirms that each student is tracked on an annual basis to monitor their progress and ensure that the requisite level of proficiency is achieved. There are opportunities for members of staff to flag trends associated with specific students and, in such instances, action by specific members of staff may be triggered to initiate remedial action or highlight the availability of supports to the relevant student where these are required. Pass and progression rates are considered at the annual Board of Studies meeting and data for the current year are benchmarked against historical and empirical data. As noted elsewhere within this report, there are multiple opportunities for reflection by students on their own progress and discussion of same with their peers throughout the programme – these include peer-to-peer sessions, and engagement with workbooks.
i) feedback from all stakeholders.	
Where practice placements are delivered through a partnership between a School and other Schools of Pharmacy in the State, there must be information about the collaboration, roles and responsibilities to demonstrate effective governance and quality assurance.	
6) There must be appropriate mechanisms to monitor the resources for the development and delivery of the programme, including personnel, IT and organisational structures.	The accreditation team notes the numerous opportunities available to students to engage with academic staff and placement preceptors which facilitate the monitoring of students' acquisition of knowledge, skill and competence. The accreditation team is satisfied that there are fitness to practise mechanisms in place (through the Joint Schools of Pharmacy Code of Conduct for Pharmacy Students and institutional-level policies, procedures and processes) and that these are routinely reviewed.
	All proposed material changes to the Professional Degree Programme are reported to

| | the PSI through the SoP's annual reports, and sample reports were provided to the accreditation team alongside the SAR (for the years 2021, 2022, and 2023).

The mechanisms in place to assure and enhance the quality of practice placements were discussed. These are largely managed by APPEL. A customer relationship management (CRM) platform for all training establishments is maintained by APPEL and there is a traffic light system within the platform to flag any establishments with whom there have been specific issues or challenges; there is also a facility to incorporate notes on the suitability of an establishment to host those placements associated with specific years of the MPharm programme.

At the on-site visit, the programme team noted that there is no scarcity of placement opportunities for learners meaning that, where quality issues arise and a training establishment needs to be removed, this does not have an impact on the overall offering. There are ample and appropriate resources and training made available by APPEL to trainers to ensure that they are aware of their role and responsibilities with regard to instruction and assessment of the student and to support them in developing and enhancing their instructional and mentoring skills. APPEL confirmed during the onsite visit that, for instances where there is a mismatch between the student and the trainer or training establishment to whom they have been assigned, there are processes in place to move the student. The accreditation team also noted student comments on the value of the placement elements of the programme – they noted the satisfaction of applying knowledge learned over the course of the programme and the substantial volume of learning they were able to engage in.

At the onsite visit, students commented on the utility of the training plan provided by the SoP and APPEL in walking preceptors and students through expectations. Many noted that their training establishments and preceptors appeared to be well used to having students on placement and that they felt well supported. Students also expressed their desire for more organisations from across the spectrum of pharmacy practice to register as training establishments with APPEL.

The accreditation team is satisfied that there is an appropriate interface between academic study and the practice placement element of the MPharm programme. Students complete |

	credit-bearing online modules with the SoP while on practice placement (though the accreditation team notes that, at the onsite visit, some students felt that these modules could be more practical and relevant to the placement element). QA visits are conducted to a sample of training establishments by the practice educator; at each visit, the practice educator will discuss with the student their attainment of the relevant learning outcomes and competencies, the pastoral care that they are receiving and their satisfaction with same. At the onsite visit, it was confirmed that all international students are visited as standard, as well as any students with regard to whom there are specific concerns. Students present at the onsite visit commented on the numerous resources available through APPEL and their engagement with the practice educator and, for the most part, felt very well prepared for placement.
	APPEL has developed an algorithm to identify high-risk students who may need additional support and, at the onsite visit. The accreditation team notes that the identification and raising of concerns is a topic covered during APPEL tutor training sessions. During the onsite visit it was confirmed that visits to such students are prioritised during the first weeks of placement. There is a process in place to support students where issues are identified in relation to their attendance or achievement. In such instances, there will be regular (sometimes weekly) engagement between each trainer and the practice educator to ensure that the SoP is apprised of the learner's progress or any issues arising. This is complemented by three-weekly meetings with the students during which students are reminded of the expectations that they must meet while on placement. It was noted at the onsite visit that the size of the School permits familiarity with individual students and awareness of their specific needs.
	The accreditation team is satisfied that feedback is provided by all relevant stakeholders, including learners, training establishments, and preceptors, and that this feedback is reviewed and analysed to inform enhancements to the placement experience. It was clear to the accreditation team that the roles and responsibilities of these stakeholders are also clearly defined, and that each stakeholder is made aware by the SoP and by APPEL of same.
	Overall, the accreditation team could assure itself that there is effective governance and quality assurance of the placements associated with the MPharm programme.

	The SAR notes that the SoP maintains a comprehensive and regularly updated equipment inventory. This is supplemented by a preventive maintenance schedule (maintained by technical staff) to ensure that critical equipment is correctly maintained, or is repaired or replaced as necessary. The SoP maintains a risk register wherein any risks to the programme's continuity are recorded, reviewed, and reported upon the SoP executive and the CoMH executive and actions are identified to mitigate specific risks.
Compliance with Standard:	The accreditation team is satisfied that this standard has been met
Commendations **Recommendations** **Conditions**	The accreditation team **commends** the SoP for the: - strong genuine culture of continuous enhancement that is evident across the School.

Standard 7: Students

Standard 7: Students	Accreditation Team's Commentary
7. There must be processes at the HEI and School level to assist students in the Professional Degree Programme (both prospective and enrolled), in understanding the expectations of them, as well as the support available to develop as future practising professionals. This includes the practice placement elements of the Professional Degree Programme. Students are expected to actively engage with the Professional Degree Programme recognising the primacy of patient safety and to be supported in developing their role as professionals. 1) Admission to, and progression on the Professional Degree Programme Policies and procedures must be in place and regularly assessed and these must: a) be open, fair and available to prospective applicants and enrolled students ensuring non-discrimination b) include a clear statement of the requirements and student expectations for admission (including policies on transfer credit and course waivers), progression through the programme and successful completion to align with the CCF, alongside any requirements as approved by the PSI Council from time to time	The accreditation team welcomed the opportunity to meet with a cross-section of students enrolled on the MPharm programme and is grateful to this engaged and articulate group for their substantial contribution to the accreditation process. The team is satisfied that there are clear policies and a comprehensive set of supports and processes in place that, in general, are well defined, inclusive, and support students on their path to future professional practice. As noted under standard 6, in addition to its own quality assurance processes, the SoP also relies on quality assurance infrastructure at university and college level to support regular assessment, review and revision of policies, procedures and processes as necessary. There are clear, defined and well signposted pathways for students to enter on to the MPharm programme. These include specific access routes such as the Higher Education Access Route (HEAR) and the Disability Access Route to Education (DARE). The SoP's admissions policy aims to ensure that approximately 10% of students gain access to the MPharm programme through DARE and HEAR. DARE, and these students are supported through specific measures such as a bespoke orientation programme. The SAR confirms that staff of the SoP are not specifically made aware of students who enter the programme through DARE or HEAR routes. The SAR sets out the SoP's entry requirements for prospective students, including those entering through the Central Admissions Office (CAO) route, mature students, advanced student entrants, students availing of recognition of prior learning (RPL) and international/non-EU applicants. It is noted that these requirements are variously set out online on the University's website and within university policy and guidelines. These routes are aligned with the requirements of the PSI. There was good awareness of the various entry routes available among students at the onsite visit, including RPL. Students may raise complaints and any challenges experienced through a variety of means. There is an institutional complaints procedure, which is communicated to students at orientation. At this point of the students' journey, they are also made aware of the pharmacy student rights through a presentation by the Head of School and the BPharm1 year coordinator. These are also set out in the Canvas orientation module and in the SoP Code of

c) incorporate a fair and just complaints and appeals process with regard to progression on the Professional Degree Programme d) specify how professional requirements, including fitness for practise, appropriate for the professional programme are met.	Behaviour. The SoP operates an open-door policy and students are encouraged to raise any issues experienced with their mentor or with other school staff. Students are accorded the opportunity to review scripts where they have failed a module. They may also meet with staff members to discuss the scripts and receive guidance on how they can improve. Where a student is unsuccessful in progressing to the next academic year, they will have a meeting with their year coordinator at the beginning of the repeat academic year to ensure they have access to any supports that they may need.
2) Student Support Appropriate and timely support must be in place for students in all learning and training environments on the Professional Degree Programme including:	As noted elsewhere within this report, students are required to read and accept the University's fitness to practise requirements at registration and annually upon re-registration. An annual declaration of adherence to the Joint Schools of Pharmacy Code of Conduct is also required of each student. Garda vetting is completed for each student at registration.
a) Orientation b) identification of individual support needs c) provision of support for personal, academic, general welfare and careers matters d) support for the in-practice placements within the Professional Degree Programme to ensure a good learning experience e) access to pharmacy professionals throughout the programme who are able to act as role models f) a student complaints policy and procedures.	There are appropriate supports in place for MPharm students and the overall infrastructure incorporates both academic and pastoral supports and includes tutoring, peer mentoring and counselling services. A comprehensive orientation programme comprising both university- and SoP-specific inductions, is provided, and this is supported by a Canvas-based orientation module, which includes introductory information relevant to the MPharm programme and the overall institution. A specific orientation is provided for international students, with a specific focus on moving to a new country, city and/or culture. Module-specific orientations are provided to students at the outset of each new module, during which the module coordinator outlines content and expectations. Finally, as noted elsewhere in this report, the SoP's Practice Educator provides orientation to students before they embark on their second-, fourth- and fifth-year placements. For those learners engaging in international placement, there is also support provided by the internationalisation officer. The accreditation team welcomes the comprehensive supports provided by the SoP to its students and the SoP's engagement with students to identify and support individual needs. This includes the operation of a mentoring scheme for all students enrolled on the MPharm programme, an open-door policy within the School, and dedicated drop-in clinics for learners during the first four weeks of semester 1. Specific workshops and training are made available to students to upskill in specific areas, including learning to learn and public speaking (the

3) Student Guidance	latter initiative was introduced following a survey of MPharm students to assess their views on oral assessment). The accreditation team also notes the innovation displayed by the SoP in introducing 'Wobble Week' for first-year pharmacy students during mid-November to support students who may be experiencing doubts or difficulties. However, the accreditation team also advises that additional care may be needed to support students with disabilities when it comes to disclosing same. The accreditation team acknowledges the significant hurdle that a student may need to overcome to disclose a disability within their programme of study and emphasises the need for additional supports to be provided at school and institutional level to ensure such learners are adequately and appropriately assisted to undertake their studies.

Students are expected to actively engage with the Professional Degree Programme recognising the primacy of patient safety whilst also their role in developing as professionals.
 	
This includes guidance on:
 	
  a) student personal and professional development through support structures that encourage active engagement in relevant or appropriate extra-curricular activities, travel and/or volunteer work/paid work
 	
  b) citizenship through encouragement of active engagement with relevant pharmaceutical students' representative associations at HEI, national and international levels, and other groups and committees which may be external to pharmacy.
	As noted elsewhere in this report, the accreditation team is confident that students are well supported both in the lead-up to and during their practice placements in first-, second-, fourth- and fifth-year. They are also satisfied that students have sufficient opportunities to engage with pharmacy professionals throughout the programme. A significant proportion of SoP academic staff and leadership are registered pharmacists and the accreditation team notes that these individuals will serve as role models for students throughout the programme; externally, preceptors/tutor pharmacists will also take on this function.
	
	The accreditation team is satisfied that the primacy of patient safety is emphasised to students from the outset of the programme and is integrated throughout the programme, including within placement elements. Expectations and obligations of MPharm students with regard to patient safety are set out within the Code of Conduct. Reflective elements of the programme will support students in considering their role in developing as professionals.
	
	A substantial complement of professional and personal development activities and supports are available to students across their five years of study. Students may apply for scholarships and/or opportunities to undertake summer research (including SURE and HRB scholarships). Students are encouraged to continue their studies following completion of the MPharm, and several MPharm graduates have gone on to undertake a PhD. As detailed above, international placements are also open to MPharm students, and students at the onsite visit appeared particularly enthusiastic about these opportunities. At an institutional level, interview skills training and CV preparation supports are provided by UCC Career Services.

	There is an active pharmacy student society (PharmSoc) in place within the SoP, founded in 2008, which supports students to settle into the programme and the SoP through the organisation of social events, information evenings and excursions. In its own words, as set out within the SAR, PharmSoc aims to help students to "further develop individual, professional and leadership qualities and to make pharmaceutical and international connections at all levels". The society has established a buddy system, which pairs a first-year student with a second-year student, who can provide them with advice and guidance about the MPharm programme. It is also actively involved in organising conferences and talks, often in collaboration with other student societies from the CoMH. In the spirit of encouraging active citizenship by its members, the society has also organised multiple fundraising initiatives to support various charities. There are linkages between PharmSoc and the pharmacy student societies of the other two schools of pharmacy in Ireland (Trinity College Dublin [TCD] and the Royal College of Surgeons in Ireland University of Medicine and Health Sciences [RCSI]). There is also engagement between PharmSoc and the national representative body for pharmacy students (IPSA) and the European body (EPSA).
Compliance with Standard:	The accreditation team is satisfied that this standard has been met.
Commendations Recommendations Conditions	The accreditation team **commends** the SoP for the: - initiative shown by the School in innovating to develop approaches and initiatives where needs are identified – for example, Wobble Week and its approach to the provision of feedback on assessment.

Additional Commentary

Observations in relation to the implementation of the National Open Disclosure Framework Requirements

Regard is had within the MPharm programme and its delivery to the Patient Safety (Notifiable Incidents and Open Disclosure) Act 2023 and the National Open Disclosure Framework 2023. This is evident across multiple modules, including those that prepare students for placement. The SoP maintains an open

disclosure policy, and students are also provided with the APPEL open disclosure policy. The accreditation team is satisfied that regard has been had to the requirements of the 2023 Act and the accompanying framework in the design of the MPharm programme and that, through their engagement with the programme, students will receive appropriate support, instruction and practice that will prepare them for Open Disclosure in their professional lives.

Final Comment

Signed: _____   Date:__30/5/2025_____

(Chairperson)

Appendices

Appendix 1: Documentation submitted as part of the accreditation submission from University College Cork

Self-Assessment Report (SAR)

Standard 1
1.1_School of Pharmacy Strategic Plan 2023 to 2028
1.2 ucc_securing_our_future_strategic_plan_23_28 (2)
1.3 SOP Governance Doc Rev 9 2024
1.4 RULESOFTHECOLLEGEOFMEDICINEANDHEALTH
1.5 School KPIs 2024
1.6 Annual Plan 2023 2024 Implementation Progress Report Q4 2024
1.7_FitnesstoPracticePolicy-update16-08-2024
1.8 Joint Schools of Pharmacy Code of Conduct v2
1.9 SOP Student Code of Behaviour
1.10 FTP Declarations tracking log
1.11 Annual declaration for committing to the Code of Conduct for Pharmacy students 2023-2024

Standard 2
2.1 AnOverviewofUniversityStructuresGovernance
2.2 CV_biblio_B.Griffin_2024
2.3 Responsibilties Head of School UCC
2.4 Pharmacy Risk Register 14 Nov 2024
2.5 UCC PSI Annual Report 2023_22_21 final

Standard 3
3.1 Staff_CVs_Qualifications_experience
3.2 Staff Training Oct 2021 to May 2024
3.3 Inventory School of Pharmacy 2023
3.4 Contingency Plans Business Continuity
3.5 List of publications 2020-2024
3.6 Pharmacy Building Virtual 3D tour and building layout

Standard 4
4.1 List of modules 2024
4.2 CCF mapping to MPharm
4.3 Map of Year Learning outcomes to CCF
4.4 BPharm MPharm Modules 2024_2025
4.5 Timetables 2024-2025
4.6 APPEL Submission to support UCC application for Continued Accreditation of MPharm Programme 2024 (2)
4.7 Placement update and student evaluations of practice experiences
4.8 PRE policies and proceduresv1
4.9 SOP Open Disclosure policy
4.10 APPEL Open Disclosure Policy
4.11 Patient Journey Explanatory Document v2 Nov 2024

Standard 5
5.1_LTA strategy V5
5.2_Good Laboratory Practices SoP
5.2a_Screenshot of Canvas module on Good Laboratory Practice

5.3_UCC Group Work Guidelines
5.4_Patient Safety theme mapping to CCF
5.5_PF3009 Poster Student Peer Feedback
5.6_Antimicrobials theme mapping to CCF
5.7_Year Assignment mapping to CCF
5.8_Year Assignment mapping to Miller's levels
5.9_Example of learning unit mapping to Module and programme LO & CCF

Standard 6   6.1 Self Evalaution Report GuidelinesTemplate-Academic Units
6.2 UCC Institutional Review 2023
6.3 Quality Improvement Plan
6.4 External Examiner Reports 2023 24
6.5 Strategic planning on curriculum review and development
6.6 Annual School report to College Exec 2022 & 2023

Standard 7   7.1 Student handbook and introduction to Pharmacy Canvas Course
7.2 MPharm_UCC general admissions overview
7.3 BPharm MPharm Academic Catalogue Entry 2024 25
7.4 Marks & Standards UCC 2023_24
7.5 Student progression statistics
7.6 BPharm1 Orientation 2024 - presentation slides
7.7 MPharm Orientations 2024_2025
7.8 Pharmacy Mentoring Briefing Document 2024 2025
7.9 Student survey BPharm1, 2,3,4 & MPharm 2024
7.10 Recognition of prior learning form Rev 2 Sept 2024

Additional documentation   SOP Strategy HoS introduction 2025
(PowerPoint presentation)
Notes SOP Strategy Away Day Thursday 28 April 2022
Minutes of SEC meeting of 10 October 2024 FINAL
Meeting minutes TCDC 10 Oct 2024
APPEL Competency Assessment Underpinning Principles

Appendix 2: Agenda for accreditation visit

AGENDA

Accreditation Visit for the Five-Year Fully Integrated Master's Degree Programme in Pharmacy provided by University College Cork (UCC)
In accordance with
Article 7(2) (a)(iv) of the Pharmacy Act, 2007

AGENDA
Wednesday, 26 February – Thursday, 27 February 2025

		Day One: Wednesday, 26 February 2025 SCHOOL OF PHARMACY BOARDROOM, UCC	
Agenda No	**Time/Venue**	**AGENDA ITEM**	**STANDARDS**
1.	8:30 – 9:00	**Private meeting of the Accreditation Team.** • Professor Andy Husband – Head of School of Pharmacy, Newcastle University • Dr Fiona Hughes – Senior Lecturer (Education), Pharmacy Practice • Aisling Reast, MPSI, MSc – Head of Quality Enhancement, RCSI • Dr Elizabeth Mitchell – Senior Lecturer and Pharmacy Programme Lead (MPharm), University of Lincoln • Ms. Mairead Boland, Head of Quality Assurance, QQI (Rapporteur)	
2.	9:00 – 10.30	Meeting with Head of School and Team responsible for the programme • Welcome and introductions. • Presentation by the Head of School (15 mins max). • Overview of programme developments since the last accreditation visit. • Overview of the strategic plan for the College and School. **UCC Attendees:** Prof Brendan Griffin, Dean and Head of School of Pharmacy Prof Laura Sahm, Vice Dean of the School of Pharmacy Dr Aoife Fleming, Director of MPharm and Vice Head for Interprofessional Learning College of Medicine and Health, UCC	1-8 (particular focus on standard 1)

		Dr Sonja Vucen, Chair of Teaching & Curriculum Development committee Dr JJ Keating, Chair of Student Experience committee Ms Noreen Moynihan, School Manager	
3.	10.30 – 10:45	**Private meeting of accreditation team.**	
4.	10:45 – 11.45	Meeting with UCC representatives involved in Leadership, Organisation and Governance. **UCC Attendees:** Prof Stephen Byrne, Deputy President and Registrar [confirmed] Prof. Helen Whelton, Head of College of Medicine & Health [confirmed] Prof. Brendan Griffin Prof. Laura Sahm Prof. Caitriona O'Driscoll, Professor of Pharmaceutics Prof. Anita Maguire, Professor of Pharmaceutical Chemistry Prof Christian Waeber, Professor of Pharmacology Prof. Abina Crean, Chair of Equality, Diversity and Inclusion committee Dr Katie Ryan, Chair of Research & Graduate Studies Committee Dr. Sonja Vucen Dr. JJ Keating Ms Noreen Moynihan Mr. Michael Cronin, Chief Technical Officer	Standard 2
5.	11:45 – 12:00	**Private meeting of accreditation team.**	
6.	12:00 – 12:30	Tour of School of Pharmacy. Prof Brendan Griffin Prof Laura Sahm Dr Michael Cronin	
7.	12.30 - 13.30	**Lunch**	
8.	13:30 – 14:30	Meeting with UCC representatives involved in Resources. **UCC Attendees:** Prof Brendan Griffin Prof Laura Sahm Ms Aine Foley - College Analyst College of Medicine & Health [confirmed] Ms Niamh Healy - HR Business Manager, College of Medicine & Health [confirmed] Ms Noreen Moynihan	Standard 3
9.	14:30 – 14:45	**Private meeting of accreditation team.**	

10.	14:45 – 15:45	Meeting with relevant staff who will be involved in coordination and quality assurance of practice placements with APPEL. **UCC Attendees:** Prof. Brendan Griffin Dr Aoife Fleming Ms Ruth McCarthy Dr Maria Donovan **APPEL Representatives:** Ms. Katherine Morrow [confirmed]	
11.	15:45 – 16:00	**Private meeting of accreditation team**	
12.	16:00 – 17:00	Meeting with UCC representatives involved in Curriculum: Structure and Evaluation **UCC Attendees:** Dr Aoife Fleming, Prof Brendan Griffin Pro. Laura Sahm Dr Sonja Vucen Dr JJ Keating Ms Noreen Moynihan Prof Cormac Gahan Dr Joseph O'Shea Dr Michelle O'Driscoll Dr Evin Allen Dr Piotr Kowalski Dr Maria Donovan Dr Farouk Markos Dr Florence McCarthy Dr Siobhan O'Mahony Dr Kevin Murphy	Standard 4
13.	17:00 – 17:15	**Private meeting of accreditation team.**	

	Day Two: Thursday, 27 February 2025		
	UCC		
Agenda No	**Time/Venue**	**AGENDA ITEM**	**STANDARDS**
1.	8:45 – 9:00	**Private meeting of the Accreditation Team.**	
2.	9:00 – 10:00	Meeting with UCC representatives involved in Curriculum: Teaching, Learning and Assessment. **UCC Attendees:** Dr Sonja Vucen Prof Brendan Griffin Dr Aoife Fleming, Ms Noreen Moynihan Dr Eoin Fleming Dr Tim O'Sullivan Dr Teresa Barbosa Dr Kevin Murphy Dr Patrick O'Dwyer Dr Edel Burton Dr Lorraine Bateman Dr Maria Donovan Ms Beth Buchanan Dr Siobhan Kerins	Standard 5
3.	10.00 - 10.15	**Private meeting of the Accreditation Team.**	
4.	10:15 – 11.15	Meeting with UCC representatives involved in the Quality Assurance and Enhancement. **UCC attendees:** Prof Laura Sahm Prof Brendan Griffin Dr Aoife Fleming, Dr Sonja Vucen Ms Ruth McCarthy Ms Noreen Moynihan Elizabeth Noonan Quality Enhancement Unit [confirmed]	Standard 6
5.	11:15 – 11:30	**Private meeting of accreditation team.**	
6.	11:30 – 12.30	Meeting with UCC representatives involved in Students. **UCC Attendees:** Dr JJ Keating Prof Brendan Griffin	Standard 7

		Dr Lorraine Bateman Dr Rachel Moloney Dr Harriet Bennett-Lenane Dr Kieran Dalton Dr Aoife Fleming Dr Maria Donovan Dr Suzanne McCarthy Dr Jatin Nagpal Ms Aisha Murphy Ms Beth Buchanan Dr Fatma Farag	
7.	**12:30 – 13:30**	**Lunch**	

8.	13:30 – 14:30	Meeting with a representative cohort of current MPharm students: To include students from all years of the programme, different Access routes (including mature learners) and international students.
		
		Attendees:
		BPharm1
		    Presley Jeche
		    Anna Cashman
		BPharm2
		    Paula Capatici
		    Oran Neville
		    Beth O'Halloran
		    Ha Trang Nguyen
		BPharm3
		    Claire O'Connor
		    Caroline Duggan
		    Kate Laffan
		    Enya Holt
		    Ronan Lalor
		BPharm4
		    Jennifer O'Malley
		    Grainne Egan
		    Clodagh Ginty
		    Marc Brick
		MPharm
		    Luke Healy
		    Catherine McGann	

9.	14:30 – 14:45	**Private meeting of the accreditation team.**	
11.	14:45 – 15:45	Meeting with UCC representatives to get on further clarifications (if required). **UCC Attendees:**	

		Prof. Brendan Griffin	54
12.	15:45 – 16:30	**Private meeting of the accreditation team.**	
13.	16:30 – 16:45 LG01	Meeting with UCC representatives to convey recommendation of the accreditation team. **UCC Attendees:** All staff	

Attendance List School of Pharmacy

Academic Staff Name	Role within the programme	Position of responsibility in the School
Prof Brendan Griffin	Professor of Biopharmaceutics & Drug delivery	Dean and Head of School
Prof Laura Sahm	Professor of Clinical Pharmacy	Vice Dean of School and Head of Discipline of Clinical pharmacy
Prof Caitriona O'Driscoll	Professor & Chair of Pharmaceutics	Head of Discipline of Pharmaceutics
Prof Christian Waeber	Professor of Pharmacology	Head of Discipline of Pharmacology
Prof Anita Maguire	Professor & Chair of Pharmaceutical Chemistry (Joint appointment with School of Chemistry)	Head of Discipline of Pharmaceutical Chemistry
Prof Abina Crean	Professor of Pharmaceutics	Chair of EDI Committee
Dr J J Keating	Lecturer in Pharmaceutical Chemistry	Chair Student experience Committee
Dr Sonja Vucen	Senior Lecturer in Pharmaceutics	Chair of Teaching & Curriculum development (acting)
Dr Katie Ryan	Senior Lecturer in Pharmaceutics	Chair of Research & Graduate Studies, Programme director COPD
Prof Cormac Gahan	Professor of Microbiology (joint appointment with School of Microbiology)	
Dr Eoin Fleming	Lecturer in Biochemistry (joint appointment with the School of Biochemistry)	Programme Director, MSc BioPharma Processing
Dr Tim O'Sullivan	Senior Lecturer in Pharmaceutical Chemistry	
Dr Teresa Barbosa	Lecturer in Clinical Pharmacy	Programme Director MSc Clinical Pharmacy
Dr Suzanne McCarthy	Senior Lecturer in Clinical Pharmacy	Coordinator of Mature students & Advanced entry, Athena Swan Co-Lead
Dr Aoife Fleming	Senior Lecturer in Clinical Pharmacy	Programme Director MPharm
Dr Kieran Dalton	Lecturer in Clinical Pharmacy	BPharm4 Year Coordinator; Chair of Social Research Ethics Committee
Dr Maria Donovan	Lecturer in Clinical Pharmacy	Coordinator of Internationalisation
Dr Rachel Moloney	Lecturer in Pharmacology	Coordinator of BPharm2
Dr Kevin Murphy	Lecturer in Clinical Pharmacy	Coordinator of Examination Marks

Dr Joseph O'Shea	Lecturer in Pharmaceutics	Programme Director of MSc Pharmaceutical Technology & Quality Systems
Dr Lorraine Bateman	Lecturer in Pharmaceutical Chemistry (0.5 FTE)	Coordinator of BPharm1
Dr Piotr Kowalski	Senior Lecturer in Pharmaceutics	
Dr Patrick O'Dwyer	Lecturer in Pharmaceutics	Programme Director of PgDip/MSc Pharmaceutical Regulatory Sciences
Dr Harriet Bennett Lenane	Lecturer in Pharmaceutics/Clinical Practice	Coordinator of BPharm3 (acting)
Dr Evin Allen	Lecturer in Industrial Pharmacy	Programme Director MSc Industrial Pharmaceutical Sciences, Operations & Management
Dr Michelle O'Driscoll	Lecturer in Clinical Pharmacy	
Dr Jatin Nagpal	Lecturer in Pharmacology	
Dr Edel Burton	Lecturer in Clinical Pharmacy (Maternity cover)	School of Pharmacy Social Research Ethics Committee (Member-acting)

Attendance List Affiliated Departments/Schools

Module Coordinator	Position	Role
Dr Siobhan O'Mahony	Senior Lecturer , Department Anatomy and Neuroscience, School of Medicine	Module Coordinator AN1075 Principles of Human Structure for Pharmacy Students
Dr Markos Farouk	Lecturer , Department of Physiology, , School of Medicine	Module Coordinator PL1400 & PL1401 Introduction to Physiology for Pharmacy I & II
Dr Florence McCarthy	MPSI Senior Lecture, School of Chemistry	PF2013 Pharmaceutical Chemistry
Dr Sinead Kerins	Lecturer , School of Biochemistry	BC2443 – Molecular Microbiology

Attendance List University/National Representation

Prof. Stephen Byrne	Deputy President and Registrar
Prof Helen Whelton	Head, College Medicine & Health
Ms Aine Foley	Financial Analyst, College of Medicine & Health
Ms Niamh Healy	HR Business Manager, College of Medicine & Health
Ms Katherine Morrow	National Director & Co-ordinator of APPEL
Ms Elizabeth Noonan (TBD)	Director, Quality Enhancement Unit

Apologies

Dr Margaret Bermingham	Senior Lecturer in Clinical Pharmacy	(On Maternity leave)

Student representatives

Name	Year
Presly Jeche	BPharm1
Anna Cashman	
Paula Capatici	BPharm2
Oran Neville	
Beth O Halloran	
Ha Trang Nguyen	
Claire O' Connor	BPharm3
Caroline Duggan	
Kate Laffan	
Enya Holt	
Ronan Lalor	
Jennifer O'Malley	BPharm4
Grainne Egan	
Clodagh Ginty	
Marc Brick	
Luke Healy	MPharm
Catherine McGann	